

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do **not** use the return or enter keys.

Please ensure this form is signed and then forwarded to:

NatWest, Retail Processing Operations, Chatham, Waterside Court, Chatham Maritime, Chatham ME4 4RT

1. Customer details

Title Mr Mrs Miss Ms Other
(Please specify)

First name

Middle name(s)

Surname

Address line 1

Address line 2

Address line 3

Address line 4

Postcode

NatWest ISA number Sort code

National Insurance number Date of birth (DD/MM/YYYY)

2. Transfer information

Name of current Cash ISA provider

Existing ISA number Sort code

Roll/reference number

Please note:

The terms and conditions of some ISA products do not allow only part of an ISA to be transferred. Your existing provider may need you to give them specific information before the transfer can go ahead. Please check with your existing ISA provider if you are not sure about this.

I would like to:

Close and transfer the ISA

OR

Undertake a partial transfer Amount to be transferred £ . p

For customers undertaking a partial transfer only: if you have subscribed to this ISA for the current tax year, do you want to include the subscription for the current year? Yes **OR** No

Important the amount in your account representing the current tax year subscription can only be transferred in whole and **not** in part.

3. Transfer authority

I authorise my existing ISA Manager (named above) to transfer my Cash ISA to NatWest plc.

I authorise my existing ISA Manager (named above) to provide NatWest with any information, written or non-written, relating to the request to transfer my ISA/ISA funds.

Where a notice period is required for closure/part transfer of the existing Cash ISA, I give my consent to:

Serve the full notice period before this instruction can be processed

OR

Proceed immediately with the transfer and apply any penalty which may occur

I authorise NatWest to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash and to make on my behalf any claims to relief of tax in respect of ISA investments.

I agree to the ISA Terms and Conditions.

I declare that this application form has been completed to the best of my knowledge and belief.

Customer signature

Name (in full)

Date (DD/MM/YYYY)

For NatWest branch use only

CIN number

Branch sort code

Staff contact name

Branch contact number

Instruction to existing ISA Manager

Please make cheques payable to 'National Westminster Bank plc (customer name/ISA number)' and send with ISA Transfer Certificate to the address below, or send the ISA funds via electronic transfer to the ISA account number and sort code quoted in the above 'Customer details' section.

Please send the ISA Transfer Certificate to the address below:

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