

## Removing an account holder(s)

### PLEASE INDICATE ACCOUNT NUMBER(S) TO BE AMENDED

A change of account holder is not permitted on: Organisation, Trust, Charity, Privilege Saver, Family First Saver, Family First Benefit, or ISA accounts.

Please complete this form in **BLOCK CAPITALS**.

### Customer(s) details to be removed

	Customer 1	Customer 2
Title	<input type="text"/>	<input type="text"/>
First name(s)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
N.I. number	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>
Telephone number	<input type="text"/>	<input type="text"/>

Is the correspondence address of the account to be changed?

Yes  No

If yes, please provide the new correspondence address

Address

Postcode

### Customer(s) to be removed from the account(s)

Please note: if your name is removed from an account(s), you'll no longer be entitled to any of the money in the account(s) or any interest due.

**If you are an adult being removed from a minor's sole account, you are being removed as an administrator not an account holder. Once the adult is removed from the account, the account will be operated by the minor.**

Full name(s)

Signature(s)






**Account details****Signing mandate**

You can choose how many signatories will now need to sign when operating or making a withdrawal from the account.

Any signatory to sign

All signatories to sign

An alternative number   
(please state how many)

**Remaining account holder(s)**

I/We agree:

- to the removal of account holder(s) as described in this form.
- that I/we continue to be bound by the Saving Accounts Terms and Conditions and the Specific Terms of this account.

**Signatures of all remaining account holder(s)**

Signatures		Date	dd / mm / yyyy
Signatures		Date	dd / mm / yyyy

**Office use only**

Customer number		
Existing account number/ID taken		
ID collected		Signatures checked
Branch number		Cashier number
Salutation		Date
		dd / mm / yyyy