Change of Address and/or contact details for officials with business accounts



Use this form to inform us of a change of address and/or contact details

Account information						
		ted below. We'll need to let our Mortgage ere you have a current mortgage account.				
Customer Name(s):						
Details of your new address and contact information						
*New Address: Not required if change	of contact details	s only				
Postcode:						
Is the above address also the account co	respondence addr					
	·	you are changing your address on, do you				
have significant control of that business	_					
Please note that where we are advised that your country of residence is no longer the UK, under our current policy we will have no option but to close your account(s). ISA accounts may remain open but no further subscriptions are allowed.						
Tel mobile:	Tel home:					
Email:						
If you use Leek Online and change your email address you'll need to log into your account to change your email address there too. For security purposes, we're unable to do this for you.						
Details of the Business – please reconfir	m the following inf	formation				
What's the legal status of your business? (tick box): Sole Trader Partnership Limited Company Limited Liability Partnership Registered Charity Name of Business:						
Correspondence Address:		Registered Address (if different):				
Postcode:		Postcode:				

Website address:					
Companies House Registration Number:					
Charities Registration Number:					
Year of Incorporation:					
Nature and purpose of the business:					
How many employees does the organisation have?					
What was the turnover in the last 12 months?	£				
What's the anticipated turnover for the next 12 months?	£				
Do you qualify as a micro, small or medium sized enterprise (SME)? Defined under government regulations for this purpose as enterprises with annual turnover of €50m equivalent or less					
Is this organisation resident for tax purposes only in the UK? Yes No					
If No, please complete a separate tax residency self-cert	ification form.				
Data Protection Legislation					
The Data Controller is Leek United Building Society tradin principal office is 50 St. Edward Street, Leek, Staffordshire					
The information you're supplying will be held by the Society and used for market research purposes, developing goods and services, statistical and business analysis, customer servicing, fraud prevention, and administration. Your information may be passed to other companies within the Leek United group for the purposes stated above.					
This information may be held during the life of the account and for administration reasons after the account has closed.					

Under data protection legislation you're entitled to receive a copy of personal information held about you, have inaccurate data corrected, restrict the purposes for which your personal data is used and in certain circumstances the right to your data being erased. Further information regarding how we manage your data can be found within our Privacy Notice which can be found at www.leekbs.co.uk/privacy or alternatively can be requested from any of our branches or by writing to the address above.

If you'd like to obtain information held about you, please write to the address above.

Supporting our Membe	rs						
We recognise there are each customer's indivappropriate support.							
If you'd like to notify us be in touch. We can the	_	• •					
Would you like to be ke	pt up to dat	e with our lat	est produc	ts and se	rvices	; ?	
We'd love to keep you i member of Leek Buildir		out the prod	ucts and se	ervices th	nat are	e available to you	as a
We'll never share your data with third parties to try to sell you something. You can decide if you want to receive these messages and how.							
In order to receive thes of contact.	e, please tic	k 'Yes' below	along with	one or n	nore o	of the preferred m	ethods
Customer 1: Yes	No	Email	Post	Phone		SMS/Text Messo	age
Customer 2: Yes	No	Email	Post	Phone		SMS/Text Messo	age
Customer 3: Yes	No	Email	Post	Phone		SMS/Text Messo	age
Customer 4: Yes	No	Email	Post	Phone		SMS/Text Messo	nge
You're in control of your preferences and can change your mind at any time. You can change your preferences by writing to our Head Office, emailing us, visiting a branch, or updating the preferences yourself through 'Leek Online'. See our privacy policy, www.leekbs.co.uk/privacy for more information about how we use your information.							
Please sign here in all in Where accounts require correspondence addresses	e multiple si	gnatures, all	parties are	required	d to sig	gn to amend the a	ccount
Account Holder 1 signature:				Date:			
Account Holder 2 signature:				Date:			
Account Holder 3 signature:				Date:			
Account Holder 4				Data			

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signature:

Date:

OFFICE USE ONL	Υ				1 st check	2 nd check (SHCR/New CA)
Signatures checked by	:					
•	ress form against records to ensure that Query with CA if any are missing or any a					
Check customer living	address correct - CUVL Contact Details					
Check customer corres	pondence address correct - CUVL Cont	act Detai	ls			
Check phone number and email address amended and in correct format – CUVL Contact Details						
Check account correspondence address correct – check each account using ACHE						
	address changed? If they use Leek Online amend this separately?	ne, were	they informe	ed they will need t	0	
Have customer marketing preferences been updated?						
Are there any mortgage accounts? If so, has a copy of this form been sent to Mortgage Admin?						
Has Change of Address letter (ADDLTB) been issued confirming Change of Address?						
Have all business details been completed and reconfirmed against existing records?						
Is organisation resident only in the UK for tax purposes? If no, has an Entity self-certification form been completed?						
2 nd check – Ensure the Mortgage Account Correspondence address has not been amended by CA						
2 nd check - Has the Signatures checked by box (above) been completed?						
If there is a No Trace Hold Code on the account(s), has this been removed? (Where present, attach relevant copies of ID/EID and add details of documentation taken below)						
ID Provided (only red	quired for removal of NO TRACE Hol	d Code)	1			
EID Reference:						
Confirmation of ID:	ID Type		Reference	Number		
Address						
Address changes:		1				
Performed by:		Date Completed:				
2 nd checked by:		Date Completed:				