

Change of details form

This form can be used to amend the organisation's contact details, account individuals and nominated current account.

Key:	• Important
	<pre> = For your information</pre>

Section		
1	Organisat	ion details
of 8	Please ensure this se	ection is completed
	Account number(s)	
	Name of organisation	
		be actioned on all linked accounts in the same organisation name. e changes to be made to just the account outlined above, please tick here:
Section		
	Changes t	to organisation contact details
of 8		
Existing	Correspondence address	
	audiess	Postcode Postcode
	Contact number	
	Email address	
	Contact name	
Maur	Community	
New	Correspondence address	
		Postcode Postcode
	Contact number(s) (in order of preference)	
	Email address(es) (in order of preference)	
	Contact name	
	(must be a Signatory on the account)	

Changes to signatories

of 8

- Please use this section to advise us of any changes to the individuals related to this account and their role(s). Please see definitions below to help.
- **Signatory** an individual who has the authority to operate and transact on the account e.g. request a withdrawal, change signatories or nominated current account details. Only signatories may have access to our online savings service.
- **Person with Significant Control (PSC)** an individual who holds significant control, more than 25%, or significant influence of an organisation and is on the Companies House Register of Persons of Significant Control.
- **Ultimate Beneficial Owner (UBO)** an individual who ultimately owns or controls, directly or indirectly, 25% or more of the shares or voting rights, or controls the entity through other means.
- Only individuals designated as signatories are able to make changes to the account or authorise transactions.
- 1 We require a minimum of 2 signatories on your account at any one time, unless you are a sole trader or a sole director.
- 1 If you require changes to more than 3 signatories to the account, please print and complete additional copies of page 3.

Signatories to b	oe remov	/ed				
Forename(s)		Surname	Date	of birth		MYY
Forename(s)		Surname	Date	of birth	D D M	MYY
Forename(s)		Surname	Date	of birth		MYY
Signatory to be	added					
Role & position (please tick all that apply)	PSC	UBO	Director S	Settlor	Trustee	Beneficiary
Ownership % or n/a		% Role/Position	e.g. Chief Execu	tive Office	r, Chief Financia	l Officer
Name	Title	Forename(s)		Su	ırname	
Personal address						
			Post	tcode		
Personal email address						
Personal contact number		Nation Number	al Insurance			
Date of birth DDDMMMYY Nationality						
Is this individual a UK resident and pay tax in the UK only? Yes No						
Is this individual already named on an account w Cambridge & Counties	vith Yes	INO I	, please provide unt number			
Signature (original signature required)				Date	DDM	MYY

Section

3	Signatory to be	e added
of 8 cont.)	Role & position (please tick all that apply)	PSC UBO Director Settlor Trustee Beneficiary
	Ownership % or n/a	Role/Position e.g. Chief Executive Officer, Chief Financial Officer
	Name	Title Forename(s) Surname
	Personal address	
		Postcode DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD
	Personal email address	
	Personal contact number	National Insurance Number
	Date of birth	D D M M Y Y Nationality
	Is this individual a UK re	esident and pay tax in the UK only? Yes No
	Is this individual already named on an account v Cambridge & Counties	with Yes No account number
	Signature (original signature required)	Date D D M M Y Y
	Signatory to be	e added
	Role & position (please tick all that apply)	PSC UBO Director Settlor Trustee Beneficiary
	Ownership % or n/a	% Role/Position e.g. Chief Executive Officer, Chief Financial Officer
	Name	Title Forename(s) Surname
	Personal address	
		Postcode
	Personal email address	
	Personal contact number	National Insurance Number
	Date of birth	D D M M Y Y Nationality
	Is this individual a UK re	esident and pay tax in the UK only? Yes No
	Is this individual already	with Yes No account number
	Cambridge & Counties	Bank!

Μ

Date

M

Signature

(original signature required)

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Changes to information only individuals

If you require any changes made to the individuals who have access to the account for information purposes please complete the section below.

- ① Only balances, transaction history and general information can be given via phone or email address. This individual will not have online account access or be able to make changes to the account.
- 1 If you require changes to more than 1 information only individual on the account, please print and complete additional copies of this page.

N	ame	of	info	rmat	ion	only	, inc	divid	ual	to	be	ren	10V	<i>'ec</i>	
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Forename(s)		Surname	Date of birth D D M M Y Y
Name of info	rmation o	only individual to be	added
Name	Title	Forename(s)	Surname
Organisation (if applicable)			
Personal address			
			Postcode O
Personal email address			
Personal contact number			
Date of birth	DD	MMYY	
Is this individual alre	nt with Yes	No If yes, pla account	ease provide number
Cambridge & Count	ies Bank		
Changes	to no i	minated curre	ent account details
			current account only. This can be with any UK bank or
-		-	id cheque in the name of the organisation or an original or ed within the last 3 months. All original documents will be
Unfortunately we can certified copy of a ba	_	changes to the nominated cur	rent account without either a void cheque or an original or
Bank/Building			
Society name			
Account name	e.g. ABC	Ltd	
Account number			Sort code
Bank/Building			
Society name			
Account name	e.g. ABC	Ltd	
	• Must matc	h Organisation name in Section	1.
Account number			Sort code Sort code

Section

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Existing

New

Other information about the organisation

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• This section must be completed to ensure the information we have is accurate and up to date.

