

## Guidance for changing a signatory

If you are completing a bank mandate for the first time or need to add/remove signatories to your account please follow the steps below which will help us process your request as quickly and efficiently as possible. All forms can be downloaded from CAF Bank online or alternatively, if you would like to clarify any of these steps or to request further forms please contact our Customer Service team on **03000 123 456** who will be pleased to help you.

**Please note that any new mandate submitted will override your existing mandate(s).**

### Step 1

Complete in full all appropriate sections of the bank mandate form, continuing onto a *Bank Mandate extended signatories list* form if you have more than six signatories.

Please ensure:

- You complete the form clearly in full using BLOCK CAPITALS in black ink and include all information requested.
- All signatories listed on the mandate must sign, including those who are continuing as signatories.
- If any signatories have lived at their current address for less than three years they must also provide their address(es) for the previous three years on the *previous address* form.
- If you wish to use the mandate for more than one account, please state all the account numbers which you intend this mandate to cover. ALL signatories and signing instructions will need to be the same for each account.
- If the existing signatories from the old mandate are not available to authorise the new signatories please contact our Customer Service team for further guidance.
- Please sign the bank mandate and all further instructions in accordance with your existing mandate until you receive written confirmation that your new mandate is activated.
- The signatures on the new mandate will be the only signatures we can accept for instructions once the new mandate is in place.
- Please ensure that you adhere to any stipulations for signing instructions in your governing document.

### Step 2

In order for CAF Bank to fulfil its administrative requirements and to comply with UK anti-money laundering legislation, before your mandate can be updated, we are required to complete checks on individuals that are operating the account before the update can occur.

Wherever possible these checks are performed electronically, minimising any delay in updating your bank mandate. In certain circumstances, however, it may be necessary to request additional identification documentation which may need to be certified. Before continuing please ensure that each person named on this bank mandate is aware of how we will process the data. If you are aware of any individuals who may already be associated with other CAF Bank accounts please notify us in a covering letter to avoid us undertaking our electronic checks again.

Non UK residents will need to provide certified identification documentation with the bank mandate form, please contact our Customer Service team for further guidance.

### Step 3

Please complete the change of contact form if you need to change the individual or address that correspondence is sent to, refresh your telephone password, register for online banking or online statements.

This is required to be signed in accordance with your existing bank mandate.

In order for us to accept enquiries or instructions by telephone, we require a telephone password. The account contact and signatories will require access to this password. This will be used as part of our identification procedures for calls into and from the bank for all authorised individuals. We will not be able to accept telephone instructions from you if you do not have a telephone password.

#### Data protection and confidentiality

We take data protection and privacy very seriously. Our Privacy Notice, which can be viewed at [www.cafonline.org/privacy](http://www.cafonline.org/privacy), describes the way in which we collect, retain and use personal data. We aim to ensure that we only hold personal data for as long as it is needed and that it is held securely.

The personal information we collect from you in this application will be shared with fraud prevention agencies, who will use it to prevent fraud and money laundering and to verify your identity. If fraud is detected, you could be refused certain services, finance or employment.

Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found in the *CAF Bank General Terms and Conditions*, by visiting our website at [www.cafonline.org/fraudprevention](http://www.cafonline.org/fraudprevention) or by calling us on 03000 123 456.

## Step 4

To enable us to process your request promptly, please ensure that:

- Every person to be a signatory on the new mandate has been included.
- All signatories have completed their personal details and signed the mandate.
- All required account numbers have been included on the form.
- The instruction format box has been ticked.
- The declaration section, at the foot of the second page, is signed by the existing signatories in accordance with your existing mandate held by the Bank.
- Any empty boxes have been crossed through.
- Please keep a copy of your new mandate for your records.

If your signatories hold a CAF Bank business card, we will take the opportunity to update our records if there has been a change in home address. Should a Card Holder no longer be a signatory or the main account contact their Business Card will be cancelled unless otherwise instructed. Once a card has been cancelled a new application form will be required should the individual require a card at a later stage.

We aim to complete your request within 12 working days, providing all information has been supplied and our electronic verification has been successful. The account contact will receive written confirmation when your new mandate is in place. We would advise you do not sign as per your new mandate until this confirmation is received.

If you have any questions, please do not hesitate to contact our Customer Service team on **03000 123 456** or email us at [cafbank@cafonline.org](mailto:cafbank@cafonline.org)

Please send the bank mandate and any other completed forms to:

CAF Bank Ltd  
25 Kings Hill Avenue  
Kings Hill  
West Malling  
Kent ME19 4JQ

## Mandate

Please complete this bank mandate with the personal details of all authorised signatories.

If you require more than 6 signatories please contact our Customer Service team on 03000 123 456 to request an extended signatories list.

Please retain a copy of this bank mandate for your future reference. It is important to keep your signatories up to date to ensure your banking facilities can be used in a secure manner.

CAF Bank account number(s) to which this applies:

### Organisation name

Date effective:

Registered charity number:   
(if applicable)

Companies House number:   
(if applicable)

- (a) continues to appoint the Bank as its bankers; and  
(b) replaces any existing mandate to the Bank (except in relation to cheques and other instructions given before the Bank receives this resolution);
- accepts all relevant terms and conditions for the time being applicable to its accounts with the Bank and confirms such

acceptance to the Bank by delivering this bank mandate. For your own benefit and protection you should carefully read the terms and conditions prior to signing below. If there is anything you do not fully understand please ask for further information or seek professional advice or guidance. The Bank's terms and conditions can be obtained at [www.cafonline.org](http://www.cafonline.org) or by calling our Customer Service team on 03000 123 456.

- authorises any individual named below in 'Signatories' (an 'authorised person') either individually or, if relevant, with other authorised person(s) in accordance with the information contained in 'Instruction format' below to;
  - vary the terms of their bank mandate and vary or enter into any other agreements with the Bank from time to time;
  - give instructions concerning the operation of our bank accounts and otherwise communicate with the Bank in accordance with the Bank's applicable terms and conditions and this mandate.

### Instruction format

Please tell us how you would like your account to run, eg a minimum of two signatures for cheques, three signatures for other instructions etc. Please ensure you meet any signing stipulations as stated in your most up to date governing document.

Please accept:  Two signatures  Other\*

\* Please indicate briefly how you wish us to accept instructions. Please note CAF Bank would advise a minimum of 2 signatories.

### Signatories

We make electronic identity checks using your signatories' date of birth, home telephone (landline) number and address history for the last **three years**. If any signatories have lived at their current address for less than three years you must provide their previous three year address information at the end of this form. Not providing this will prevent us from progressing the application until further steps to identify the individuals can be made.

Please note, we recommend you have at least two nominated signatories to approve transactions in writing. When nominating signatories, it is best to consider practical issues of obtaining signatures whenever required. Ensure that all signatures are **exactly** as your signatories would normally sign as any discrepancy may result in requests for money to be sent being returned. In some rare circumstances we may be required to contact the signatories on the contact details provided on this form.

Account signatory 1 -  Mr  Mrs  Ms  Miss  Other

Full name  Date of birth  (dd/mm/yy)

Nationality  Home telephone (inc std)

Home address  Position

Postcode  Signature

Account signatory 2 -  Mr  Mrs  Ms  Miss  Other

Full name  Date of birth  (dd/mm/yy)

Nationality  Home telephone (inc std)

Home address  Position

Postcode  Signature

Your CAF Bank account number(s) to which this applies:

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Bank Mandate – Signatories continued

Account signatory 3 – <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Full name	Date of birth (dd/mm/yy)
Nationality	Home telephone (inc std)
Home address	Position
Postcode	Signature
Account signatory 4 – <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Full name	Date of birth (dd/mm/yy)
Nationality	Home telephone (inc std)
Home address	Position
Postcode	Signature
Account signatory 5 – <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Full name	Date of birth (dd/mm/yy)
Nationality	Home telephone (inc std)
Home address	Position
Postcode	Signature
Account signatory 6 – <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Full name	Date of birth (dd/mm/yy)
Nationality	Home telephone (inc std)
Home address	Position
Postcode	Signature

## Declaration

This declaration must be signed by existing authorised signatories in accordance with your existing mandate held with the Bank. This mandate replaces any existing mandate held at the bank for the stated account numbers only.

We the undersigned confirm that we have authority to act on behalf of our organisation to enter into this agreement and to authorise the account signatories above.

We understand previous signatories will have their Business Card(s) cancelled, unless we inform you under separate instruction - signed in accordance with our new mandate.

Full name 1	Signature	Date
Position		
Full name 2	Signature	Date
Position		

Your CAF Bank account number(s) to which this applies:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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## Previous addresses

This section is for authorised signatories who have lived at their current address for less than three years. Please supply further address details to complete the process.

Please complete your full name, house name or number, road name, and the postcode.

There is more space provided on the reverse of this page.

Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

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Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

---

Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

---

Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

---

Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

---

Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

---

Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

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Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

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Full name
House name/number, road name
Postcode
Date from <input type="text"/> to <input type="text"/> (mm/yy)

Your CAF Bank account number(s) to which this applies:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Previous addresses  
continued

Full name	
House name/number, road name	
Postcode	
Date from	to (mm/yy)
Full name	
House name/number, road name	
Postcode	
Date from	to (mm/yy)
Full name	
House name/number, road name	
Postcode	
Date from	to (mm/yy)
Full name	
House name/number, road name	
Postcode	
Date from	to (mm/yy)
Full name	
House name/number, road name	
Postcode	
Date from	to (mm/yy)
Full name	
House name/number, road name	
Postcode	
Date from	to (mm/yy)

Telephone calls may be monitored or recorded for security/training purposes.  
Lines are open Monday to Friday 9am - 5pm (excluding English bank holidays).

CAF Bank Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Financial Services Register number: 204451).  
CAF Bank Limited Registered office is 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JQ.  
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