

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS

Customer/
Business Name

Account Number

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) ☐ CHAPs (Personal £25.00. Business tariff dependent)

Date to be actioned

Amount
(GBP)

Amount in
Words

3. EXISTING BENEFICIARY ☐

Beneficiary
Name

Metro Bank
Beneficiary Ref.

4. NEW BENEFICIARY ☒

Beneficiary
Name

Beneficiary
Sort Code

Beneficiary Account Number

Payment Reference
(if applicable)

5. SECURITY CALL BACK

We may need to call to confirm the validity of the payment instruction. Please detail below the authorised signatories from the bank mandate you would like us to call.

Full Name

Full Name

Please note if the account is two to sign we will need to speak with two of the authorised signatories.


OPEN 7 DAYS

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. CUSTOMER SIGNATURE

Primary Applicant




Name

Robert Holmes

Date 22/09/2017

Secondary Applicant



Name


EMILY MAISTER

Date 22/09/2017

FOR INTERNAL USE ONLY

- ☐ ID&V confirmed (refer to ID&V Matrix)
- ☐ Request fully input to T24

Inputter Signature



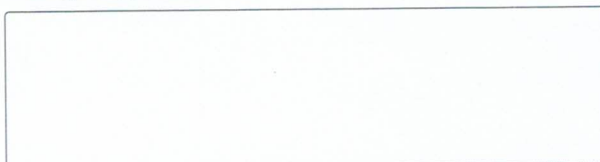
Name

Date

If applicable:

- ☐ HVT completed and attached
- ☐ Payment authorised or referred to CPU

Manager Signature



Name

Date

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