

Triodos Bank.
Business Banking
change of account
operator form.

This form enables you to add or remove account operators and authorised enquirers to your Triodos Bank account. You can choose how these individuals can access the account.

You can also use this form to request Internet Banking access for existing account operators and update your signing mandate and/or Internet Banking arrangements.

For your request to be processed the declaration at the end of this form must be signed by existing account operators i.e. new account operators to be added as part of this request cannot provide authorisation. The number of signatures provided on the declaration must also be in line with your existing account mandate(s).

Please note if your form does not fulfill the requirements outlined above, we will be unable to complete your request and your form will be returned to you.

If you require clarification of your account mandate(s) and/or signing arrangements, please contact us on 0330 355 0355 or via secure message in Internet Banking. Please do this before submitting your form to avoid any delays in completing your request once received.

Your organisation

Official name of your organisation (as shown on any official documents where applicable)

Triodos Bank account number(s) you want to add or remove account operators or authorised enquirers to or from:

All accounts held by the organisation named above

Remove account operators and authorised enquirers

This section allows you to remove account operators and authorised enquirers from the account(s).

Full Name of person to be removed **in block capitals**

1. Title First name(s)

Surname

Is this person still associated with the organisation? Yes No

2. Title First name(s)

Surname

Is this person still associated with the organisation? Yes No

3. Title First name(s)

Surname

Is this person still associated with the organisation? Yes No

4. Title First name(s)

Surname

Is this person still associated with the organisation? Yes No

Contact person

If you are removing your current contact person, please provide details of a new contact person below.

(Contact person must be an account operator listed on all accounts).

Title First name(s)

Surname

Correspondence address

Postcode

Organisation email

Website

Add account operators and authorised enquirers

This section allows you to add account operators and authorised enquirers to the accounts . You can also use this section to request Internet Banking access for existing account operators.

Important notice for all new and existing customers

Internet Banking access is provided by means of an individual security device known as a Digipass. If you are an existing customer already using a Digipass to access your other business account(s), please provide the existing Digipass number in the relevant box.

We are required by law to check the identity of all new and existing customers. To help us verify identity and address we may make an electronic search, using the information you have supplied on this form. In some instances we may ask you to send in further information or documents. Please see our Terms and Conditions for further information.

If more than four account operators or authorised enquirers are required, please copy the following section and include with the form.

Any details provided on this form will replace the information we already hold on record.

How we use your personal information

We won't share your information with anyone else without informing you and will only share your data with other organisations required to complete processing necessary to provide our products and services. For information about how Triodos Bank use and share your personal information please see our Privacy Statement at www.triodos.co.uk/privacy-statement. By applying to be an account operator or authorised enquirer, you acknowledge and understand that your personal data will be processed and stored for future reference in accordance with this Privacy Statement.

Account operator / authorised enquirer 1

Title Mr Mrs Ms Miss Dr Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname Male Female

Date of birth / /

Country of birth Nationality

Position within organisation

Residential address

Postcode

Telephone (home) Telephone (work)

Mobile Email

(By providing us with your telephone number and email address you are giving us permission to use these to contact you)

How long have you lived at your current address?

If you have lived at your current address for less than a year please give your previous address below

Address

Postcode

Administration rights:

(Please tick **one** of the following)

Authorised enquirer – can obtain information about the account but cannot sign written instructions or make transactions

Account operator – can obtain information about the account, sign written instructions and make transactions

Does this person need Internet Banking access? Yes No

Email

(it will not be possible to set up internet banking without this information)

Existing Digipass number (if applicable)

Should this person be able to view loan account(s) using Internet Banking (if applicable)?

Yes No

Loan Account Number

Additional account operator rights:

These rights are only applicable for **account operators**.

Should this person be able to set up payments in Internet Banking? Yes No

Should this person be able to authorise payments in Internet Banking? Yes No

If yes, what is the maximum amount the account operator can authorise? £
(Please leave blank if no maximum limit is required)

Declaration

I agree to be bound by the Terms and Conditions for businesses and charities and any specific terms and conditions applying to this account. I understand how the details contained on this form can be processed and I acknowledge your right to postpone my inclusion as an account operator/authorised enquirer on this account(s) until I have supplied to Triodos Bank any documentation or information that may be required.

Signature of the above named

Date

Account operator / authorised enquirer 2

Title Mr Mrs Ms Miss Dr Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname Male Female

Date of birth / /

Country of birth Nationality

Position within organisation

Residential address

Postcode

Telephone (home) Telephone (work)

Mobile Email

(By providing us with your telephone number and email address you are giving us permission to use these to contact you)

How long have you lived at your current address?

If you have lived at your current address for less than a year please give your previous address below

Address

Postcode

Administration rights:

(Please tick **one** of the following)

Authorised enquirer – can obtain information about the account but cannot sign written instructions or make transactions

Account operator – can obtain information about the account, sign written instructions and make transactions

Does this person need Internet Banking access? Yes No

Email

(it will not be possible to set up internet banking without this information)

Existing Digipass number (if applicable)

Should this person be able to view loan account(s) using Internet Banking (if applicable)?

Yes No

Loan Account Number

Additional account operator rights:

These rights are only applicable for **account operators**.

Should this person be able to set up payments in Internet Banking?

Yes No

Should this person be able to authorise payments in Internet Banking?

Yes No

If yes, what is the maximum amount the account operator can authorise? £

(Please leave blank if no maximum limit is required)

Declaration

I agree to be bound by the Terms and Conditions for businesses and charities and any specific terms and conditions applying to this account. I understand how the details contained on this form can be processed and I acknowledge your right to postpone my inclusion as an account operator/authorised enquirer on this account(s) until I have supplied to Triodos Bank any documentation or information that may be required.

