TRANSFER OF OWNERSHIP FORM

PLEASE FULLY COMPLETE IN BLOCK CAPITALS.

This form is to be used where the funds invested with the Society are to be transferred to another person(s).

ACCOUNT NUMBER:						
ACCOUNT NUMBER:						



	FIRST NAMED ACCOUNT HOLDER				SECOND NAMED ACCOUNT HOLDER							
TITLE:	MR / MRS / MISS / N	MR / MRS / MISS / MS			MR / MRS / MISS / MS							
SURNAME:												
FORENAME(S):												
/We, being the registo Signature of all existing		ount number above, authorise the S	ociety to tra	nsfer the acco	unt into th	e sole/join	t name(s) as deta	iled belov			
FIRST NAMED AC	COUNT HOLDER	SIGNED:				DATE:	DD	ММ	YYYY			
SECOND NAMED	ACCOUNT HOLDER	SIGNED:				DATE:	DD	ММ	YYYY			
NEW ACCOU	NT HOLDERS'	DETAILS										
		FIRST NAMED ACCOUNT HOLDER				SECOND NAMED ACCOUNT HOLDER						
ΓITLE:	MR / MRS / MISS / N	ts / MISS / MS			MR / MRS / MISS / MS							
URNAME:												
ORENAME(S):												
PERMANENT HOME ADDRESS:												
POSTCODE:												
DATE OF BIRTH:	DD MM	YYYY		DD	MM		\	YYYY				
HOME PHONE:	'											
MOBILE PHONE:												
EMAIL ADDRESS:												
FIRST NAMED AC	COUNT HOLDER	SIGNED:				DATE:	DD	ММ	YYYY			
SECOND NAMED	ACCOUNT HOLDER	SIGNED:				DATE:	DD	MM	YYYY			
NOTE 1. An application	n form must be complete	d by all new account holders.		The last intere								
TO IL I. All application				the original ac								
	nces, it may be necessary t	o change the account number.	considered	l to be earned	by the new	/remaining	account	: holder(s).			

If you need this document in an alternative format please call us on ${\bf 03330~140144}$.

To find out more, please contact our Family Service Team:



familybuildingsociety.co.uk



03330 140144



savings.service@familybsoc.co.uk

EBBISHAM HOUSE 30 CHURCH STREET EPSOM SURREY KT17 4NL Family Building Society is a trading name of National Counties Building Society which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

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