

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS
Customer/ Business Name
Account Number
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)
Date to be actioned
Amount (GBP) £
Amount in
Words
3. EXISTING BENEFICIARY
Beneficiary Name
Metro Bank Beneficiary Ref. BEN
4. NEW BENEFICIARY
Beneficiary Name
Beneficiary Sort Code Beneficiary Account Number Beneficiary Account Number
Payment Reference (if applicable)
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.



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

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

MetroBank_Help



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

6. CUSTOMER SIGNATURE		
rimary Applicant	Secondary Applicant	
Cond	Smaleiola	
lame	Name	
	EMILY MAUSTER	
MARLIN CAMPBELL	Date 26(09/17	
Date 25/09/17	Date 26(99) (+	
FOR INTERNAL USE ONLY		
	If applicable:	
ID&V confirmed (refer to ID&V Matrix)	HVT completed and attached	
Request fully input to T24	Payment authorised or refered to CPU	
Inputter Signature	Manager Signature	
	Name	
Name	Name	
Name	Name	



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