

CASH ISA TRANSFER AUTHORITY FORM

Information about the investor (to be completed by the ISA investor)

Title:

First name(s): Surname:

Date of birth: National Insurance number:

Permanent home address:

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HBS Account Number (if known): — —

Postcode:

Contact Tel. No. (inc. area code):

Information about the ISA to be transferred (to be completed by the ISA investor)

Name of existing ISA provider:

Address of existing ISA provider:

Sort Code: Account number:

Roll number (if applicable):

Please note Please refer to the terms & conditions of your ISA you wish to transfer to ensure that it is permitted. Please check with your existing ISA provider if you are unsure of this.

1. Do you wish to transfer previous years, current years, or a mix of all years from your current Cash ISA? Previous Current Mix

Go straight to Q4 if you answer previous or mix of years.

2. You have stated you wish to transfer current years subscriptions, please confirm the amount and date of subscription.

£

Date: / /

3. Do you want to transfer all or part of your Cash ISA?

All Part

If part, please confirm the amount you wish to transfer

£

4. You have stated that you wish to transfer a mix of current and previous years subscriptions, or previous years subscriptions only. Please confirm if you wish to transfer all or part of the total value of previous years subscriptions.

All Part

Please confirm the value of previous years subscriptions you wish to transfer

£

Transfer Authority (to be completed by the ISA investor)

I authorise my existing ISA provider to transfer the ISA (account number above) to Harpenden Building Society.
I authorise my existing ISA provider to provide Harpenden Building Society with any information about the cash ISA and to accept any instructions from them relating to the cash ISA being transferred.

Where I must give notice to close or transfer part of the existing cash ISA, or the existing cash ISA contains a fixed-term deposit that has not reached its maturity date, I instruct my existing ISA provider to either:

1. Wait for the full notice period to end or wait until the maturity date (whichever is relevant) before going ahead with this transfer.

Or

2. Depending on the terms and conditions, carry out the transfer as soon as possible – I will accept any consequential loss of interest or charges which may be applied.

Signed:

Date:

Transfer Acceptance (to be completed by new ISA provider)

We are willing to accept this ISA transfer in line with the customer's instructions above, as long as the following conditions are met.

- The transfer proceeds are made up of cash deposits only.
- We must receive the transfer proceeds no later than:
- Where the customer has shown above that they want to transfer subscriptions from the current tax year, these must not be more than £.....

For the purposes of the transfer of the ISA wrapper under the ISA regulations, the date shown below will be the transfer date.

Date:

Head Office, Mardall House,
9-11 Vaughan Road,
Harpenden, Hertfordshire,
AL5 4HU

Office use only

Date received	CIN	Customer verified	Date completed	Staff initial
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