

Tel; 01446 500538
E-Mail; adrian@stratfordcollins.co.uk

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS

Customer/
Business Name

Debit 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)

Payment Date

Amount

Amount in
Words

3. EXISTING BENEFICIARY ☐

Beneficiary
Name

Metro Bank
Beneficiary Ref.

4. NEW BENEFICIARY ☒

Beneficiary
Name

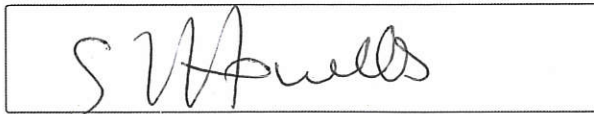
Beneficiary
Sort Code

Beneficiary Account Number

Payment Reference
(if applicable)

5. CUSTOMER SIGNATURE

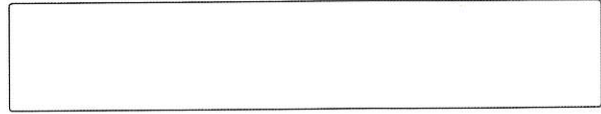
Primary Applicant



Name

Date

Secondary Applicant



Name

Date

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](#)

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Payment Date Amount Amount in
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Name Metro Bank
Beneficiary Ref.**4. NEW BENEFICIARY** ☒Beneficiary
Name Beneficiary
Sort Code Beneficiary Account Number Payment Reference
(if applicable) **5. CUSTOMER SIGNATURE****Primary Applicant**

Name

Date **Secondary Applicant**

Name

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