

Need to make changes to your business accounts?

You should use this form if:

- ▶ you have complex signing rules for limits and panels
- ▶ you are not a full access user for Business Internet Banking
- ▶ you use only Commercial Banking Online

The quickest way to make changes to your business accounts is in Business Internet Banking.

If you're not already registered for online banking you can register here



[Register for online banking](#)

If you are registered for online banking

- ▶ Any Full Access User can do this for your business.
- ▶ You'll need your mobile phone or card reader to approve the change.
- ▶ If another person also needs to approve the change, you'll need to provide their mobile phone number and email address.



[Log in to make changes online](#)

Online you can:

- ▶ add a new signatory to your bank mandate and give them access to Business Internet Banking
- ▶ remove someone from your accounts, products or services
- ▶ share a link with anyone who needs to register for Business Internet Banking
- ▶ change who can make and approve requests on your business accounts
- ▶ set up or manage your online payment controls
- ▶ see who has access to your account and change if needed

Your instruction to Vary your Authority



Did you know you can save time by filling in this form using online banking? You can find help and support [here](#)

FREF 140801

Guidance notes

This form can be used to make changes to the Authority of the business/organisation named below (you). Your Authority is where you told us who has permission to provide instructions to us relating to your accounts and services and to act on behalf of your business/organisation.

You must have the correct signatories to make this change.

If you do not currently have sufficient signatories to authorise this request, you must provide a Board Resolution/Partnership Agreement, or other documentation whichever is relevant to your business to confirm your authority to vary or commence a new mandate.

You can also use this form to tell us about a change to the name of your business/organisation.

When you fill in this form, you are not creating a new Authority. You are making a change to your existing Authority. Other than the changes you ask for, everything about your existing Authority will remain in place.

There are separate forms for where one of your existing signatories has changed their name (e.g. following marriage) or address. Please ask us if you need a copy of one of those forms instead.

The Instruction to vary your Authority has six sections:

- ▶ **Section 1** gives details of your business/organisation.
- ▶ **Section 2** tells us what kind of change you want to make.
- ▶ **Section 3** gives us more details about the change you want to make.
- ▶ **Section 4** confirms who has authority to provide instructions to us and take other actions and shows which controls you have set for those people.
- ▶ **Section 5** is where you, as a business/organisation, need to approve and sign the Instruction to vary your Authority.
- ▶ **Section 6** is where you, as a business/organisation, provide us with information on the **new** Key People relating to your business/organisation.
- ▶ **Section 7** contains your declarations.
- ▶ **Section 8** tells you how and where to return a copy of this form once completed.

Please fill in all of the sections which are relevant to your business/organisation using capital letters and crossing the boxes.

1 Your details

Business/organisation's sort code

Business/organisation's account number

How would you like be contacted?

We will only use your email address and mobile number if we need to contact you to discuss the Variation.

Email SMS

☐ ☐

Name of business/organisation

Email address

Full name of individual filling in the Variation

Mobile number

Important: The changes will apply to all of the accounts relating to this business/organisation. You should complete a separate form for accounts relating to any other business/organisation.

2 Type of change

	Yes	No	
Do you want to change the address of the business/organisation, or the person who the bank should contact?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 3.1
Do you want to change the name of the business/organisation?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 3.2
Do you want to add a new signatory?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 3.3 and Section 6 for each individual
Do you want to tell us about a new individual who is not a signatory (for example, a beneficial owner, partner, director, trustee or other controlling official)?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 3.3 and Section 6 for each individual
Do you want to ask us to remove an existing signatory or individual who is not a signatory (for example, a beneficial owner, partner, director, trustee or other controlling official)?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 3.4
Do you want to change the signature of an existing signatory?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 3.5
Do you want to change the signing rules in your Authority?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please complete Section 4

Important: Section 5 must be completed in all instances where a change is being made.

3 Details relating to the change you want to make

3.1 Change of address of the business/organisation or the person who the bank should contact

New official address of the business/organisation

Postcode

New correspondence address of the business/organisation
(if different from the official address)

Postcode

The new bank contact must be a Full Signatory on the account.

