

HESTA income stream change of banking details form

HESTA

Use this form to update banking details on your income stream account. Complete all parts of this form in capital letters by typing in your details or, using a black pen, scan and email all requirements to hestais@hesta.com.au or mail to: **HESTA, Locked Bag 5136, Parramatta NSW 2124**. Check that you have signed and dated the declaration and that you have attached a copy of your bank statement showing your new banking details.

Please note, we will be unable to change your banking details until a copy of your bank statement is provided.

1 Your existing member details with HESTA

Complete this section in full. Do not use initials. Your full name and date of birth will help us accurately identify your account.

2 Your new banking details

Complete this section for changes to your banking details.

Your nominated bank account must be held in your name or, if it is a joint account, you must be one of the account holders.

You must also provide a copy of your bank statement so we can confirm the details being provided.

Please send copies: **DO NOT** send originals.

1 Your existing member details with HESTA

Completing this section in full will help us identify your account.

Member number:

Date of birth:

Title: Ms Mrs Miss Mr Dr Other

Given name/s:

Family name:

Postal address:

PO Box/Unit number/Street number

Street name

Suburb

State/Terr.

Postcode

2 Your new banking details

Your nominated bank account must be held in your name or, if it is a joint account, you must be one of the account holders.

Please pay my income stream as follows

Name of bank/building society/credit union:

Name account is held in:

Branch number (BSB):

Account number:

I confirm that the bank account is in my name (or jointly) and the details provided above are correct.

You must attach a copy of your bank statement

3 Declaration

I declare that I have read all the information supplied and that the details on this form are correct. I have read and understood the HESTA Privacy Collection Statement, and consent to the Trustee of HESTA collecting, using and disclosing my personal information.

Member's signature:

Date:

contact us

hesta@hesta.com.au | 1800 813 327 | Email form to hestais@hesta.com.au or mail to: **HESTA, Locked Bag 5136, Parramatta NSW 2124**

Issued by H.E.S.T. Australia Ltd. ABN 66 006 818 695 AFSL No. 235249, Trustee of Health Employees Superannuation Trust Australia (HESTA) ABN 64 971 749 321. The information you provide on this form, and any subsequent information you provide to us or our service providers in relation to this form, is collected in accordance with the HESTA Privacy Collection Statement available at hesta.com.au/privacy or by calling 1800 813 327. Where you provide us with personal information about another person, it is your responsibility to notify that person about the disclosure of their personal information to us.