

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS

Customer/
Business Name **HYDON AND GRIM LIMITED PENSION SCHEME**

Account Number **17524933**

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)

Date to be actioned

Amount
(GBP)

£ 113,000

Amount in
Words

One Hundred and Thirteen Thousand Pounds only.

3. EXISTING BENEFICIARY

Beneficiary
Name

Metro Bank
Beneficiary Ref.

B E N

4. NEW BENEFICIARY ☒

Beneficiary
Name

Infinox Capital Limited Client Trust Account

Beneficiary
Sort Code

2 0 - 0 0 - 0 0

Beneficiary Account Number

2 3 3 4 9 8 0 2

Payment Reference
(if applicable)

Hydon & Grim PS/112598

5. SECURITY CALL BACK

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

Full Name

Please note if the account is two to sign we will need to speak with two of the authorised signatories.


OPEN 7 DAYS

Monday - Friday: **8am - 8pm** • Saturday: **8am - 6pm** • Sunday: **11am - 5pm**
Local Call Centre: **0345 08 08 500** • metrobankonline.co.uk • [MetroBank_Help](#)

pg 1

Outward Payment Instruction (Faster Payment & CHAPs) (continued)**6. CUSTOMER SIGNATURE**

Primary Applicant




Name

Neil Ryder

Date 12/12/2017

Secondary Applicant



Name

Emily Meustor

Date 12/12/17

FOR INTERNAL USE ONLY

- ☐ ID&V confirmed (refer to ID&V Matrix)
☐ Request fully input to T24

Inputter Signature

Name

Date

If applicable:

- ☐ HVT completed and attached
☐ Payment authorised or referred to CPU

Manager Signature

Name

Date

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pg 2