

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS		
Customer/ Business Name Clayton Ponting Executive Pension Scheme - Rebecca Ponting		
Debit Account Number 51377397		
2. PAYMENT DETAILS		
Payment Type (All payments over the faster payments limit will be sent as a CHAPs)		
Faster Payment (Personal, no fee. Business, tariff dependent) CHAPs (Personal £25.00. Business tariff dependent)		
Payment Date		
Amount £ 818,000.00		
Amount in Words Eight hundred eighteen thousand pounds		
3. EXISTING BENEFICIARY		
Beneficiary Name		
Metro Bank Beneficiary Ref. B R N		
4. NEW BENEFICIARY		
Beneficiary Name Insignis Asset Management Ltd		
Beneficiary Sort Code 20-01-58 Beneficiary Account Number 73219186		
Payment Reference (if applicable) CLAYAA		
5. CUSTOMER SIGNATURE		
Primary Applicant	Secondary Applicant	
	Georgina Martin	
Name	Name	
Rebecca Ponting	Georgina Martin	
Date 16/11/2023	Date 16/11/2023	



Monday - Friday: 8am - 8pm • Saturday: 8am - 6pm • Sunday: 11am - 5pm

Local Call Centre: 0345 08 08 500 • metrobankonline.co.uk •

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Outward Payment Instruction (Faster Payment & CHAPs) (continued)

We may need to call to confirm the validity of the payment instruction. Please detail below the authorised signatories from the bank mandate you would like us to call. Full Name Please note if the account is two to sign we will need to speak with two of the authorised signatories. FOR INTERNAL USE ONLY If applicable: ID&V confirmed (refer to ID&V Matrix)	6. SECURITY CALL BACK		
Full Name Please note if the account is two to sign we will need to speak with two of the authorised signatories. FOR INTERNAL USE ONLY ID&V confirmed (refer to ID&V Matrix) Request fully input to T24 Inputter Signature Manager Signature Name Name			
Please note if the account is two to sign we will need to speak with two of the authorised signatories. FOR INTERNAL USE ONLY If applicable: ID&V confirmed (refer to ID&V Matrix)	Full Name		
FOR INTERNAL USE ONLY If applicable:	Full Name		
ID&V confirmed (refer to ID&V Matrix) Request fully input to T24 Inputter Signature Manager Signature Name Name	Please note if the account is two to sign we will need to speak with two of the authorised signatories.		
ID&V confirmed (refer to ID&V Matrix)	FOR INTERNAL USE ONLY		
Request fully input to T24 Inputter Signature Manager Signature Name Name		If applicable:	
Inputter Signature Manager Signature Name Name	ID&V confirmed (refer to ID&V Matrix)	HVT completed and attached	
Name Name	Request fully input to T24	Payment authorised or refered to CPU	
	Inputter Signature	Manager Signature	
Date Date	Name	Name	
Date Date			
Date Date			
	Date	Date	