

Direct Payment Instruction

Our Ref: 1157/0910

Account Number:

Contact Name:
Company Title
Address

To enable us to make payments directly to your bank account, please:

- complete sections 1 - 5 in BLOCK capitals
- provide us with an original of one of the following items: **bank statement, paying-in slip or blank cheque (crossed)**
- tick this box if you would like the item returned to you
- return this form to **B&CE Benefit Schemes, Manor Royal, Crawley, West Sussex, RH10 9QP**

If you would like any further information regarding direct payments or help completing the form, please contact us on **01293 586666**. (To help us improve our service, telephone calls may be recorded.)

1 Full postal address of your branch

_____ BANK

_____ POSTCODE _____

2 Branch sort code

□□□	—	□□□	—	□□□
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3 Bank Account name (first 18 characters)

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4 Bank account number

□	□	□	□	□	□	□	□	□	□
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5 Declaration:

I/We instruct you to make payments directly to my/our bank account. I/We reserve the right to cancel this arrangement at any time.

N.B. This form should be signed by an authorised person(s) e.g. owner, partner, director.

SIGNATURE _____

NAME / STATUS _____

2nd SIGNATURE _____

NAME / STATUS _____

DATE _____ / _____ / _____