

Standing Order Instruction Store 1. CUSTOMER DETAILS Customer Number Customer Name ATB Fire Safety Executive Pension Account Holding Account Number 5 0 3 8 9 1 Store 2. BENEFICIARY DETAILS Beneficiary Name Mrs JA Burns & Mr AT Burns Beneficiary Sort 0 1 1 Code Beneficiary Account 8 8 9 6 8 Number Payment Reference PCLS ADRIAN BURNS 3. FREQUENCY Payment Frequency × Monthly Yearly Other Weekly Quarterly 4. PAYMENT DETAILS Date and amount of first payment Date and amount of ongoing payments (if amount £ different from the first payment) Select one of the following options: 1. Date and amount of final payment £ 2. Until further notice 5. CUSTOMER SIGNATURE Secondary Applicant **Primary Applicant** Georgina Mashin Adriantes. Date 01/07/2024 Date 01/07/2024 FOR INTERNAL USE ONLY Refer to Manager: HVT completed and attached (if applicable) ID&V confirmed (refer to ID&V Matrix) Standing Order authorised Request fully input to T24 Inputter Signature Manager Signature Name: Name: Date: Date: