

# Combined enquiry and consent

For Business and Commercial Banking customers

**Before you begin:** It's best to save this form to your computer and open it using Adobe Acrobat Reader. Doing this will allow you to fill in the PDF and upload signatures. You can get the latest version of Adobe Acrobat Reader by visiting <https://get.adobe.com/reader/>

<b>1</b>	<b>Third Party details</b>																		
<p>Contact name</p> <input type="text"/> <p>Company name</p> <input type="text"/> <p>Daytime contact telephone number and dialling code</p> <input type="text"/>	<p>Address (where response will be sent)</p> <input type="text"/> <input type="text"/> <div style="text-align: right;">Postcode</div> <input type="text"/> <p>Date of request</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid #ccc; width: 20px;">D</td> <td style="border: 1px solid #ccc; width: 20px;">D</td> <td style="border: 1px solid #ccc; width: 20px;">M</td> <td style="border: 1px solid #ccc; width: 20px;">M</td> <td style="border: 1px solid #ccc; width: 20px;">Y</td> <td style="border: 1px solid #ccc; width: 20px;">Y</td> <td style="border: 1px solid #ccc; width: 20px;">Y</td> <td style="border: 1px solid #ccc; width: 20px;">Y</td> </tr> </table>		D	D	M	M	Y	Y	Y	Y									
D	D	M	M	Y	Y	Y	Y												
<b>2</b>	<b>Details of the subject of the enquiry</b>																		
<p>I/We request your opinion as to the means and standing of:</p>																			
<p>Account name</p> <input type="text"/> <p>Sort code</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> </tr> </table> <p>Account number</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> <td style="border: 1px solid #ccc; width: 20px;"> </td> </tr> </table>																		<p>Purpose (nature of commitment e.g. rent, lease, credit limit etc)</p> <input type="text"/> <p>Amount of payments</p> <p>£ <input style="width: 100px;" type="text"/></p> <p>Frequency of payments</p> <input type="text"/>	
<b>3</b>	<b>How you wish to pay for the enquiry?</b>																		
<p><input type="checkbox"/> I/We enclose a cheque for the payment of your fee</p> <p><input type="checkbox"/> Debit Bank of Scotland customer account (quoted in Section 2)</p>																			
<b>4</b>	<b>Bank of Scotland customer's consent</b>																		
<p>To be completed by the customer named in Section 2 and signed in accordance with their bank mandate held by the bank.</p>																			
<b>4.1</b>	<b>Approvers signatures</b>																		
<p>There are <b>two</b> ways to add signatures to the form:</p> <ol style="list-style-type: none"> <li>Upload an image of your signature</li> <li>Print and sign with a pen.</li> </ol> <p><b>To upload an image:</b></p> <ul style="list-style-type: none"> <li>Save the form to your device</li> <li>Open the form in <b>Adobe Acrobat Reader</b></li> <li>Select the signature field to upload your image.</li> </ul>																			
<p>We strongly recommend you send the form to any other approvers and/or people who've been added to sign first.</p> <p>Once you're satisfied, please sign and return the form to us (see details below).</p>																			
<p>I consent to my bank providing a reference on me to the person/company named in Section 1. I also consent to the charge being debited from our account (if applicable, see Section 3).</p> <p>Full name</p> <input type="text"/> <p><b>Signature</b></p> <input type="text"/> <input type="text"/>	<p>I consent to my bank providing a reference on me to the person/company named in Section 1. I also consent to the charge being debited from our account (if applicable, see Section 3).</p> <p>Full name</p> <input type="text"/> <p><b>Signature</b></p> <input type="text"/> <input type="text"/>																		

Please return completed form to: **MPC, 2 Bankhead Crossway North, Sighthill, Edinburgh, EH11 4DT**

Please contact us if you would like this information in an alternative format such as Braille, large print or audio.

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