



Change of Address and / or  Change of Name for Deposits / Fixed Term Products

**IMPORTANT** - The notes overleaf should be read before filling in this form. Please place an X in the appropriate box(es) above. Any field containing \* is a mandatory field and must be completed.

**PANEL A | CUSTOMER DETAILS**

Title\*  First Name\*  Current Surname\*  **IMPORTANT:** Please note, your registered address and / or name will be changed on all of your Ireland State Savings holdings. See note 1.

Contact Telephone Number\*  SSCN  Date of Birth\*  DD  MM  YYYY  Account Number\*

**PANEL B | CHANGE OF ADDRESS DETAILS - see note 3**

I request Ireland State Savings to amend my registered address as follows:

Former Address\* (BLOCK CAPITALS)  Eircode   
 Any other former addresses can be noted on a separate page which should be included with this form.

New Address\* (BLOCK CAPITALS)  Eircode   
**IMPORTANT:** Please refer to the notes section overleaf regarding Evidence of Identity requirements.

**PANEL C | CHANGE OF NAME DETAILS - see note 4**

Former Name Details\* (BLOCK CAPITALS) Title\*  First Name\*  Surname\*

Former Signature\*  **IMPORTANT:** You must provide proof of your former name details by way of an original or certified<sup>1</sup> copy of, for example, EU Driving Licence or Passport, a marriage certificate, deed poll certificate or decree absolute (in the case of a divorce).

New Name\* (BLOCK CAPITALS) Title\*  First Name\*  Surname\*

New Signature\*  **IMPORTANT:** All requests for a change of name must be accompanied by original documents or certified<sup>1</sup> copies of original documents as per note 4.

**PANEL D | THIS PANEL MUST BE SIGNED BY THE HOLDER & THE WITNESS - see note 5**

**Declaration and Signature:** Please sign below to confirm you have read and understand the notes overleaf regarding Evidence of Identity and Personal Data. Please sign and date. I/we request you to amend my name and / or address details, as per Panel B and / or C above.

Signature\*  Date\*  DD  MM  YYYY

Nominated Parent/ Guardian Signature (where customer is minor, under 18)  Date  DD  MM  YYYY

**Witness** I confirm that the person named above has signed in my presence and has provided **current and valid proof of name documentation (for both their former name and new name if changing name) and two current and valid proof of address documents (not older than 6 months) displaying the new quoted address.** I also confirm that the proof documentation provided has been photocopied and the photocopies have been marked as 'original sighted' and are enclosed with this form.

Witness Name\* (BLOCK CAPITALS)  Witness Contact Tel. No\*

Witness Address\* (BLOCK CAPITALS)

Witness Signature\*  Eircode

Witness Occupation\* (BLOCK CAPITALS)  Date\*  DD  MM  YYYY

Please note, all relevant photocopies of proof documentation must be certified by an independent witness, stamped and returned along with this form to: Ireland State Savings, FREEPOST, Customer Administration, GPO, Dublin 1, D01 F5P2

**PANEL E | CHECKLIST FOR DOCUMENTATION REQUIRED FOR EACH NAME HOLDER REQUESTING CHANGE (Please see notes overleaf)**

Change of Address	Completed Form	<input type="checkbox"/>	Proof of Name	<input type="checkbox"/>	Two Proofs of Address	<input type="checkbox"/>
Change of Name	Completed Form	<input type="checkbox"/>	Proof of Name	<input type="checkbox"/>	Two Proofs of Address	<input type="checkbox"/>
					Proof of Former Name	<input type="checkbox"/>



