



Bank Details Form

NAME

DATE OF BIRTH

**ADDRESS
(inc post code)**

TELEPHONE NO

**NATIONAL
INSURANCE NO**

BANK NAME

**SORT CODE
(6 digits)**

**ACCOUNT NUMBER
(8 digits)**

ACCOUNT NAME

**REFERENCE NO
(Building Society)**

I confirm that any payments made to me from Baker Hardning will be sent to the above account, the details of which I have entered above.

I will not hold Baker Hardning liable for any payments received late or not at all in the event of the details above being incorrect.

I authorise my payment to be paid into the account above.

Signed: Date: