

Please note ¥ when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do not use the return or enter keys.

Complete on screen, print copy, sign by authorised signatory and then forward in your usual way. DO NOT EMAIL.

## 1. Account details

Account name  Account number   
Account holding branch  Sort code

## 2. Payee details

Name of person or organisation you are paying   
Payment reference (if known) ¥ this will appear on the bank statement of the person or organisation you wish to pay   
Sort code ¥ the bank code of the person or organisation you are paying   
Account number ¥ the account number of the person or organisation you wish to pay (Eight digits ¥ if less place zeros at the front)

## 3. About the payment

How often the payments are made: Weekly  Two weekly  Four weekly  Monthly   
Quarterly  Half yearly  Yearly

Amount   
Date and amount of first payment (DD/MM/YYYY)

(please allow 3 working days for receipt)

Date and amount of ongoing payments (DD/MM/YYYY)

(if different from the first payment)

Choose one of the following two options

1. Date and amount of final payment (DD/MM/YYYY)

2. Until further  notice

## 4. Confirmation

Customer Signature(s)

Date