btl/bdwe/2502

Notification of bank details for treaty-entitled persons

You can use this form to let us know your bank details or to change your bank details.
You can only submit this form if you are registered with the Health insurance abroad scheme.

Please fill out the form completely (use block capitals), sign and send to:

CAK Regeling Buitenland, Antwoordnummer 91041, 2509 VC Den Haag.

1 My details

1.1 First name _____

Initials _____

Surname _____

1.2 Date of birth ☐☐ ☐☐ ☐☐☐☐ *DD / MM / YYYY*

1.2 Burgerservicenummer (BSN) ☐☐☐☐☐☐☐☐☐

2 Bank details

2.1 IBAN ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2.2 BIC ☐☐☐☐☐☐☐☐☐☐☐

2.3 The account is in the name of _____

3 Signature

I declare that I have entered all the details truthfully.

3.1 Place _____

Date ☐☐ ☐☐ ☐☐☐☐ *DD / MM / YYYY*

3.2 Signature _____

Send the completed form to:
CAK
Regeling Buitenland
Antwoordnummer 91041
2509 VC Den Haag