

# CHANGE OF DETAILS FORM

ONE per customer

|                              |  |                                   |  |
|------------------------------|--|-----------------------------------|--|
| Name on Account<br>(In full) |  |                                   |  |
| Account Number(s)            |  | Online User ID<br>(if applicable) |  |

## WHAT IS CHANGING?

|                |  |                    |  |   |
|----------------|--|--------------------|--|---|
| CHANGE OF NAME |  |                    |  | ✓ |
| Previous Name  |  | Previous Signature |  |   |
| New Name       |  | New Signature      |  |   |

|                   |          |  |  |   |
|-------------------|----------|--|--|---|
| CHANGE OF ADDRESS |          |  |  | ✓ |
| New Address       |          |  |  |   |
|                   | Postcode |  |  |   |

|                                                                                                                                                                                                                                                                                                                                                               |  |                   |  |   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------|--|---|
| CHANGE OF CONTACT INFORMATION                                                                                                                                                                                                                                                                                                                                 |  |                   |  | ✓ |
| New Phone Numbers                                                                                                                                                                                                                                                                                                                                             |  | New Email Address |  |   |
| Daytime                                                                                                                                                                                                                                                                                                                                                       |  |                   |  |   |
| Evening                                                                                                                                                                                                                                                                                                                                                       |  |                   |  |   |
| Mobile                                                                                                                                                                                                                                                                                                                                                        |  |                   |  |   |
| <p>As a Member of the Society, you receive an Annual General Meeting (AGM) Voting Pack each year. You can elect to receive this by email to help us reduce our carbon footprint. Please tick ONE box below.</p> <p><b>YES</b> - I would like to receive my AGM Voting Pack by email</p> <p><b>NO</b> - I would like to receive my AGM Voting pack by post</p> |  |                   |  |   |
|                                                                                                                                                                                                                                                                                                                                                               |  |                   |  | ✓ |
|                                                                                                                                                                                                                                                                                                                                                               |  |                   |  | ✓ |

|                                                                                                             |  |  |  |  |                                                             |  |                |  |  |   |
|-------------------------------------------------------------------------------------------------------------|--|--|--|--|-------------------------------------------------------------|--|----------------|--|--|---|
| OTHER AMENDMENTS / UPDATES                                                                                  |  |  |  |  |                                                             |  |                |  |  | ✓ |
| Personal Details                                                                                            |  |  |  |  | Interest Instructions - choose from options 1, 2 OR 3 below |  |                |  |  |   |
| Occupation                                                                                                  |  |  |  |  | 1. Compound                                                 |  |                |  |  | ✓ |
| NI Number                                                                                                   |  |  |  |  | 2. Internal Transfer                                        |  | Account Number |  |  |   |
| Security Identifier                                                                                         |  |  |  |  | 3. Transfer to Bank                                         |  | Bank Name      |  |  |   |
| Number of Signatories required for withdrawals - Please tick ONE box below<br>1   ✓   2   ✓   3   ✓   4   ✓ |  |  |  |  |                                                             |  | Branch         |  |  |   |
|                                                                                                             |  |  |  |  |                                                             |  | Sort Code      |  |  |   |
|                                                                                                             |  |  |  |  |                                                             |  | Account Number |  |  |   |
|                                                                                                             |  |  |  |  | Account Name                                                |  |                |  |  |   |

|        |  |       |  |
|--------|--|-------|--|
| Signed |  | Dated |  |
|--------|--|-------|--|