New primary bank contact name (if applicable)

--

New primary bank contact details (if applicable)

Telephone
Mobile
Email

Date the change should apply from (DD MM YYYY)

--	--	--	--	--	--	--	--

3.2 Change of business/organisation name

New name of the business/organisation

--

Date the change should apply from (DD MM YYYY)

--	--	--	--	--	--	--	--

Has the nature of the business/organisation changed significantly?


Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If yes please contact us as you may need a new account.

3.3 Addition of signatory or other individual

You authorise the people listed in this section to act on behalf of your business/organisation. Instructions given to us by the people you authorise below will be binding, as long as they are in line with the powers that type of signatory has and any signing rules you set below.

This section will amend the section covering authorisations and signing rules in your existing Authority to include new signatories and signing rules that you provide here.

 **Important:** If you use online banking, you set up separate permissions and controls which may differ from the ones in the Authority. You can find more details about those permissions and controls in online banking. We encourage you to regularly review your permissions and controls in online banking. Changing your Authority does not change any of the permissions and controls you have already set up in online banking. This is unless you remove a signatory listed in your Authority - if you do that, we'll also remove them as a user in online banking.

Example: You authorise someone who isn't listed below to give us instructions in online banking. If you have done that, we'll act on instructions given using online banking from that person, even though they are not listed below.

Example: You put a control in place in online banking which says that an authorised signatory can make payments of £1,500. That limit will only apply when they are using online banking.

What is a Beneficial Owner?

A **Beneficial Owner** is an individual who owns or controls the business or organisation. Typically, someone who is a shareholder. Or, in the case of a Partnership, a Senior Partner.

For **Trusts**, this is any individual who has control over the trust, in whose main interest the trust is set up or operates, or who is entitled to at least 25% of the trust's assets.

What is a Full Signatory?

Full Signatories have authority to take all actions and give instructions in relation to your accounts and services, though they can only act in line with any signing rules you set below.

You must always have at least one individual who is appointed as a Full Signatory across all accounts.

Important: Different signing requirements will apply sometimes. For example, a person with personal responsibility to repay any borrowing may need to apply for borrowing, and each person responsible for the borrowing may need to sign the loan documentation. If there are extra or different signing requirements, we'll tell you at the time.

What is a Limited Signatory?

Limited Signatories can make payments, talk to us about your accounts and use online banking (if you have set them up to use online banking), though they can only act in line with any signing rules you set below.

3 Details relating to the change you want to make

3.3 Addition of signatory or other individual

continued



Important: Each new person being added must also complete Section 6.

First addition

Full name of person you want to add

Role in the Business/Organisation

Will the person you are adding be a Beneficial Owner/Shareholder?
(Not applicable to Clubs, Charities & Societies)

Yes ☐ No ☐

If **yes** percentage of ownership

%

What level of signing authority should the new person you're adding be given?

Full ☐ Limited ☐ None ☐

If you use panels, which panel (i.e. A/B/C) should the person be added to?

By default, access is given to all accounts. Do you wish this person to have signing rights on all accounts?

Yes ☐ No ☐

If **no** please confirm the sort code and account number for the accounts they should have signing rights to:

Business/organisation's sort code

Business/organisation's account number

Will the person you're adding require online banking access?

Yes ☐ No ☐

Please confirm what level of access to online banking you would like to give this person and cross the relevant box:

Signatory Level	Full Access User	Delegate Access User	View Only	No Access
Full	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Signatory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Will the person you're adding require a Business Debit Card?

Yes ☐ No ☐

Second addition

Full name of person you want to add

Role in the Business/Organisation

Will the person you are adding be a Beneficial Owner/Shareholder?
(Not applicable to Clubs, Charities & Societies)

Yes ☐ No ☐

If **yes** percentage of ownership

%

What level of signing authority should the new person you're adding be given?

Full ☐ Limited ☐ None ☐

If you use panels, which panel (i.e. A/B/C) should the person be added to?

By default, access is given to all accounts. Do you wish this person to have signing rights on all accounts?

Yes ☐ No ☐

If **no** please confirm the sort code and account number for the accounts they should have signing rights to:

Business/organisation's sort code

Business/organisation's account number

Will the person you're adding require online banking access?

Yes ☐ No ☐

Please confirm what level of access to online banking you would like to give this person and cross the relevant box:

Signatory Level	Full Access User	Delegate Access User	View Only	No Access
Full	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Signatory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Will the person you're adding require a Business Debit Card?

Yes ☐ No ☐

3.3 Addition of signatory or other individual

continued

Third addition

Full name of person you want to add

Role in the Business/Organisation

Will the person you are adding be a Beneficial Owner/Shareholder?
(Not applicable to Clubs, Charities & Societies)

Yes

No

☐☐

If yes percentage of ownership

%

What level of signing authority should the new person you're adding be given?

Full

Limited

None

☐☐☐

If you use panels, which panel (i.e. A/B/C) should the person be added to?

By default, access is given to all accounts. Do you wish this person to have signing rights on all accounts?

Yes

No

☐☐

If no please confirm the sort code and account number for the accounts they should have signing rights to:

Business/organisation's sort code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Business/organisation's account number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Will the person you're adding require online banking access?

Yes

No

☐☐

Please confirm what level of access to online banking you would like to give this person and cross the relevant box:

Signatory Level	Full Access User	Delegate Access User	View Only	No Access
Full	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Signatory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Will the person you're adding require a Business Debit Card?

Yes

No

☐☐

Fourth addition

Full name of person you want to add

Role in the Business/Organisation

Will the person you are adding be a Beneficial Owner/Shareholder?
(Not applicable to Clubs, Charities & Societies)

Yes

No

☐☐

If yes percentage of ownership

%

What level of signing authority should the new person you're adding be given?

Full

Limited

None

☐☐☐

If you use panels, which panel (i.e. A/B/C) should the person be added to?

By default, access is given to all accounts. Do you wish this person to have signing rights on all accounts?

Yes

No

☐☐

If no please confirm the sort code and account number for the accounts they should have signing rights to:

Business/organisation's sort code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Business/organisation's account number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Will the person you're adding require online banking access?

Yes

No

☐☐

Please confirm what level of access to online banking you would like to give this person and cross the relevant box:

Signatory Level	Full Access User	Delegate Access User	View Only	No Access
Full	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Signatory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Will the person you're adding require a Business Debit Card?

Yes

No

☐☐

3 Details relating to the change you want to make

3.4 Removal of signatory or other individual

If a signatory is being removed from the account, they will lose all access to Debit Cards, online banking and SMS Text Alerts.

First removal

Full name of person you want to remove

Following removal, what will the person's percentage of ownership within the business/organisation be? (Not applicable to clubs, charities & societies.)

 %

If the person that you are removing owns 25% or more of your business they will remain on the account as a Non-Signatory.

Second removal

Full name of person you want to remove

Following removal, what will the person's percentage of ownership within the business/organisation be? (Not applicable to clubs, charities & societies.)

 %

If the person that you are removing owns 25% or more of your business they will remain on the account as a Non-Signatory.

Third removal

Full name of person you want to remove

Following removal, what will the person's percentage of ownership within the business/organisation be? (Not applicable to clubs, charities & societies.)

 %

If the person that you are removing owns 25% or more of your business they will remain on the account as a Non-Signatory.

Fourth removal

Full name of person you want to remove

Following removal, what will the person's percentage of ownership within the business/organisation be? (Not applicable to clubs, charities & societies.)

 %

If the person that you are removing owns 25% or more of your business they will remain on the account as a Non-Signatory.

3.5 Change of signature

This is only to be used to change a signature. It cannot be used where there has been a change of name of the signatory (e.g. due to a marriage).

Full name of signatory who wants to change their signature

Position held

New signature

Date (DD MM YYYY)

4 Changing your authorisations

By completing this section you are confirming the signing rules on your account(s).

This confirmation will replace your existing Authority in relation to how signatories can operate the accounts.

Important: The signing rules don't apply to viewing information or discussing your accounts and services - any Full Signatory can do this acting alone.



Important: The signing rules for non-payment instructions apply to tasks like opening accounts, changing who can access your business accounts or applying for new products and services. Full Signatories can approve these tasks. Keep in mind, users with full access to online banking can complete certain tasks by themselves. For example, they can change the business address or manage online and paper preferences.

Important: The rules you choose below don't apply when using online banking. You must set up separate online payment controls in online banking.

4.1 Signing rules

Please note: if either signing rules for non-payment or payment instructions is left blank, the existing signing rules for that instruction on the mandate will be maintained.



Important: Full Signatories or Limited Signatories can approve payment instructions. Full Signatories can approve non-payment instructions.

Important: If you select "Any 1 to sign", signatories will be able to act alone without any restriction and without the knowledge of the other signatories or other directors/partners/members.

TRUSTS ONLY: If you are a trust, "All to sign" must be selected unless a solicitors' letter is provided confirming that "Any 1" or "Any 2" can sign.

Please choose one signing rule per instruction:

	Signing rules				
	Any 1 to sign	Any 2 to sign	Any 3 to sign	All to sign	*Complex
Signing rules for payment instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signing rules for non-payment instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If you'd like to set up panels or specific signing rules for either non-payment or payment instructions, please also complete the 'Your instruction to set up Complex signing rules' form number 14113.

4.2 Change the authority of existing signatories

Use this section to amend the authority of existing signatories e.g. to change from Full Signatory to Limited Signatory, or from a Limited Signatory to Full Signatory. Please make sure that there are enough Full or Limited signatories to support the signing rules that are either to be maintained on the account or that have been amended in section 4.1.

Name	Position	Existing Authority Level	New Authority Level

In line with the table opposite showing available options:

- ▶ if a Full Signatory is changing to Limited Signatory **and** they currently have online banking, we will downgrade their access to Delegate Access User.
- ▶ if a Limited Signatory is changing to Full Signatory **and** they currently have online banking, we will upgrade their access to Full Access User.
- ▶ if any Signatory above currently does **not** have online banking, we will not make any changes to their access.

Signatory Level	Full Access User	Delegate Access User	View Only	No Access
Full	✓			✓
Limited		✓		✓

5 Important information about this Instruction to vary your Authority

Who needs to approve and sign the Instruction to vary your Authority?

New signatories you are adding **cannot** sign.

Existing Full Signatories you are removing **can** sign.

Sole traders: The sole trader must sign.

Companies, Limited Liability Partnerships, Partnerships, clubs, charities, societies, non-personal trusts or other non-personal organisations (for example, local authorities, parish councils, schools (state, independent or private) or credit unions: This must be signed in line with the signing instructions in your existing Authority.

For example, if you have "Any 2" rules set up on your Authority, two Full Signatories must sign.

If you have "Any 1" rules set up on your Authority one Full Signatory must sign.

If you have "All to sign" rules set up on your Authority all Full Signatories must sign.

TRUSTS ONLY: If you are a trust, all trustees must sign unless a solicitors' letter is provided confirming that "Any 1" or "Any 2" can sign.

By signing you confirm that the information given in this form is accurate, that the specimen signatures of all new signatories are correct and that all existing and new signatories are authorised to act on behalf of the Business in transactions and when dealing with the Bank.

The terms of your most recent Authority to the Bank will apply.

You must have the correct signatories to make this change.

If you do not currently have sufficient signatories to authorise this request, you must provide a Board Resolution/Partnership Agreement, or other documentation whichever is relevant to your business to confirm your authority to vary or commence a new mandate.

5.1 Your Authorisation

This form accepts the insertion of Adobe signatures. If your PDF reader does not support Adobe signatures, please use the draw tool or equivalent to enter your signature in the signature field.

Full name of existing Full Signatory (please print)

Signature

Date (DD MM YYYY)

Full name of existing Full Signatory (please print)

Signature

Date (DD MM YYYY)

Full name of existing Full Signatory (please print)

Signature

Date (DD MM YYYY)

Full name of existing Full Signatory (please print)

Signature

Date (DD MM YYYY)

If you are completing this form **by hand** and need to add more signatories, please print or photocopy this page and attach it to the completed form.

If you are completing this form **online** and need to add more signatories, please open a second copy of the form, **complete Section 5.1 only**, and email both completed forms together.

6 Your Key People - only to be completed by new Key People

6.1 First addition - must be completed by the individual and not on their behalf

Personal details

Title Mr Mrs Miss Ms Other (please specify)
☐ ☐ ☐ ☐ ☐

Your first name(s)

Your last name

Any different name(s) you have had in the past six years

Your date of birth (DD MM YYYY)

Your email address

If you hold a bank account with Lloyds Bank, Halifax or Bank of Scotland, please provide your details.

Sort code

Account number

Your home address (where you live)

Date you moved there (DD MM YYYY)

Your previous address (if less than three years at current address)

Date you moved there (DD MM YYYY)

Your contact numbers and area dialling codes

Home	<input type="text"/>
Mobile	<input type="text"/>
Work	<input type="text"/>

Your nationality

Your country of residence

Tax information

This section is about tax residency information. When we say tax resident, we mean any countries where you have the obligation to file a tax return or where you are subject to income tax in the UK or in another country.

Complete this section if you are a sole trader or a Beneficial Owner of the business/organisation detailed in Section 1.

Which country(s) are you a tax resident of?

1

2

3

4

Your country of birth

Enter your Taxpayer Identification Number (TIN) if issued by your tax residency

If your tax residency country does not issue a TIN, cross to confirm

☐
☐
☐
☐

Your additional nationalities (if applicable)

Your agreement with us

- ▶ You confirm that the information given in this Key People section is complete and accurate. We may make enquiries to check the information.
- ▶ You have read and understand the section on "Personal and Business Information and Lloyds Banking Group" in our Privacy notice which is available at [bankofscotland.com/business/privacy](https://www.bankofscotland.com/business/privacy) explaining how we and other members of Lloyds Banking Group may use information about you.

This form accepts the insertion of Adobe signatures. If your PDF reader does not support Adobe signatures, please use the draw tool or equivalent to enter your signature in the signature field.

Full name of first addition

Signature of first addition

Date (DD MM YYYY)

6.2 Second addition - must be completed by the individual and not on their behalf

Personal details

Title Mr Mrs Miss Ms Other (please specify)

☐☐☐☐

Your first name(s)

Your last name

Any different name(s) you have had in the past six years

Your date of birth (DD MM YYYY)

Your email address

If you hold a bank account with Lloyds Bank, Halifax or Bank of Scotland, please provide your details.

Sort code

Account number

Your home address (where you live)

Postcode

Date you moved there (DD MM YYYY)

Your previous address (if less than three years at current address)

Postcode

Date you moved there (DD MM YYYY)

Your contact numbers and area dialling codes

Home

Mobile

Work

Your nationality

Your country of residence

Tax information

This section is about tax residency information. When we say tax resident, we mean any countries where you have the obligation to file a tax return or where you are subject to income tax in the UK or in another country.

Complete this section if you are a sole trader or a Beneficial Owner of the business/organisation detailed in Section 1.

Which country(s) are you a tax resident of?

1

2

3

4

Your country of birth

Enter your Taxpayer Identification Number (TIN) if issued by your tax residency

If your tax residency country does not issue a TIN, cross to confirm

☐

Your additional nationalities (if applicable)

Your agreement with us

- ▶ You confirm that the information given in this Key People section is complete and accurate. We may make enquiries to check the information.
- ▶ You have read and understand the section on "Personal and Business Information and Lloyds Banking Group" in our Privacy notice which is available at [bankofscotland.com/business/privacy](https://www.bankofscotland.com/business/privacy) explaining how we and other members of Lloyds Banking Group may use information about you.

This form accepts the insertion of Adobe signatures. If your PDF reader does not support Adobe signatures, please use the draw tool or equivalent to enter your signature in the signature field.

Full name of second addition

Signature of second addition

Date (DD MM YYYY)

6.3 Third addition - must be completed by the individual and not on their behalf**Personal details**

Title Mr Mrs Miss Ms Other (please specify)

☐☐☐☐

Your first name(s)

Your last name

Any different name(s) you have had in the past six years

Your date of birth (DD MM YYYY)

Your email address

If you hold a bank account with Lloyds Bank, Halifax or Bank of Scotland, please provide your details.

Sort code

Account number

Your home address (where you live)

Postcode

Date you moved there (DD MM YYYY)

Your previous address (if less than three years at current address)

Postcode

Date you moved there (DD MM YYYY)

Your contact numbers and area dialling codes

Home

Mobile

Work

Your nationality

Your country of residence

Tax information

This section is about tax residency information. When we say tax resident, we mean any countries where you have the obligation to file a tax return or where you are subject to income tax in the UK or in another country.

Complete this section if you are a sole trader or a Beneficial Owner of the business/organisation detailed in Section 1.

Which country(s) are you a tax resident of?

1

2

3

4

Your country of birth

Enter your Taxpayer Identification Number (TIN) if issued by your tax residency

If your tax residency country does not issue a TIN, cross to confirm

☐

Your additional nationalities (if applicable)

Your agreement with us

- ▶ You confirm that the information given in this Key People section is complete and accurate. We may make enquiries to check the information.
- ▶ You have read and understand the section on "Personal and Business Information and Lloyds Banking Group" in our Privacy notice which is available at [bankofscotland.com/business/privacy](https://www.bankofscotland.com/business/privacy) explaining how we and other members of Lloyds Banking Group may use information about you.

This form accepts the insertion of Adobe signatures. If your PDF reader does not support Adobe signatures, please use the draw tool or equivalent to enter your signature in the signature field.

Full name of third addition

Signature of third addition

Date (DD MM YYYY)

6.4 Fourth addition - must be completed by the individual and not on their behalf**Personal details**

Title Mr Mrs Miss Ms Other (please specify)

☐☐☐☐

Your first name(s)

Your last name

Any different name(s) you have had in the past six years

Your date of birth (DD MM YYYY)

Your email address

If you hold a bank account with Lloyds Bank, Halifax or Bank of Scotland, please provide your details.

Sort code

Account number

Your home address (where you live)

Postcode

Date you moved there (DD MM YYYY)

Your previous address (if less than three years at current address)

Postcode

Date you moved there (DD MM YYYY)

Your contact numbers and area dialling codes

Home

Mobile

Work

Your nationality

Your country of residence

Tax information

This section is about tax residency information. When we say tax resident, we mean any countries where you have the obligation to file a tax return or where you are subject to income tax in the UK or in another country.

Complete this section if you are a sole trader or a Beneficial Owner of the business/organisation detailed in Section 1.

Which country(s) are you a tax resident of?

1

2

3

4

Your country of birth

Enter your Taxpayer Identification Number (TIN) if issued by your tax residency

If your tax residency country does not issue a TIN, cross to confirm

☐
☐
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Your additional nationalities (if applicable)

Your agreement with us

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Full name of fourth addition

Signature of fourth addition

Date (DD MM YYYY)

8 Key information

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- ▶ We may make enquiries to check the information.
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7 Returning this form



Important: Please make sure all relevant individuals complete their “Your Key People” details in Section 6 including their signature.

Important: Section 5 must be completed in all instances where a change is being made.

Once completed, save a copy of this form and attach it alongside “Your Instruction to Vary Your Authority” form to an email sending to:

CommercialClientServicingSME@Lloydsbanking.com

If you are completing a paper copy of the form, you can photograph the completed pages and attach them to an email via the QR code



The form can be posted back for processing

If you have a dedicated Relationship Manager, send to:

Commercial Banking, 2 Bankhead Crossway North, Edinburgh. EH11 4DT

If you don't have a dedicated Relationship Manager, send to:

Bank of Scotland, Business Banking, The Green Building, Kirkstall Road, LEEDS. LS78 1LB

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

business.bankofscotland.co.uk