

Church House Trust

BANK ACCOUNT APPLICATION FORM		
Name of Scheme SSAS - Was Hampton Energies Pusion Designated Client A/C		
	PSTR No.	
Professional Trustee (full name) Address		
₹*		
Trustee (full name) (For copy bank statements to be		Address 17 levdennis tark
sent) Kevan Harapton.		. Brisling bn. Bristol BS4 &TC.
Trustee (full name)	1	Address
Trustee (full name)		Address
•		*
Trustee (full name)		Address
I/We authorize Church House Trust to release any information to the following company that they may request in connection with this account.		
IFA/Practioner/SSAS adviser (Name and address)		
We wish to open a Church House Trust Instant (For internal use only)		
Access Account. Interest earned will be added to the account. Bank Account Number: (60-95-31)		Number:
		Bank Account Number: (60-95-31)
Contact telephone number (work) Mobile 07980 170787 E-Mail Review Mora plants by Mother COM		
We have read and agree to the terms and conditions applicable to this account, and authorise and request that Church House Trust pay all cheques and other instructions for payment signed on our behalf by any of the one/ two of the following duly authorised officials (delete as appropriate).		
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Signed on behalf of the (if applicable)		Date Date 14/10/13.
Signed on behalf of the Trustee		Fr Date 14/10/13.
Signed on behalf of the		Date
Signed on behalf of the Trustee		Date
Signed on behalf of the Trustee		Date

Church House Trust Limited 3 Goldcroft, Yeovil, Somerset BA21 4DQ Tel: 01935 609600 Fax: 01935 410674 www.church-house-trust.co.uk