New standing order



For Business Banking Customers

Before you begin: It's best to save this form to your computer and open it using Adobe Acrobat Reader. Doing this will allow you to fill in the PDF and upload signatures. You can get the latest version of Adobe Acrobat Reader by visiting https://get.adobe.com/reader/

Guidance notes	
You can fill in this form online. Use the toolbar to save your progress.	All sections must be completed.
Upload an image of your signature in the signatories' section once you have completed	Please return the original form as photocopies are not acceptable.
your application.	Please note: we cannot set standing orders or Direct Debits up on savings accounts.
You can also print this form and complete it by hand.	
1 Your details	
Your full name or name of business	Sort code (being debited) Account number (being debited)
Your contact telephone number	Branch name
2 Details of your standing order	
Does this instruction replace any existing standing order or Yes No	Payment reference (if applicable)
Direct Debit instructions?	
If yes please give details in special instructions below and arrange to cancel them.	First payment amount (if different to usual payment)
	£
Recipient's name	2
	First payment date
Recipient's bank and branch name	D D M M Y Y Y Y
	Usual payment amount
Recipient's sort code Recipient's account number	£
	Usual payment amount in words
	osoal payment amount in words
How often do you want the payment made?	
Weekly 4 Weekly Monthly Quarterly Half Yearly Yearly	
	Final payment amount (if different to usual payment).
Other frequencies (please give details of any special instructions)	This must have a final payment date.
	£
	Final payment date (if applicable) OR Until further no
	D D M M Y Y Y Y



ice

3	Your agreement with us	
1 l	e two ways to add signatures to the form: pload an image of your signature int and sign with a pen.	To upload an image: Save the form to your device Open the form in Adobe Acrobat Reader Select the signature field to upload your image.
	se you to debit my/our account, in accordance with the details in Section 2. uest is addressed to the bank which holds my/our account.	Your Signature
	ompleted and signed: ost the form to: Lloyds Bank, Box 1, BX1 1LT.	

For bank use only	SMD	Branch stamp
ID type and reference number	checked	
Sort code For 30-00-02 accounts and all corporate (set 41) customers, send the completed f City Office, Gillingham, Kent, TNT 23	orm to:	

Please contact us if you would like this information in an alternative format such as Braille, large print or audio.

Lloyds Bank plc Registered Office: 25 Gresham Street, London EC2V 7HN. Registered in England and Wales no. 2065. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under Registration Number 119278. Eligible deposits with us are protected by the Financial Services Compensation Scheme (FSCS). We are covered by the Financial Ombudsman Service (FOS).