Signature of the above named

Date

Account operator / authorised enquirer 3

Title Mr Mrs Ms Miss Dr Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname Male Female

Date of birth / /

Country of birth Nationality

Position within organisation

Residential address

Postcode

Telephone (home) Telephone (work)

Mobile Email

(By providing us with your telephone number and email address you are giving us permission to use these to contact you)

How long have you lived at your current address?

If you have lived at your current address for less than a year please give your previous address below

Address

Postcode

Administration rights:

(Please tick **one** of the following)

Authorised enquirer – can obtain information about the account but cannot sign written instructions or make transactions

Account operator – can obtain information about the account, sign written instructions and make transactions

Does this person need Internet Banking access? Yes No

Email

(it will not be possible to set up internet banking without this information)

Existing Digipass number (if applicable)

Should this person be able to view loan account(s) using Internet Banking (if applicable)?

Yes No

Loan Account Number

Additional account operator rights:

These rights are only applicable for **account operators**.

Should this person be able to set up payments in Internet Banking? Yes No

Should this person be able to authorise payments in Internet Banking? Yes No

If yes, what is the maximum amount the account operator can authorise? £
(Please leave blank if no maximum limit is required)

Declaration

I agree to be bound by the Terms and Conditions for businesses and charities and any specific terms and conditions applying to this account. I understand how the details contained on this form can be processed and I acknowledge your right to postpone my inclusion as an account operator/authorised enquirer on this account(s) until I have supplied to Triodos Bank any documentation or information that may be required.

Signature of the above named

Date

/ /

Account operator / authorised enquirer 4

Title Mr Mrs Ms Miss Dr Other

First name(s)

(For identification purposes, please use your full name and not a nickname)

Surname Male Female

Date of birth / /

Country of birth Nationality

Position within organisation

Residential address

Postcode

Telephone (home) Telephone (work)

Mobile Email

(By providing us with your telephone number and email address you are giving us permission to use these to contact you)

How long have you lived at your current address?

If you have lived at your current address for less than a year please give your previous address below

Address

Postcode

Administration rights:

(Please tick **one** of the following)

Authorised enquirer – can obtain information about the account but cannot sign written instructions or make transactions

Account operator – can obtain information about the account, sign written instructions and make transactions

Does this person need Internet Banking access? Yes No

Email

(it will not be possible to set up internet banking without this information)

Existing Digipass number (if applicable)

Should this person be able to view loan account(s) using Internet Banking (if applicable)?

Yes No

Loan Account Number

Additional account operator rights:

These rights are only applicable for **account operators**.

Should this person be able to set up payments in Internet Banking? Yes No

Should this person be able to authorise payments in Internet Banking? Yes No

If yes, what is the maximum amount the account operator can authorise? £

(Please leave blank if no maximum limit is required)

Declaration

I agree to be bound by the Terms and Conditions for businesses and charities and any specific terms and conditions applying to this account. I understand how the details contained on this form can be processed and I acknowledge your right to postpone my inclusion as an account operator/authorised enquirer on this account(s) until I have supplied to Triodos Bank any documentation or information that may be required.

Signature of the above named

Date

D D / M M / Y Y Y Y

Operating your account

This section allows you to update the authorisation requirements on your account.
(Please leave blank if you do not wish to make any changes to your current mandate).

Written instructions to operate your account

How many account operators' signatures are required for written instructions to operate your account?

NB. This includes writing cheques (if applicable) and making any changes to your account.

Internet Banking settings

Payment limits

This section allows you to update your Internet Banking payment limits. Payments input above these amounts will not be accepted.

If you have added a new account operator with an Internet Banking limit, but do not already have overall limits in place, you need to update this section. If you do not, payments cannot be made through Internet Banking.

If you already have Internet Banking limits in place, please only complete this section if you wish to change your limits.

NB. For Fixed Term Deposit accounts, you can view the account in Internet Banking but cannot make transactions.

Transaction Limit

£ [] the maximum amount you are able to transfer in any one transaction.
This should be less or equal to your maximum daily limit.

Daily Limit

£ [] the total maximum amount you are able to transfer in any one day, per account.

Group Limit

£ [] payments above this limit will require authorisation as separate items, unless a payment has previously been made to that account. Your daily limit still applies to these payments.

Specific authorisation instructions

Only complete this section if you need specific authorisation instructions in addition to the above.

Specific authorisation required for payments above: £ [redacted]

Please select and provide details for **one** of the following instructions for specific authorisation

a) Multiple account operators must authorise: 2 [redacted]

3 [redacted]

4 [redacted]

b) Single named account operator must authorise: [redacted]

c) Either of the following account operators can authorise:

[redacted]

or

[redacted]

d) Both of the following account operators must authorise:

[redacted]

and

[redacted]

Declaration

For your request to be processed this declaration must be signed by existing account operators i.e. new account operators to be added as part of this request cannot provide authorisation. The number of signatures provided on the declaration must also be in line with your existing account mandate(s). Please note if your form does not fulfil the requirements outlined above, we will be unable to complete your request and your form will be returned to you.

Authorisation of changes to account operators

Please act as per the instruction provided in this form. I/we authorise you to make any enquiries that you consider necessary to confirm the details on this form and confirm that the information provided on this form is true to the best of my/our knowledge.

Account Operator name

Signature

Date

Account Operator name

Signature

Date

Account Operator name

Signature

Date

Account Operator name

Signature

Date

Once completed please send this form to our freepost address (no stamp required):

Freepost TRIODOS BANK

For bank use only

Date stamp

Telephone: 0330 355 0355

contact@triodos.co.uk

www.triodos.co.uk

Calls to and from Triodos Bank may be recorded for training and monitoring purposes.

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