

## Bank account details

### 1 Policy

Insurance Policy Number \_\_\_\_\_ Insured \_\_\_\_\_

If you indicate multiple accounts or if you wish to change an existing account, please mark it with a cross and add explanation.

Additional account(s)       Change an existing account

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### 2 Bank account details 1

### Bank account details 2

Name of Bank \_\_\_\_\_ Name of Bank \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

ZIP/City/Country \_\_\_\_\_ ZIP/City/Country \_\_\_\_\_

Account number \_\_\_\_\_ Account number \_\_\_\_\_

IBAN \_\_\_\_\_ IBAN \_\_\_\_\_

SWIFT \_\_\_\_\_ SWIFT \_\_\_\_\_

Bank code \_\_\_\_\_ Bank code \_\_\_\_\_

Account currency \_\_\_\_\_ Account currency \_\_\_\_\_

### 3 Comments

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Place/Date \_\_\_\_\_ Signature \_\_\_\_\_

**Please return the fully completed and duly signed form in the original to us by post or by e-mail to [finance.ch@allianz-trade.com](mailto:finance.ch@allianz-trade.com).**

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