Debit Card Payment Details

Only complete this section and attach to the application, if you are mailing the application form to State Savings, GPO, Dublin 1 (Freepost). Otherwise, leave this section blank and use your debit card with your PIN at a Post Office counter.

TYPE LASER ☐ MAESTRO ☐ VISA DEBIT ☐ (Please tick one)

CARD NUMBER

EXPIRY DATE D D M M Y Y

PHONE

CARDHOLDER NAME

ACCOUNT HOLDERS NAME

Ireland™ State Savings
NATIONAL TREASURY MANAGEMENT AGENCY