

Regular Payments form

Please tick relevant box

- Set up a new Standing Order (please complete section A)
- Amend an existing Standing Order (please complete section B)
- Cancel an existing Standing Order or Direct Debit (please complete section C)

Please complete all boxes in BLOCK CAPITALS and tick when necessary.

Customer Account Details

Account Name

Sort code - -

Account number

Section A - Set up a new Standing Order (Who do you want to pay?)

Beneficiary Name

Sort code - -

Account number

Reference

Amount of first payment Date of first payment / /

Amount of usual payment Date of last payment / /

Frequency of Payment Date of Usual payment / /
(Weekly/Monthly/Annually)

Or please continue until further notice

Section B - Amend an existing Standing Order (Who you are paying?)

Beneficiary Name

Amend payment amount from to

Amend payment date from to

Amend payment frequency from to

Amend date of first payment from to

Amend reference number from to

Section C - Cancel an existing Standing Order or Direct Debit (Who you no longer want to pay?)

Beneficiary/Originator Name

Amount

Usual payment date

I wish to cancel with effect from / /

(For Direct Debit details you should also advise the originator of your cancellation).

All relevant sections must be fully completed for your request to be processed.

PLEASE ENSURE YOU SIGN AND DATE THE FORM.

(Where signing mandate is 'both' or 'all'; all relevant parties must sign to authorise.)

Customer Signature(s)

Contact Telephone Number Date / /

Please complete the form and hand into your local Bank.