

## **Outward Payment Instruction** (Faster Payment & CHAPs)

1. CUSTOMER DETAILS
Customer/ Business Name Whitecliff Pension Scheme
Debit Account Number 45255654
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 25.05.23
Amount £432.36
Amount in Words Four hundred and thirty two and thirty six pence
3. EXISTING BENEFICIARY
Beneficiary Name
Metro Bank Beneficiary Ref.  BEN
4.NEWBENEFICIARY
Beneficiary Name  Drax Energy Solutions Limited
Beneficiary Sort Code 2 0 0 0 - 0 0 Beneficiary Account 6 3 5 2 1 5 7 5
Payment Reference (if applicable) IN1106951422, A79222
5.CUSTOMERSIGNATURE
Primary Applicant Secondary Applicant
Gels- Ensot
Name Name
Marko Radosavljevic Emily McAlister  Date 24/05/2023 Date 25.05.23
Date 24/05/2023 Date 25.05.23



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 validity of the payment instru o call.	iction. Please detail below the authorised signatories from the bank mandate you would like ເ
Full Name	BENGLIER
Full Name	
Please note if the account is two to sign we will need to speak w	rith two of the authorised signatories.
FORINTERNALUSEONLY	
	If
ID&V confirmed (refer to ID&V Matrix)	HVT completed and attached
Request fully input to T24	Payment authorised or refered to
Inputter Signature	Manager Signature
Name	Name

