

Confirmation of foreign bank account number details with a SWIFT structure

DECLARATION TO BE FILLED IN BY FINANCIAL INSTITUTION

Attention: Ask your financial institution to fill in this bank declaration. It is your financial institution which must send this information by e-mail to payout@aginsurance.be.

We will not accept a declaration if you complete it and return it.

| AG reference: | |
|---|--|
| | |
| With this form, I hereby confirm that | |
| Surname: | First Name: |
| Born on:// | |
| is the account holder of the following bank account which h | as been opened with our financial institution: |
| Account number: | Swift: |
| Currency: | |
| Name of financial institution: | |
| Complete address of the financial institution: | |
| | |
| | |
| | |
| This attestation was made by (surname and first name of the | ne undersigned): |
| | |
| PUSITIUIT. | |
| | |
| | |
| Signed in | , on// |
| Signature and stamp: | |

As a data controller, AG processes the personal data obtained in this form with a view to managing the supplementary benefits taken out by the employer or sector on behalf of its staff members (supplementary pension and/or occupational health insurance) and entrusted to AG for management purposes, complying with statutory and regulatory obligations such as tax obligations and prevention of moneylaundering, and detecting and preventing misuse and fraud. More information about the processing of personal data can be found in our Privacy Notice on www.ag.be.











