

This form can be completed electronically, Saved and printed.
If completing manually, please complete in black ink and BLOCK CAPITALS. Complete all boxes that apply.

1. Information about the investor (to be completed by the ISA investor)

Title First Name(s) Surname

Permanent Residential Address

Date of birth

National Insurance Number

Postcode

Contact Tel no (inc. area code)

2. Information about the ISA to be transferred (to be completed by the ISA investor)

Name of existing ISA Manager

Full address of existing ISA Manager

Postcode

Account number of existing ISA to be transferred:

1. Do you want to close your current cash ISA and transfer all the balance, including the accrued interest?
(If requesting a partial transfer, please check with your existing ISA manager that this is possible) Yes No
2. Have you subscribed to your current cash ISA in the current tax year? Yes No
- If you answered YES to Q1 please ignore Q3 & Q4**
3. **If you answered YES to Q2:** Do you want to transfer current tax year subscriptions as part of this transfer? Yes No

It is important to note that under HM Revenue & Customers ISA Regulations, only whole transfers of current tax year subscriptions and interest can be accepted.

4. Please specify how much of your cash ISA you want to transfer:
If **only** current year subscription plus interest is to be transferred, tick here OR specify

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 & District Building Society. I authorise my existing ISA Manager to provide Chorley & 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:

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 & District 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:

Name

E-mail

Telephone

Address

Postcode