



## Withdrawal/Notification Form

Account No.

Tick box if account is to be closed

### Information for 90-Day Notice account holders only

Please note that 90 days' notice must be given when requesting a withdrawal. The 90-day notice period begins on the date we receive this form.

### Information for Eco-60 account holders only

Please tick the appropriate box when requesting a withdrawal:

- 60 days' notice  
 No notice (60 days' loss of interest)

The 60-day notice period begins on the date we receive this form.

### Withdrawals are available:

#### 1. By Faster Payment (up to a maximum of £100,000)\* to an account in your name

\* Same day transfers (CHAPS) are available at a charge of £25. You will need to request a CHAPS if your payment exceeds £100,000.

Account name(s):

Sort code:

Account no.

Reference (if relevant):

Amount: (minimum £5.00 / maximum £100,000)

£

**Please note that once a transfer has been processed it cannot be stopped.**

#### 2. By cheque payable to:

**Please note that once a cheque has been issued it cannot be stopped.**

<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>

#### 3. By transfer to the following Ecology Building Society account:

Account no.

£

Reason for withdrawal:

**IMPORTANT:** Describe the reason for the withdrawal. Consider carefully why you want to make this withdrawal and whether you could be a victim of a scam.

I/We request a withdrawal in accordance with the instructions set out above

Signature(s)

Date




Please note that your instructions can only be carried out if you have signed this form.

For office use. Actioned by:

Date:



## Change of address notification

Account(s) in the name(s) of



Please list all your account numbers



Please note that with effect from (date)

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my/our new address will be





Postcode

New telephone

New email

Signature(s)



## Change of name notification

Please list all your account numbers



I,

hereby notify the Ecology Building Society that with effect from (date)

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I wish to be known as

and authorise you to alter your records and (if applicable) my passbook accordingly.

I enclose a copy of my

(e.g. copy of marriage certificate or change of name deed) as confirmation of my change of name.

Existing signature

New signature

Date

**Please return completed forms to us at the above address**

For office use. Actioned by:

Date: