



Standing Order Application Form

Please write clearly in the white spaces with capital letters or cross the boxes. **All** sections must be completed.
Please return the original form as photocopies are not acceptable. **Important** - we cannot set standing orders or direct debits up on savings accounts.

1 Your Details

Your full name or name of business <input type="text"/> Your contact name or telephone number <input type="text"/>	Sort code (being debited) <input type="text"/> <input type="text"/> <input type="text"/> Account number (being debited) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Branch name & address <input type="text"/> <input type="text"/> <input type="text"/>
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2 Details of your standing order

Does this instruction replace an existing standing order or direct debits? Yes <input type="checkbox"/> No <input type="checkbox"/>	Usual payment amount in words <input type="text"/> If yes please give details in special instructions below. Recipient's name <input type="text"/> <input type="text"/> Recipient's sort code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Recipient's account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> First payment amount (if different to usual payment) £ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> First payment date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Usual payment amount £ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Final payment £ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Final payment date (if applicable) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Your payment reference (if applicable) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Please give details of any special instructions <input type="text"/> <input type="text"/>	Until further notice <input type="checkbox"/> or <input type="checkbox"/>
Please give details of any special instructions <input type="text"/> <input type="text"/>	

3 Your agreement with us

I authorise you to debit my/our account, in accordance with the details in Section 2.
This request is addressed to the bank which holds my/our account.

Your signature(s)	Date
<input type="text"/>	<input type="text"/>