## IMPORTANT NOTES - To be read before filling out this form

### 1. GENERAL INFORMATION

Please complete the form in BLOCK CAPITALS using blue or black ink and return the completed form together with the original or certified<sup>1</sup> copies of proof documentation to: **Ireland State Savings, FREEPOST, Customer Administration, GPO, Dublin 1, D01 F5P2**. Please note, all fields containing \* are mandatory fields and must be completed. The Form for 'Prize Bond Change of Address/Name' should be completed and sent to: Ireland State Savings, FREEPOST, Prize Bonds, FEXCO Centre, Killorglin, Co. Kerry, V93 WN9T. Both forms are available for download at [statesavings.ie](http://statesavings.ie) or on request by calling 0818 20 50 60 / 01 705 7200. We may need to phone you to clarify details relating to your request. We will always ask security questions to confirm your identity and confirm details of your request. We will never ask you to disclose information such as your PPSN, Bank Account details, Passwords etc. If you have any doubts, please immediately phone the Ireland State Savings Team - 0818 20 50 60 / 01 705 7200.

### 2. STATE SAVINGS CUSTOMER NUMBER (SSCN)

The State Savings Customer Number (SSCN) is a unique customer number that identifies you and enables you to transact with us easily. Your SSCN may be printed on correspondence you receive from us. See [statesavings.ie/SSCN](http://statesavings.ie/SSCN) for more details.

### 3. CHANGE OF ADDRESS

Please ensure you supply details of your former address as well as your new address. All requests for a change of address must be accompanied by original documents or certified<sup>1</sup> copies of original documents as follows; **ONE** current and valid proof of name document and **TWO** current and valid proof of address documents (not older than 6 months) displaying the new quoted address. All original documents supplied will be returned to you. Should you have any queries or difficulty in providing this documentation, please contact us on 0818 20 50 60 / 01 705 7200.

### 4. CHANGE OF NAME

Please ensure you supply details of your former name as well as your new name. You must provide proof of your former name details by way of an original or certified<sup>1</sup> copy of, for example, EU Driving Licence or Passport, a marriage certificate, Deed Poll certificate or decree absolute (in the case of a divorce). As a change of name will necessarily invoke a change of signature you must provide a sample signature. All requests for a change of name must be accompanied by original documents or certified\* copies of original documents as follows; **ONE** current and valid proof of name document (confirming your new name details) and **TWO** current and valid proof of address documents (not older than 6 months). All original documents supplied will be returned to you. Should you have any queries or difficulty in providing this documentation, please contact us on 0818 20 50 60 / 01 705 7200.

### 5. SIGNATURE & WITNESS

Please ensure that you sign this panel in the presence of an independent witness which must be any one of the following; A Post Office Official, Member of An Garda Síochána, or a practising Solicitor / Commissioner for Oaths.

Acceptable proof of address documentation includes original or \*certified copies of any **TWO** of the following: Current (not older than 6 months) and valid Household bill (electricity, telephone, gas), Bank, Building Society or Credit Union statement, official document from the Revenue Commissioners or the Department of Employment Affairs and Social Protection. Acceptable proof of name documentation includes original or certified copies of any **ONE** of the following: Current and valid EU Driving Licence or Passport. All original documents will be returned to you.

**Please ensure that all of the required proof documentation has also been appropriately witnessed as set out in Panel D**

<sup>1</sup>Certified Copy - You may bring the original documents to any Post Office where a Post Office Official can photocopy the original to certify it is a true copy of the original. Alternatively you can bring the original documents to a Member of An Garda Síochána or a practising Solicitor/Commissioner for Oaths where they can photocopy the original and stamp it to certify it is a true copy of the original.

## Notes on Evidence of Identity and Personal Data

### 2. EVIDENCE OF IDENTITY & OTHER INFORMATION

2.1 You are required to confirm your identity to us (including your surname, first name, date of birth and address) from time to time for the purposes of:

- (a) the Agreement (including any Transactions)
- (b) the administration of your Product(s) and any other State Savings Product(s) that you may hold now or in the future; and
- (c) associated legal purposes, including compliance with statutory obligations relating to the prevention of money laundering and terrorist financing and any related guidance issued by relevant regulatory bodies, and account security and fraud prevention.

