Internal Transfer



www.swansea-bs.co.uk

Account Name	Account Type	
Account Number	Reference	

Please make the following payments:

			lst	5th	12th	19th	26th		
An initial payment of £		on (please tick preferred)						Date	M M / Y Y Y Y
Followed by payments of £		on (please tick preferred)						Date	M M / Y Y Y

and monthly / quarterly / annually (please delete as necessary) thereafter until further notice

To:

Account Name	Account Type	
Account Number	Reference	

Signed:

(First Applicant) Signed	Date	DD1MM1YYYY
(Second Applicant) Signed	Date	