Nominated Account Form

This form should always be completed by the member. Please note that Dudley Building Society cannot recall Faster Payments once the money has been released, so please take extra care to ensure all details on the form are clearly written and correct. The nominated account details must be in the name(s) of the DBS account holder.

Contact Telephone Number:

SECTION 1 – Dudley Building Society Account Details (The account you wish to add or change a nominated account on)

Account name:

Account number: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

SECTION 2 – Nominated Account Details (The account your payment will be sent to)

Set up a Nominated Account for the first time: ☐   Change your Nominated Account details: ☐

Is the Nominated Account a: Bank Account: ☐   Building Society Account: ☐

Account Holder Name:

Account Sort Code: (6 digits) ☐ ☐ ☐ ☐ ☐

Account Number: (8 digits) ☐ ☐ ☐ ☐ ☐ ☐   *If this is a Lloyds account, please add zeros.*

Account Roll/Reference Number: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

SECTION 3 – Declarations

I/We confirm that:

Completion of this form cancels and replaces any previous nominated bank account withdrawal instructions.

Dudley Building Society is authorised to carry out electronic verification checks to confirm that the new nominated bank account is held in my name/our names. Where these checks do not provide the required confirmation, I/we acknowledge that I/we may be asked to provide documentation to prove account ownership.

In carrying out the electronic verification checks my/our name, address, date of birth and bank details will be provided to credit reference agencies who will supply Dudley Building Society with the information it requires. Details of this search will be recorded but the search will not be seen or used by third parties to assess your ability to obtain credit.

I/we confirm that Dudley Building Society can use my/our information in this way.

Signature(s):

Signature of first account holder	Signature of second account holder (if applicable)
Date:	Date:

FOR OFFICE USE ONLY

Transunion check completed	Name:	Date:	
Signature check	Name:	Date:	
Proof of account details			