

# Letter of Authority to Transfer – Cash ISA Only

Please ensure all boxes are completed in full, using black ink and BLOCK CAPITALS and sign as required. Incomplete or incorrect forms will cause a delay and may have to be returned to you and could also result in your application being rejected.  
**A separate application form must also be submitted if you are transferring funds from another provider.**

## Information about you (Please ensure that the details held by both providers are correct and up to date, as the transfer may be delayed if the details do not match)

Title: (Mr/Mrs/Miss/Ms/Other)		National Insurance No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
First name(s):		Permanent home address:	<input type="text"/>
Surname:			<input type="text"/>
Date of birth: (dd-mm-yyyy)			<input type="text"/>
Telephone Number: (Daytime)			<input type="text"/>
Telephone Number: (Evening)		Postcode:	<input type="text"/>
Mobile:		Occupation:	<input type="text"/>
Transfer to a West Brom ISA - Account Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Please leave blank if transferring to a new ISA	Estimated Annual Income:	<input type="text"/>

## Information about the ISA you want to transfer

Name: (of existing ISA provider)		Sort Code:	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>
Address: (of existing ISA provider)	<input type="text"/>	Account Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	<input type="text"/>	Roll number: (if applicable)	<input type="text"/>
Postcode: (of existing ISA provider)	<input type="text"/>	<b>Please note:</b> 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.	

## Please answer all applicable questions:

1) Do you want to transfer all or part of this Cash ISA? (tick appropriate box)	All <input type="checkbox"/> Part <input type="checkbox"/>
2) Have you subscribed to your ISA in the current tax year? (tick appropriate box)	Yes <input type="checkbox"/> (Please answer question 3) No <input type="checkbox"/>
If yes, please indicate total subscriptions made in the current tax year £ <input type="text"/>	
3) If you answered yes to Question 2 and are transferring part of your ISA, do you want to include the subscription from the current tax year? (tick appropriate box)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Please note that the amount in your account representing current tax year subscriptions can only be transferred in full and not in part.
4) If you are asking to transfer part of your ISA, please say how much of your Cash ISA you want to transfer.	£ <input type="text"/>
Or, if you only want to transfer your subscriptions from the current tax year, (tick here) <input type="checkbox"/>	

## Transfer Authority

I authorise my existing ISA provider to transfer the ISA (account number above) to the West Brom. I authorise my existing ISA provider to provide the West Brom with any information about the Cash ISA and to accept any instructions from them relating to the Cash ISA being transferred.

Where I must give notice to close or transfer part of the existing Cash ISA, or the existing Cash ISA contains a fixed-term deposit that has not reached its maturity date, I instruct my existing ISA provider to either: (tick the appropriate box)

1. wait for the full notice period to end or wait until the maturity date (whichever is relevant) before going ahead with this transfer: ☐

or

2. depending on the terms and conditions, carry out the transfer as soon as possible – I accept any consequential loss of interest or charges which may be applied. ☐

Signature:	Date:
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## Transfer acceptance (your new ISA provider fills this part in)

We are willing to accept this ISA transfer in line with the customer's instructions above, as long as the following conditions are met.

- The transfer proceeds are made up of cash deposits only
- We must receive the transfer proceeds no later than  /  /
- Where the customer has shown above that they want to transfer subscriptions from the current tax year, these must not be more than £

For the purposes of the transfer of the ISA wrapper under the ISA regulations, the date shown below will be the transfer date.

Name of new provider:	Date:
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Please send your completed Letter of Authority to Transfer together with the product application form to FREEPOST THE WEST BROM. (Please write the address exactly like this, all in upper case and on one line. You don't need to use a stamp. Please note: Royal Mail delivers Freepost as second class mail.)

Calls and electronic communications may be monitored and/or recorded for your security and may be used for training purposes. Your confidentiality will be maintained.

The West Brom is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority. Register no. 104877. 'the West Brom' is a trading name of West Bromwich Building Society.

Head Office: 2 Providence Place, West Bromwich B70 8AF. Visit our website: [www.westbrom.co.uk](http://www.westbrom.co.uk)

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