

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS
Customer/ Business Name CHL Investments SSAS
Debit Account Number 45488535
2. PAYMENT DETAILS
Payment Type (All payments over the faster payments limit will be sent as a CHAPs)
Faster Payment (Personal, no fee. Business, tariff dependent)
Payment Date
Amount £ 20,000.00
Amount in Words Twenty Thousand Pounds
3. EXISTING BENEFICIARY
Beneficiary Name
Metro Bank Beneficiary Ref. BEN
4. NEW BENEFICIARY
Beneficiary Name Hood Corporate Client Account
Beneficiary Sort Code 09-01-29 Beneficiary Account Number 38918744
Payment Reference (if applicable) CHL Investments SSAS
5. CUSTOMER SIGNATURE
Primary Applicant Secondary Applicant
Malher Georgina Markin
Name Cloire Hopelott Lodger On a series B4 autic
Claire Hamlett-Ledger Georgina Martin
Date 07/02/2023 Date 07/02/2023

Monday - Friday: 8am - 8pm • Saturday: 8am - 6pm • Sunday: 11am - 5pm

Local Call Centre: 0345 08 08 500 • metrobankonline.co.uk • 🛩 MetroBank_Help



Outward Payment Instruction (Faster Payment & CHAPs) (continued)

6. SECURITY CALL BACK	
We may need to call to confirm the validity of the payment instruction. Please to call.	e detail below the authorised signatories from the bank mandate you would like us
Full Name	
Full Name	
Please note if the account is two to sign we will need to speak with two of the authorised signatories.	
FOR INTERNAL USE ONLY	
	If applicable:
ID&V confirmed (refer to ID&V Matrix)	HVT completed and attached
Request fully input to T24	Payment authorised or refered to CPU
Inputter Signature	Manager Signature
Name	N
realig	Name
Date	Date