

Telephone: 0800 634 4862 Fax: 020 8711 2522 Email: info@pensionpractitioner.com www.pensionpractitioner.com UK Administration Centre: 48 Chorley New Road, Bolton BL1 4AP

Metro Bank Plc One Southampton Row London WC1B 5HA

Date:

Dear Team,

## Account Number: 15917528

Please accept this letter as my request to close the above account with immediate effect. Please arrange to transfer any remaining balance to the follow account.

Account Name: NWMG PENSION SCHEME Account Number: Sort Code: Payment Ref: NWMG PENSION SCHEME

Richard David Williams

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Michael Connett

We hereby give our consent to the closure of the above account and a transfer out of the closing balance as requested above.

Authorised Signatory - Pension Practitioner. Com Limited