

**BANK CHANGE FORM**

Authorization Agreement For Direct Deposit of Pension Payments

Electrical Construction Industry Pension Plan

I hereby authorize the Electrical Construction Industry Pension Plan to directly deposit my Electrical Construction Industry Pension benefit payment into my account at the bank designated below.

Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip: \_\_\_\_\_

For Deposit To:

Checking \_\_\_\_\_  
Bank Routing Number Account Number

***PLEASE ATTACH A VOIDED CHECK OR A LETTER FROM BANK***

Savings \_\_\_\_\_  
Bank Routing Number Account Number

***PLEASE ATTACH A LETTER FROM BANK***

To correct any overpayments credited to my account during or after my lifetime, I hereby authorize the bank designated to debit my account and to refund any such overpayment to the Electrical Construction Industry Pension Plan.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date