

Amend a standing order or Direct Debit

Please write clearly in **black ink** in the white spaces with capital letters or cross the boxes.

All sections must be completed.

Please return the **original** form as photocopies are not acceptable.

If you want to amend the amount or payment date of a Direct Debit **ONLY**, you must contact the company you are paying.

1 Your details

Your full name or name of business

Sort code (being debited)

Account number (being debited)

Your contact telephone number

Branch name

2 Details of your standing order or Direct Debit

Existing details

Please amend my:

Standing order

Direct Debit

Amount

£

Payment reference (if applicable)

Recipient's name

Standing order reference number

Amendment details (only complete the details that are changing)

Sort code (of account to be debited) Account number (of account to be debited)

Amount

£

Payment reference (if applicable)

Next due date

Recipient's/originator's name

Final payment amount

£

Final payment date

Recipient's/originator's bank and branch name

Weekly

4 weekly

Monthly

Quarterly

Half yearly

Yearly

Other frequencies (give details)

Recipient's/originator's sort code

Recipient's/originator's account number

Please give details of any special instructions

3 Your agreement with us

I authorise you to amend the standing order or Direct Debit in accordance with my instructions in Sections 2 and 3.

This request is addressed to the bank which holds my/our account.

Once you have completed this form, please return it to:

Halifax, PO Box 548, Leeds, LS1 1WU.

Your signature(s)

Date

For bank use only

From branch name and contact name

SMD checked

Sort code

For 30-00-02 accounts and all corporate customers, send the completed form to City Office, Gillingham, Kent, TNT 23.

Branch stamp