2.2 We may verify your identity:

- (a) electronically (by reference to information supplied by you, including your Personal Public Service Number (PPSN)); or
- (b) manually (by reference to acceptable original or certified copy documentation supplied by you, which may include documents such as your current passport, current EU driving licence, recent utility bill, recent account statement from a bank, building society or credit union, your Public Services Card and/or other official documentation issued to you by the Revenue Commissioners or the Department of Social Protection).

2.3 Where you have not provided evidence of your identity to our satisfaction for the purposes set out in condition 2.1, we will advise you and we will not proceed with your application to purchase the Product until your identity has been verified to our satisfaction.

2.4 We may also require you to provide certain other information to us about your nationality, employment status, source of funds (e.g. savings or income) and other information for the purposes of compliance with statutory obligations relating to the prevention of money laundering and terrorist financing and any related guidance issued by relevant regulatory bodies.

2.5 Where you have been requested to provide information pursuant to condition 2.4 and have not done so we will advise you and we will not proceed with your application to purchase a Product until the requested information has been provided to us.

### 3. PERSONAL DATA

3.1 This condition 3 (Personal Data) sets out a summary of the personal data that we may process in relation to you in connection with the Products, together with a summary of your data protection rights. A full copy of our Ireland State Savings Data Protection Statement is available at [statesavings.ie/help-support/help-articles/state-savings-data-protection-statement](http://statesavings.ie/help-support/help-articles/state-savings-data-protection-statement). If you would prefer to obtain a hard copy of the Ireland State Savings Data Protection Statement you can also write to us to request a copy at Data Protection Officer, Ireland State Savings, GPO, FREEPOST, Dublin 1, D01 F5P2.

3.2 The NTMA is the Controller (as defined in, and for the purpose of, the General Data Protection Regulation (GDPR)) for all personal data supplied by you. The Minister for Finance and the NTMA are each a 'specified body' for the purposes of sections 262 to 270 and schedule 5 of the Social Welfare Consolidation Act 2005, as amended, under which the NTMA and the Minister for Finance are both authorised to process personal data including PPSNs for certain purposes.

3.3 We will collect, process and use personal data relating to you, including your PPSN and the information referred to in condition 2 (Evidence of Identity & Other Information): (a) as necessary for the performance of the Agreement (including any Transaction); (b) for the administration of your Product(s) and any other Ireland State Savings Product(s) that you may hold now or in the future; and (c) for associated legal purposes, including compliance with statutory obligations relating to prevention of money laundering and terrorist financing and any related guidance issued by relevant regulatory bodies, and account security and fraud prevention.

3.4 You acknowledge the collection, processing and use of your personal data (including your PPSN) for the purposes as outlined in 3.3.

3.5 Personal data may be processed by us, our Agents, and any third-party service providers acting on our behalf for the purposes of the Agreement and for associated legal purposes and for any other purpose required for or reasonably incidental to the performance of the Agreement.

3.6 We will retain your personal data for as long as you have a holding with Ireland State Savings and otherwise in accordance with applicable data protection law and statutory obligations (including under legislation relating to prevention of money laundering and terrorist financing).

3.7 Subject to your consent, your personal data may be used by us, or our Agents, for the purpose of marketing Ireland State Savings Products. Where you hold more than one Product, the preferences indicated most recently by you will apply to all Products held by you to which the General Terms and Conditions apply.

3.8 Subject in each case to certain exceptions, you have the right to request access to and a copy of your personal data held by us in accordance with the GDPR, to have your personal data corrected where it is inaccurate or misleading, to have your personal data erased, to object to the processing of your personal data by us, to request the restriction of the use of your personal data, to withdraw your consent to the processing of your personal data, where we rely on your consent to process it, to request data portability in relation to your personal data. Should you wish to avail of any of these rights, please contact the Data Protection Officer, Ireland State Savings, GPO, FREEPOST, Dublin 1, D01 F5P2. You also have the right to lodge a complaint with the Data Protection Commission. See [dataprotection.ie](http://dataprotection.ie) for more information.