

## Outward Payment Instruction (Faster Payment & CHAPs)

### 1. CUSTOMER DETAILS

Customer/  
Business Name

PK Wealth SSAS

Debit Account  
Number

44592479

### 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

£ 50,000.00

Amount in  
Words

Fifty Thousand Pounds only.

### 3. EXISTING BENEFICIARY ☐

Beneficiary  
Name

Metro Bank  
Beneficiary Ref.

B E N

### 4. NEW BENEFICIARY ☐

Beneficiary  
Name

Insignis Asset Management Ltd

Beneficiary  
Sort Code

2 0 - 0 1 - 5 8

Beneficiary Account Number

7 3 2 1 9 1 8 6

Payment Reference  
(if applicable)

PKWEAA

### 5. CUSTOMER SIGNATURE

**Primary Applicant**

*Pawel Kuzdak*

Name

Pawel Kuzdak

Date 18/07/2022

**Secondary Applicant**

Name

Georgina Martin

Date 18/07/2022

**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

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

**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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Name

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Beneficiary Ref.

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Beneficiary  
Name

Beneficiary  
Sort Code

Beneficiary Account Number

Payment Reference  
(if applicable)

### 5. CUSTOMER SIGNATURE

#### Primary Applicant

Name

Date

#### Secondary Applicant

Name

Date

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