Savings Withdrawal Form



Account Inform	ation				
Account Name:					
Account Number	:				
Withdrawal					
I/we authorise ar	nd request the Society to withdraw from n	ny/our account the	e sum of:		
In figures £					
In words					
Ву:					
Cheque -	made payable to:				
Cash (ma	ximum £500 per day.Larger amounts of	cash up to £2,000	per day require at least 24 hours' notice)		
Transfer t	o my LBS account number:				
Chaps tra	nsfer - please complete CHAPs form o	n reverse			
Closure	nd request the Society to close my/our ac	ecount by:			
		oodin by.			
	made payable to:	b t- C2 000) nor down suits at least 24 hours! notice)		
		casn up to £2,000	per day require at least 24 hours' notice)		
	o my LBS account number:				
Chaps tra	nsfer - please complete CHAPs form o	n reverse			
Note: Cheques cannot be stopped unless lost or stolen					
YOUR ACCOUN	T PASSBOOK MUST ACCOMPANY TH	HIS FORM			
Signature 1		Date			
Signature 2		Date			
Signature 3		Date			
Signature 4		Date			

Loughborough Building Society is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority. Financial Services Register number 157258.

CHAPS TRANSPER REQUEST (UK BANKS UNLT)	
1. TRANSFER DETAILS	
Date Required,	
Amount in words	
Details of receiving bank:	
Sort Code Account number	
Account Name (first and surname in full)	
Reference to be quoted	
Receiving bank and branch	
2. LBS ACCOUNT DETAILS	
Account Number Contact Number	
Account Name	
3. CHARGE AND AUTHORISATION	
The charge for this transfer is £10. The charge will be debited to the account your payment is made from and itemised in your passbook.	
* Working day means a day other than a Saturday, Sunday or Bank Holiday Protect yourself from scams. Please complete the boxes below to confirm you have re the warnings in relation to the safety & security of the money you are sending. STOP: I was expecting to make this payment and have not been asked to make it or coerced. CHALLENGE: I have confirmed the receiving bank details in person. PROTECT: I have not been told my account is at risk or received unsolicited contact. THINK:I understand that if I continue and this is a scam I am unlikely to get my money back.	ad
Who are you paying: My own Account A friend or relative A bill/invoice Property sale/purchase Item or activity (shop) A bill/invoice Investment	
By signing below you authorise Loughborough Building Society to pass this charge to your accourand effect the above transfer in accordance with section 22 of the General Terms and Conditions for Savings Accounts.	
Customer signature(s): Date	
Passbook retained by: Date	
4. LBS USE ONLY	
Instructions received and checked by (Staff sig): Branch Code	
Authorised by (Branch management signature): Branch Code	
Finance: Input: Authority 1: Authority 2:	