

INDIVIDUAL SAVINGS ACCOUNT (CASH ISA) TRANSFER AUTHORITY FORM

AFTER COMPLETING THIS FORM PLEASE RETURN THIS APPLICATION FORM TO:
FREEPOST, FAMILY BUILDING SOCIETY. ALTERNATIVELY YOU CAN UPLOAD YOUR APPLICATION FORM SECURELY USING THE FOLLOWING LINK FAMILYBUILDINGSOCIETY.CO.UK/FILE-UPLOAD AND SELECTING "CUSTOMER SERVICES - SAVINGS" IN THE "DESIRED RECIPIENT DEPARTMENT AT FBS" FIELD.

PLEASE NOTE, TRANSFERS FROM STOCKS & SHARES ISAS ARE NOT PERMITTED.
WE CAN ONLY ACCEPT CASH ISA TRANSFERS BY CHEQUE.

THE
**FAMILY
BUILDING
SOCIETY**

Use this form to transfer your existing Cash ISA funds from another provider to:

A NEW FAMILY BUILDING SOCIETY
CASH ISA

OR AN EXISTING FAMILY BUILDING SOCIETY
CASH ISA - ACCOUNT NUMBER:

Unless you are transferring your existing Cash ISA funds from another provider to an existing ISA with us, **this form must be accompanied by a fully completed application form for your chosen account.**

ACCOUNT HOLDER INFORMATION

TITLE: MR / MRS / MISS / MS

SURNAME:

FORENAMES:

PERMANENT
HOME ADDRESS:

POSTCODE:

LENGTH OF TIME
AT ADDRESS: YEARS MONTHS

PHONE - HOME:

PHONE - MOBILE:

EMAIL ADDRESS:

DATE OF BIRTH: DD MM YYYY

NATIONAL INSURANCE
NUMBER:

(If you do not know your National Insurance number, please refer to your P60, Notice of Coding or Tax Return otherwise your employer or Tax Office may be able to help.)

* If we have a home or mobile phone number or email address for you, we may use these to get in touch regarding your application or with important information about your account. This could include letting you know about any concerns we have about the activity on your account.

EXISTING ISA PROVIDER DETAILS

Please note that each ISA transfer requires its own form.

NAME OF EXISTING
ISA PROVIDER:

ADDRESS OF EXISTING
ISA PROVIDER:

ACCOUNT NUMBER:

SORT CODE: - -

ROLL NUMBER:
(if applicable)

HOW DID YOU FIND OUT
ABOUT THIS ACCOUNT?

PLEASE NOTE

The terms and conditions of some ISA products do not allow only part of an ISA to be transferred. Your existing provider may need you to give them specific information before the transfer can go ahead. Please check with your existing ISA provider if you are not sure about this.

Have you subscribed to a Cash ISA with your existing ISA provider in the current tax year?

YES - please complete question 1

NO - please complete question 2

1. PLEASE INDICATE THE TOTAL SUBSCRIPTIONS
MADE IN THE CURRENT TAX YEAR: £

Please note that the amount in your account representing current tax year subscriptions can only be transferred in whole and not in part.

If you would like to transfer the whole of your Cash ISA please tick here:

APPROXIMATE VALUE: £

If you only want to transfer your subscriptions from the current tax year please tick here:

If you only want to transfer your subscriptions from previous tax years please tick here:

APPROXIMATE VALUE: £

OR if you wish to transfer part of your ISA, please say how much of your Cash ISA you would like to transfer: £

THIS AMOUNT:

Includes the current tax year subscription

OR

Excludes the current tax year subscription

2. IF YOU WANT TO TRANSFER THE WHOLE OF YOUR CASH ISA,
TICK HERE:

APPROXIMATE VALUE: £

OR if you wish to transfer part of your ISA, please say how much of your Cash ISA you would like to transfer: £

PLEASE CONTINUE OVERLEAF, SIGNING AND DATING
THE TRANSFER AUTHORITY SECTION.

INDIVIDUAL SAVINGS ACCOUNT (CASH ISA) TRANSFER AUTHORITY FORM

TRANSFER AUTHORITY

I authorise my existing ISA provider (as specified) to transfer the Cash ISA (account no. overleaf) to the Family Building Society. I authorise my existing ISA provider to provide the Family Building Society with any information about the Cash ISA and to accept any instructions from them relating to the Cash ISA being transferred.

Where I must give notice to close or transfer part of the existing Cash ISA, or the existing Cash ISA contains a fixed term deposit that has not reached its maturity date, I instruct my existing ISA provider to either (tick the appropriate box):

1. Wait for the full notice period to end or wait until the maturity date (whichever is relevant) before going ahead with this transfer:

OR

2. Depending on the terms and conditions, carry out the transfer as soon as possible – I will accept any consequential loss of interest or charges which may be applied:

SIGNED:				DATE:	DD	MM	YYYY
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PLEASE RETAIN THE FSCS INFORMATION SHEET FOR YOUR FUTURE REFERENCE.

If you need this form in an alternative format please call us on 03330 140141.

AFTER COMPLETING THIS FORM PLEASE RETURN THIS APPLICATION FORM TO: **FREEPOST, FAMILY BUILDING SOCIETY**. ALTERNATIVELY YOU CAN UPLOAD YOUR APPLICATION FORM SECURELY USING THE FOLLOWING LINK FAMILYBUILDINGSOCIETY.CO.UK/FILE-UPLOAD AND SELECTING "CUSTOMER SERVICES - SAVINGS" IN THE "DESIRED RECIPIENT DEPARTMENT AT FBS" FIELD.

TRANSFER ACCEPTANCE (TO BE COMPLETED BY THE NEW ISA PROVIDER)

We are willing to accept this ISA transfer in line with the customer's instructions above, as long as the following conditions are met:

- The transfer proceeds are made up of cash deposits only.
- We must receive the transfer proceeds no later than:
- Where the customer has shown above that they want to transfer subscriptions from the current tax year, these must not be more than:

DD	MM	YYYY
£		

Please make your cheque payable to "**Family Building Society**" followed by the customer's name. For the purposes of the transfer of the ISA wrapper under the ISA regulations, the date shown below will be the transfer date.

DATE: DD MM YYYY

NAME OF NEW PROVIDER: FAMILY BUILDING SOCIETY