



 as individual as you

## NOTIFICATION OF LOST PASSBOOK

Account Number	<hr/>
Name of Account Holder(s)	<hr/>
Title	<hr/>
Full Names	<hr/>
Surname	<hr/>
Address	<hr/>
	<hr/>
	<hr/>
	<hr/>
	<hr/>
Date of Birth	<hr/>
National Insurance No.	<hr/>
Email Address	<hr/>
Home Tel No.	<hr/>
Mobile No	<hr/>

**The £20 charge is to be deducted from either the *existing account / paid by cash/ paid by debit card***

*An administration charge of £20 applies except under the following conditions:*

- *If Stolen and Crime Number is provided –Crime Number.....*
- *If the account is closed. Please note no new account can be opened for 12 months.*
- *If balance is being transferred to an existing account.*

In accordance with the Society's Rules I/we hereby notify you of the loss/theft of the passbook for the above numbered account.

**Please note that the society will not be responsible for any loss suffered as a direct result of the passbook having been lost/stolen. If the passbook is found please inform us as soon as possible.**

I/We agree to the balance of this account to be dealt with as detailed below: **(Please provide instructions in the following table.)**

In case of notice accounts, do you wish to give notice to close? **\*Yes /No**

(If No, a penalty will apply)

	Transfer balance to existing account	Account No: Name:
	Issue duplicate passbook (£20 fee required)	
	Transfer balance to a new account -new application form required (£20 fee required)	New Account No:
	Issue a cheque for total balance payable to the account holder	

Signature(s)

\_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

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OFFICE USE ONLY	
SIGNATURE CHECKED BY	
SIGNATURE VERIFIED BY	

ACCOUNT REVIEW (Y/N OR NOT APPLICABLE)	OUTCOME

LOST CODE IN PASSBOOK MAINTENANCE INPUT	
£20 FEE RECEIVED	

Paid by      Cash    ☐    Chq    ☐    Debit Card    ☐    From existing account    ☐

DUPL WARNING MEMO CODE INPUT	
NOTES ADDED RE DUPLICATE P/B	
NNAC MEMO ADDED (if transferring to existing account or on closure)	
PROVISION ADDRESS UPDATED (Y/N OR NOT APPLICABLE)	
ID REQUIRED FOR CHANGE OF ADDRESS OR IF ACC IS DORMANT (Y/N OR NOT APPLICABLE)	

BACK OFFICE CHECKED BY:

\_\_\_\_\_

DATE:

\_\_\_\_\_