

DIRECT DEPOSIT SIGN-UP FORM

(AUSTRIA)

**APPLICATION FOR PAYMENT OF UNITED STATES SOCIAL SECURITY
MONTHLY BENEFITS BY DIRECT DEPOSIT**
ANTRAG AUF DIREKTUEBERWEISUNG DER MONATLICHEN U.S. SOCIAL SECURITY
RENTENZAHLUNGEN AUF EIN SCHILLING- ODER EUROKONTO

Please make any necessary changes in Section 1A and complete Section 2. Ask your bank to complete Section 3. Mail the completed form in the envelope provided.

SECTION 1 If the address below is incorrect, please complete Section 1A. (Falls dies nicht Ihre Wohnadresse ist, schreiben Sie die korrekte Adresse in das Feld 1A.)	SECTION 1A If the address in Section 1 is your bank's address, please print your correct mailing address below.
	ADDRESS CHANGE
Social Security Claim Number	Person Entitled to Payment

SECTION 2

PAYEE CERTIFICATION I certify that I have read and understand the back of this form. In signing this form, I authorize the Social Security Administration to send my payment to my bank and deposit it in the designated account. I understand that personal information in these payments will be treated confidentially, but I consent to disclosure of payment information that is compelled by law or necessary to protect against fraud or crime.		JOINT ACCOUNT HOLDER=S CERTIFICATION I certify that I have read and understand the back of this form, including the SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS.	
SIGNATURE	DATE	SIGNATURE	DATE
DAYTIME TELEPHONE NUMBER		This account is: My own account. A joint account.	

SECTION 3 (Ask your bank to complete this section.)

This account must be in Euros.

NAME OF BANK	
ADDRESS OF BANK	
BANK PHONE NUMBER	SIGNATURE OF BANK OFFICIAL

Bank Code (Bankleitzahl) and Account Number (Konto Nr.)

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MAIL COMPLETED FORM TO:

Form SSA-1199-Austria- (08/04)

Approved OMB #0960-0686

International Treasury Services
Federal Reserve Bank of New York
E. Rutherford Operations Center, 1st Floor
100 Orchard Street
East Rutherford, NJ 07073
USA

IMPORTANT INFORMATION - PLEASE READ CAREFULLY

The information you give on this form is confidential. We need the information to send your U.S. Social Security payments electronically to your Austrian bank account.

IF YOUR ADDRESS CHANGES

If your address changes, you must inform the U.S. Social Security Administration. If Social Security Administration has to contact you and cannot locate you, your payments may be stopped.

WHEN YOU WILL RECEIVE YOUR DIRECT DEPOSIT PAYMENTS

Your payment will usually be in your bank account 3 days after the U.S. payment date. You can avoid waiting as long as 15 working days for your check to clear. With direct deposit you will have immediate access to your money.

INFORMATION ABOUT CURRENCY CONVERSION

Your U.S. Social Security payment is automatically converted to euros at the best available exchange rate at **no cost to you**. The conversion is done a few days before it is deposited into your account, thus the exchange rate may be different from the rate in effect on the day you receive your benefits in your account. With direct deposit you will **not** have to pay a fee to get your U.S. dollars Social Security check converted to euros.

SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS

If you have a joint account with a person who receives Social Security payments, and that person dies, you must immediately contact your bank **and** the U.S. Social Security Administration. Any Social Security payments deposited into a joint account after the death of a beneficiary must be returned to Social Security. As soon as we are advised of the death, if you are eligible to receive Social Security, we will determine whether your benefit amount will change and will send you any money that we owe you.

CHANGING BANKS OR BANK ACCOUNTS

If you change your bank or your account, you must notify:

Social Security Administration
Office of International Operations
PO Box 1756
Baltimore, MD 21235
USA

OR

Federal Benefits Unit
U.S. Consulate
Gartenbaupromenade 2, 4th Floor
A1010 Vienna
Austria

Do not close your old account until payments have started coming to your new account.

(Falls Sie Ihre Adresse, Ihre Bank oder Ihr Bankkonto ändern, informieren Sie bitte sofort das Amerikanische Konsulat, Federal Benefits Unit, Gartenbaupromenade 2, A-1010 Wien. Bitte warten Sie, bis die erste Ueberweisung auf Ihr neues Konto kommt, bevor Sie das alte Konto schliessen.)

PAPERWORK REDUCTION ACT STATEMENT

This information meets the requirements of 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 5 minutes to read the instructions, gather the facts, and answer the questions. You may send comments on our time estimate above to: SSA, 1338 Annex building, Baltimore, MD 21235-0001. Only comments relating to our time estimate should be provided, not the completed form.