SAVINGS ACCOUNT AMENDMENT REQUEST



1. YOUR DETAILS AS CURRENTLY HELD BY PROGRESSIVE

Name(s) of Saver(s)	
Account number(s) (which amendment(s) relates to)	

Your passbook(s) must accompany this form to enable the Society to make the amendment(s) requested. TYPE OF AMENDMENT/NOTIFICATION

Change of address/contact details Com Change of name Com

Change of interest instructions

Complete Sections	; 1,	2,	6,	7	&	9
Complete Sections	; 1,	3,	7	&	9	
Complete Sections	; 1,	4,	7	&	9	

2. CHANGE OF ADDRESS AND/OR CONTACT DETAILS

Is this a change of address or contact details for **all** Saver(s)?YES 🗌 NO 📃

If NO, enter Saver(s) to whom the change applies

New residential address

							F	Posto	ode				

New correspondence address (if different from above)

							F	Posto	ode				

Daytime tel no.	Mobile no.	
Email		

This amendment will change the records on all your Progressive savings accounts.

3. CHANGE OF NAME

(where applicable)

Please tick the box to indicate the method/reason for your name change and provide the documentation stated adjacent to that box.

		Required Documentation
Marriage/Civil Partnership		Marriage/Civil Partnership Certificate
Divorce/Dissolved Civil Partnership		Decree Absolute/Dissolution Order
Deed Poll/Statutory Declaration		Deed Poll/Statutory Declaration
Gender Recognition		Gender Recognition Certificate/new Birth Certificate
Other		Please specify the reason
Saver's new name		

You will be required to complete a savings application form in your new name for each account you hold.

This amendment will change the records on all your Progressive savings accounts.

4. CHANGE OF INTEREST INSTRUCTIONS

I/We require interest to be: (please tick one of the following)

- A. Added to this account
- B. Paid to a Progressive account Account no.
- C. Paid to another bank/building society

Other bank/building society account details

Name of bank/buildin	g society				
Sort code		Account no.			
Account name					
Payment reference					

Please refer to the Savings Service Agreement and the relevant account Summary Box to confirm how interest is paid.

5. NOTES



6. SELF CERTIFICATION

Question A should be completed by the account holder(s)

First Saver Yes No

A. Are you a citizen and tax resident of the UK only? (please tick)

Second Saver Yes 🗌 No 🗍

If NO, you will be required to complete a separate self certification form.

If this account is a nominee account complete question B.

(A nominee account is an account in which the named holder holds funds on behalf of another (the beneficiary) e.g. a parent holding an account on behalf of a child).

- B. Are you a citizen and tax resident of the UK only? (please tick)
 - First Nominee Yes No Second Nominee Yes No

If NO, you will be required to complete a separate self certification form.

7. MARKETING

The Society would like to send you information about products and services which it feels may be of interest to you by post, telephone, email and SMS. This may be through a third party acting on it's behalf. If you agree to being contacted in this way please tick the relevant boxes:

	Post	Telephone	Email	SMS
Saver one				
Saver two				

You can withdraw this consent at any time by contacting your branch.

8. USE OF YOUR INFORMATION

You will be required to prove your identity as the account holder, Nominee, Controller, account signatory or beneficial owner when opening a new account and at various points throughout our relationship. The Society will undertake a search with a credit reference agency or a data reference agency for this purpose. They will supply us with information, including information from the Electoral Register, for the purpose of verifying your identity. A record of the search will be retained. The search will not be seen or used by lenders to assess your ability to obtain credit. This information may also be used for the prevention of money laundering.

If the Society cannot check your identity from the information you provide then we will require you to provide two items of documentation as proof of your identity. Further information on the agency searches and a list of acceptable documents for identification purposes can be found in our leaflet 'Proving Your Identity' which can be accessed at **theprogressive.com**.

The Society will rely on the following legal basis for processing your personal data. The processing is necessary for:

- the performance of a contract with you or to take steps to enter into a contract;
- compliance with a legal obligation;
- the purposes of legitimate interests pursued by us or a third party.

By signing this form you are confirming that you:

- have read the section 'Use of Your Information' and you agree to your information being used in this way;
- agree to the use of your personal information to enable the Society to provide you with payment services, such as electronic payments, to and from your account. You may withdraw your consent by closing your account.

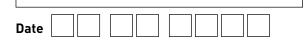
9. SIGNATURE(S)

Γ

1st Saver's signature

Date		

2nd Saver's signature



FOR BRANCH USE ONLY

	Saver 1	Saver 2
ID produced		
Reference number/ serial number		
Original document checked & copied		
Issue date/valid until		
Valid ID previously presented		
Previously presented account number		
	Cashiers initials	Branch code

IF POSTAL AMENDMENT PLEASE TICK

FOR HEAD OFFICE USE ONLY

Input by:	Date:
Checked by:	Date: