

Outward Payment Instruction (Faster Payment & CHAPs)

Customer/ Business Name	Haines Watts (Preston) Limited SSAS 45160866		
Debit Account Number			
2. PAYMEN	IT DETAILS		
	il payments over the faster payments limit will be sent a	s a CHAPs)	
Faster Payme	ant (Personal, no fee. Business, tariff dependent)	CHAPs (Personal £25.00. Business tariff dependent)	
Payment Date	05/08/2022		
Amount £	353.04		
Amount in Words thi	ree hundred and fifty three pour	nds and 04 pence	
3. EXISTING	BENEFICIARY		
Beneficiary		_	
Name			
	BEN		
Name Metro Bank Beneficiary Ref.			
Name Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary		tor	
Name Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name	IEFICIARY		
Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name Beneficiary Sort Gode	IEFICIARY Registered Scheme Administra 2 3 - 8 3 - 9 6	Beneficiary Account Number 04919088	
Name Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name Beneficiary Sort Gode Payment Reference if applicable)	IEFICIARY Registered Scheme Administra 2 3 - 8 3 - 9 6	Beneficiary Account Number 04919088	
Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name Beneficiary Sort Gode Payment Reference if applicable)	Registered Scheme Administra 2 3 - 8 3 - 9 6 MORTGREPAY Haines Watt	Beneficiary Account Number 04919088	
Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name Beneficiary Sort Code Payment Reference if applicable) 5. CUSTOM Primary Applicar	Registered Scheme Administra 2 3 - 8 3 - 9 6 MORTGREPAY Haines Watt	Beneficiary Account Number 04919088	
Name Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name Beneficiary Sort Code Payment Reference If applicable) 5. CUSTOM Primary Applicar	Registered Scheme Administra 2 3 - 8 3 - 9 6 MORTGREPAY Haines Watt IER SIGNATURE III	Beneficiary Account Number 04919088	
Metro Bank Beneficiary Ref. 4. NEW BEN Beneficiary Name Beneficiary Sort Gode Payment Reference if applicable) 5. CUSTOM Primary Applicar	Registered Scheme Administra 2 3 - 8 3 - 9 6 MORTGREPAY Haines Watt IER SIGNATURE	Beneficiary Account Number 0 4 9 1 9 0 8 8 Secondary Applicant	

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)

We may need to call to confirm the walldby of the new west but	realism. Please whether the surface of almost a form the form of the contract
to call.	uction. Please 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 w	with two of the authorised signatories.
FOR INTERNAL USE ONLY	
	if applicable:
ID&V confirmed (refer to /D&V Matrix)	HVT completed and attached
Request fully input to T24	Payment authorised or refered to CPU
Inputter Signature	Manager Signature
lame	Name
Date	Date

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