Transfer Request Form Cash ISA





Protecte

To arrange your transfer, please complete this form and return it to us

Your personal details											
Please ensure this section is completed in full. Where we've included information about you,											
please check this is correct. If anything needs amending, please make the changes to the form as appropriate.											
If this section isn't complete, we won't be able to process your application.											
Title:		Tel									
First Name(s):				Tel home:							
Surname:			Emo	ail:							
Address:											
			Nationality:								
			Country of Residence:								
Postcode:	*National Insura				rance Number:						
Date of birth:	DD MM	YYYY									
	ut the ISA you want to trar										
	ut the ISA you want to tran										
Information abou	ut the ISA you want to tran				_						
Information about Name of your exi	ut the ISA you want to transting provider:				-						
Information about Name of your exit Sort Code: Account Number	ut the ISA you want to transting provider:				-			-			
Information about Name of your exit Sort Code: Account Number Roll/Reference N	at the ISA you want to transting provider:	nsfer	SA?		-	All		-	Part		
Information about Name of your exit Sort Code: Account Number Roll/Reference No. 1. Do you want to.	ut the ISA you want to transting provider: : umber (if required): transfer all or part of this erring part of your ISA, ple	nsfer		w muc	- :h you		£		Part		
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Your Leek Building Society Cash ISA										
Account Number:										
Open New Account - Please tick box if equired OFFICE USE ONLY										
If your transfer is to a new account, please ensure an ISA application form is completed at the same time as this form.										
Data Protection Legislation										
The Data Controller is Leek United Building Society, trading as Leek Building Society, with its principal office at 50 St. Edward Street, Leek, Staffordshire, ST13 5DL.										
Use of Your Information: The information you provide will be held by the • Market research	e Society c	and u	sed ⁻	for:						

- Fraud prevention
- Administration

Your information may be shared with other companies within the Leek United group for the purposes stated above. This information may be retained during the life of the account and for administrative reasons after the account has closed.

Your Data Protection Rights:

Under data protection legislation, you have the right to:

- Receive a copy of the personal information held about you
- Have inaccurate data corrected
- Restrict the purposes for which your personal data is used
- Request the erasure of your data in certain circumstances

Eurthor information on how we manage your data can be found in our Drivacy Notice at

leekbs.co.uk/privacy/, or you can request it from any of our above.	<u> </u>						
If you would like to obtain information held about you, pleas	se write to the address above.						
Transfer Authority							
I authorise you to provide Leek Building Society with any in	formation they request about my Cash						
ISA and to transfer the balance to them at Leek Building So Staffordshire, ST13 5DL. ISA Manager refer Z1188							
Where I must give notice to close or transfer part of the exi ISA provider to (please mark X in the appropriate box):	isting Cash ISA, I instruct my existing						
1. Wait until the full notice period to end or until the maturi	ty date before transfer						
Date of the maturity/end of the notice period:	Enter date here						
2. Carry out the transfer as soon as possible, accepting any charges or loss of interest which may be applied							
Signature:	Date:						

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