HIRD PARTY MANDATE

PLEASE FULLY COMPLETE IN BLOCK CAPITALS

LEASE FOLL COM LETE IN SECONOMITALS.													
				I				Α	MI	Y			
MANDATE VALID	FROM:	DD					_		LDIN				
VALID TO:		DD					_		CIET				
OUR REF:	R												
NIANAE OF ACCOL	INIT LIQUEDED(C)	FIRST	NAMEI	DACCOUN	IT HOLDER	SECOND	NAMED /	ACCOL	JNT HO	OLDER			
NAME OF ACCOU	JNT HOLDER(S):												
SAVINGS ACCOUNT NO.(S): Please list all account numbers to be covered by this mandate													
1 Until the Socie	ety receives notice in writir	a to the	contrary	from the abo	ave named Assount H	dolder during the ma	ndata valid	ity pori	ad tha A	ccount			
	ses the Society:	ig to the c	.Oritial y	THOITI THE abo	ove named Account i	loider during the ma	iluate valiu	ity perio	ou, trie A	ccount			
	nstructions authorising pa	vment sig	ned on	the Account	Holder's behalf by the	a third party and in a	cordance	with the	account	t tarms			
	passbook(s) held by the S												
					•								
	Holder agrees that any inc			,	, ,				,				
	er (jointly and severally if												
	n demand and in the mear												
	is only valid for a maximu					newal confirmation v	vill be requ	ired eve	ry twelv	e months.			
4. This authority	should be extended to an	y addition	al acco	unts opened.	*								
The account he	older and third party(ies)	have read	and ac	cept the Thir	d Party Mandate Con	ditions overleaf.							
FIRST NAMED A	ACCOUNT HOLDER	SIGNED):				DATE:	DD	ММ	YYYY			
SECOND NAME	D ACCOUNT HOLDER	SIGNED):				DATE:	DD	MM	YYYY			
THIRD PART	Y'S DETAILS												
TITLE:	MR / MRS / MISS / MS	SURNAI	ME:			FORENAMES:							
	, , ,												
PERMANENT HOME ADDRESS:							POSTCOD	Е					
LIOME DITONE					MODILE DI JONE		rosicob	L:					
HOME PHONE:					MOBILE PHONE:								
EMAIL ADDRESS:						DATE OF BIRTH							
REASON FOR REGISTRATION:													
NUMBER OF THIR	RD PARTIES TO BE RECO	RDED:**		Separa	ite forms are required for	each third party							
* Delete if not require	ed. ** If two or more parties a	re authoris	ed to act	and are permit	ted to act individually, pl	ease add this notificatio	n after the n	ames.					
THIRD PART	Y MANDATE CO	NDITI	ONS										
	ill require to confirm the id												
	information, including info f we are unable to verify y												

- This mandate covers transactions only and does not authorise the third party to amend any account details, an example of this would be amendments to the account address.
- The loss or theft of the account passbook must be reported by the account holder. Reports of this kind will not be accepted by the third party.
- Transaction requests by post made by the third party will be processed in accordance with the instructions received and will be despatched to the account holders registered address unless we receive instructions to the contrary.
- Transaction requests made by the third party's personal visit to our branch office will be returned to the third party.

Consent and Confirmation of Third Party

By signing the Third Party Mandate form you are confirming that you have read the 'Third Party Mandate Conditions' and that you consent to your personal information being used to check your identity for money laundering purposes.

SIGNATURE OF THIRD PARTY	SIGNED:		DATE:	DD	ММ	YYYY	
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Please retain this copy for your information

THIRD PARTY MANDATE CONDITIONS

- The Society will require to confirm the identity of all third parties. To do this, we will make searches about you at a credit reference agency that will supply us with information, including information from the Electoral Register. The searches will not be seen or used by lenders to assess your ability to obtain credit. If we are unable to verify your name and address by this method, we will advise you of the additional documentation required.
- This mandate covers transactions only and does not authorise the third party to amend any account details, an example of this would be amendments to the account address.
- The loss or theft of the account passbook must be reported by the account holder. Reports of this kind will not be accepted by the third party.
- Transaction requests by post made by the third party will be processed in accordance with the instructions received and will be despatched to the account holders registered address unless we receive instructions to the contrary.
- Transaction requests made by the third party's personal visit to our branch office will be returned to the third party.

Consent and Confirmation of Third Party

By signing the Third Party Mandate form you are confirming that you have read the 'Third Party Mandate Conditions' and that you consent to your personal information being used to check your identity for money laundering purposes.

If you need this form in an alternative format please call us on 03330 140144



EBBISHAM HOUSE 30 CHURCH STREET EPSOM, SURREY KT17 4NL

family building society. co.uk

Tel: 03330 140143

Family Building Society is a trading name of National Counties Building Society which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

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