

# BACS DETAILS ADDITION / CHANGE



Please complete this form in BLOCK CAPITALS

## FULL TRADING TITLE AND ADDRESS

Trading Title \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
\_\_\_\_\_

Kings Account number (if known) \_\_\_\_\_

## BANK DETAILS

Bank Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
\_\_\_\_\_

Account Name \_\_\_\_\_  
Sort Code \_\_\_\_\_  
Account Number \_\_\_\_\_

\* The bank account name must match the trading title of the account.

## TYPE OF BUSINESS

Limited Company     Plc     Sole Trader     Other (please specify) \_\_\_\_\_  
 Partnership. All partners to sign unless authorised signatory already agreed with Frontier

## AUTHORISATION OF REQUEST

_____ Name	_____ Signature	_____ Capacity	_____ Date
_____ Name	_____ Signature	_____ Capacity	_____ Date
_____ Name	_____ Signature	_____ Capacity	_____ Date
_____ Name	_____ Signature	_____ Capacity	_____ Date

If you would like to nominate a person to authorise future amendments to your account please specify below

_____ Name	_____ Signature	_____ Capacity	_____ Date
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Please download and print this form so that you may complete it by hand. If you are able to scan it, please do so and send the electronic scan file to [address@frontierag.co.uk](mailto:address@frontierag.co.uk). If you do not have access to scan facilities, we are happy to accept a **clear, legible photo image** of your completed form.

