

Amend a Standing Order

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do **not** use the return or enter keys. Please complete in BLOCK CAPITALS.

1. Account details	
Account name	Account number
Account holding branch	Sort code
2. Details of existing Standing Order you wish to amend	
Name of person or organisation you are paying	
Payment reference (if known) (Max. 18 characters)	
Amount £	
How often are payments made: Weekly Two weekly Quarterly Half yearly	Four weekly Monthly Yearly
Is there more than one Standing Order payable to this person or organisation?	Yes No
3. Details of amendment to Standing Order – only complete what you would	l like amended
This amendment is to take effect immediately or with effect from (DD/MMM	M/YY)
Name of person or organisation you are paying	
Payment reference (Max. 18 characters)	
Sort code – the bank code of the person or organisation you are paying	
Account number – the account number of the person or organisation you wish to pay (Eight digits – if less, place zeros at the front)	
Change frequency to: Weekly Two weekly	Four weekly Monthly
Quarterly Half yearly	Yearly
New payment date (DD/MMM/YY) New amoun	t £
Date of final payment (DD/MMM/YY) Amount of fi	nal payment £
Or until further notice (payments will be made until you cancel this instruct	ion)
4. Confirmation Customer signature(s)	

Date (DD/MM/YYYY) _