Main activity of organisation	e.g. agriculture, utilities, charity	
Organisation turnover/income for last full financial year	E Date last full financial year ended DDMMMY	Y
Total assets for organisation	£	
Does this organisation operate in any countries outside the UK?	Yes No If yes, please state which countries	

Other individuals in your organisation

1 This section is relevant to the following organisations/individuals only. If their details have been provided in Section 3, they do not need to be repeated.

For trusts, we require details of all trustees and/or beneficiaries in the organisation.

For **charities**, we require details of all **trustees** in the organisation.

For clubs, societies, or associations, we require details of all officials in the organisation.

For partnerships, we require details of all partners who own 25% or more of the organisation.

For public sector & local authorities, we require details of all directors or controllers in the organisation.

Use the table below to confirm the relevant individual details as outlined above. These individuals must be current members of the organisations governing body.

	Name		Date of birth	House name/no.	Home postcode
1	Forename	Surname(s)	dd/mm/yy		
2	Forename	Surname(s)	dd/mm/yy		
3	Forename	Surname(s)	dd/mm/yy		
4	Forename	Surname(s)	dd/mm/yy		
5	Forename	Surname(s)	dd/mm/yy		
6	Forename	Surname(s)	dd/mm/yy		
7	Forename	Surname(s)	dd/mm/yy		
8	Forename	Surname(s)	dd/mm/yy		
9	Forename	Surname(s)	dd/mm/yy		
10	Forename	Surname(s)	dd/mm/yy		
11	Forename	Surname(s)	dd/mm/yy		
12	Forename	Surname(s)	dd/mm/yy		
13	Forename	Surname(s)	dd/mm/yy		
14	Forename	Surname(s)	dd/mm/yy		

Data about you and connected individuals

of S

Cambridge & Counties Bank Limited hold and use your personal information and information about connected individuals (e.g. Directors, Shareholders, Trustees, Beneficiaries) in accordance with the General Data Protection Regulation.

We will use the contact details provided to get in touch regarding the account with us. We will use the information on this form to manage the account and tailor the service we offer as well as make checks and seek any verifications needed. The information you provide us with, or is collected by the Bank during our dealings with each other, is kept for as long as is necessary to administer any contractual relationships with us, or for as long as regulation or the law says we have to, if that's longer.

To prevent criminal activities, information captured on this form and obtained from Credit Reference Agencies or other third parties will be shared with relevant agencies who may keep a record of it. These agencies will also give us electoral roll information for the purpose of verifying the identities of persons named on this form, which we will retain. Where additional individuals are identified as part of this process (e.g. Undisclosed Directors, Ultimate Beneficial Owners) we will process the data for the prevention and detection of crime. If criminal activity is identified, any details we hold will be passed to the relevant agencies. Associations between joint applicants may be created at credit reference agencies.

You can find our full Privacy Notice, explaining how we use personal information and what rights there are in relation to it, at www.ccbank.co.uk/privacy-notice. If you have any questions or require further information, please get in touch using the details below:

Write: Data Protection Officer, Cambridge & Counties Bank, Charnwood Court, 5B New Walk, Leicester LE1 6ΤΕ

✓ Call: 0344 225 3939

Email: dataprotection@ccbank.co.uk

By signing this document, you are declaring that you have read both the above summary and our full Privacy Notice.

Section

8 Declaration

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I/We provide authority on behalf of the named organisation for the account details to be amended as per this completed form.

I/We agree that Cambridge & Counties Bank may use my/our information as stated in Section 7 on this change of details form and where it has been provided in relation to others I/we have informed them of the Privacy Notice referenced in Section 7.

I/We can confirm that the information provided on this form is accurate.

• For changes to signatories named on the account (Section 3) and changes to the nominated current account (Section 5), the declaration must be signed by two existing Signatories on the account (unless there is only one).

For changes to the correspondence details (Section 2) and information only individuals (Section 4), the declaration must be signed by an existing signatory on the account.

PLEASE SIGN BELOW

1st signatory		2nd signato	ry
Signature (origin	nal signature required)	Signature (ori	ginal signature required)
Date	D D M M Y Y	Date	D D M M Y Y
Name		Name	
Position		Position	

- **Please ensure all relevant sections are completed.** The form can be sent to us by post using the address below. If you have any queries please contact us.
- 📀 Cambridge & Counties Bank, Charnwood Court, 5B New Walk, Leicester LE1 6TE

Cambridge & Counties Bank Ltd is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under firm registration number 579415. Our authorisation can be checked at the Financial Services Register at www.fca.org.uk.

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