

Standing Order Instruction

Store	
1. CUSTOMER DETAILS	
Customer Name ATB Fire Safety Executive Pension	Customer Number
Account Holding Store	Account Number 4 5 2 0 3 8 9 1
2. BENEFICIARY DETAILS	
Beneficiary Name Mrs JA Burns & Mr AT Burns	
Beneficiary Sort Code Beneficiary Account Number D T D 1 1 6 B 8 9 6 8 4	
Payment Reference PCLS ADRIAN BURNS	
3. FREQUENCY	
	Quarterly Yearly Other
4. PAYMENT DETAILS	
Date and amount of first payment 0 6	1 0 2 0 2 3 £ 1 5 0 0 0
Date and amount of ongoing payments (if amount different from the first payment)	
Select one of the following options:	
1. Date and amount of final payment 0 6	0 3 2 0 2 4 £ 1,5 0 0 0
2. Until further notice	
5. CUSTOMER SIGNATURE	
Primary Applicant	Secondary Applicant
Dete	Dut
Date	Date
FOR INTERNAL USE ONLY ID&V confirmed (refer to ID&V Matrix)	Refer to Manager: HVT completed and attached (if applicable)
Request fully input to T24	Standing Order authorised
Inputter Signature	Manager Signature
Name:	Name:
Date:	Date: