

Cash ISA Transfer Authority Form

Please complete this form to transfer into a Cash ISA from an existing Cash ISA held with another provider.
Please complete a separate form for each ISA transfer request.

This form can be completed electronically then saved and printed. If completing manually, please complete in black ink and BLOCK CAPITALS. If you need any help completing this form, please call us on 01257 235003 or visit your local branch.

1. Personal Details (to be completed by the ISA investor)

Title		First Name(s)		Surname	
Permanent Residential Address				Date of birth	
				National Insurance Number	
				<i>You should be able to find your National Insurance Number on a payslip, P45 or P60, a letter from HM Revenue and Customs, a letter from DWP or pension order book.</i>	
Home Telephone				Mobile Number	

*Individual investors remain responsible for managing their overall subscription limits.
This means individual investors must ensure that collectively the total subscriptions remain within the overall ISA limit for the tax year.*

2. Details of the Cash ISA to be transferred

Name of existing ISA Manager			
Full address of existing ISA Manager			
Sort Code		Account Number	
Roll Number (if applicable)			

Are you transferring the full balance and closing the account ☐ Yes ☐ No

If no, please complete below:

Amount to be transferred from previous tax year	Estimated value: £	
Amount to be transferred from current tax year	Estimated value: £	

3. Transfer authority (to be completed by the ISA investor)

I authorise my existing ISA Manager (as specified above) to transfer the ISA (account number above) to Chorley and District Building Society. I authorise my existing ISA Manager to provide Chorley and District Building Society with any information, written or non-written, concerning the cash ISA and to accept any instructions from them relating to the cash ISA being transferred,

Where a period of notice is required for closure/part transfer of the existing cash ISA, I give my consent to either: (ISA investor to tick as appropriate)

1. Serve the full notice period before this instruction can be processed; ☐ OR
2. Proceed immediately with the transfer and bearing any consequential penalty which may be applied ☐

Signature:		Date:	
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4. Transfer Acceptance (to be completed by new ISA Manager)

In circumstances where the funds to be transferred are not cash deposits, please notify me as I may not be able to accept the transfer. Otherwise I Chorley and District Building Society am willing to accept this investor's cash ISA funds, subject to HMRC rules (the ISA regulations). I deem the date shown below to be the transfer date of this cash ISA.

Date:		Address	
Name			
E-mail			
Telephone			

Head Office address: Key House, Foxhole Road, Chorley, PR7 1NZ | 01257 235003 | chorley@chorleybs.co.uk | www.chorleybs.co.uk

Chorley Building Society is the trading name of The Chorley and District Building Society. The Chorley and District Building Society is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority with the Firm Reference Number: 2062023.

You can check this on the Financial Services Register at <http://register.fca.org.uk>. Our registered Office is at Key House, Foxhole Road, Chorley, PR7 1NZ.