

New standing order



EXAMPLE INDIVIDUAL FORM

Please write clearly in black ink 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

MR A B ROBOT

Sort code (being debited)

012345

Account number (being debited)

87654321

Your contact telephone number

01234567890

Branch name

1 HIGH ST. ANYTOWN

2 Details of your standing order

Does this instruction replace any existing standing order or direct debit instructions?

Yes No

Your payment reference (if applicable)

BLHASVB

If yes please give details in special instructions below and arrange to cancel them.

If the funds are being sent to a non-Lloyds Bank account please allow up to three working days for funds to reach the recipient's account.

Recipient's name

Bedfordshire Local
Council History Association

First Payment amount (if different to usual payment)

£

Recipient's bank and branch name

Lloyds, High St, Bedford

First payment date

010416

Recipient's Sort code (6 digits)

309066

Recipient's Account number (8 digits)

01788437

Usual payment amount

£ xxxxxx5 - 00

How often do you want the payment made?

Weekly 4 weekly Monthly Quarterly Half yearly Yearly Other frequencies (give details)

Usual payment amount in words

Five pounds only per annum

Please give details of any special instructions

Final payment amount (if different to usual payment) This must have a final payment date

£

Final payment date (if applicable)

Until further notice

OR

3 Your agreement with us

Please note that we will not:

- make any reference to VAT or any other indeterminate element
- advise your address to the person/organisation you are paying
- tell the person/organisation you are not able to pay
- ask the bank of the person/organisation you are paying to tell this person/organisation when payments are received.

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.

PERSONAL CUSTOMERS - To check your account or amend a standing order call the Contact Centre on 0845 3 000 000

Your signature(s)

[Handwritten Signature]

Date 1/2/34

Once you have completed this form, please return it to: Lloyds TSB, Box 1, BX1 1LT

For bank use only

From branch name and contact name

High St Bedford (309066)

SMD checked

Sort code

309066

For 30-00-02 accounts and all corporate (set 41) customers, send the completed form to City Office, Gillingham, Kent, TNT 23.

Branch stamp