

Withdrawal Request

Section A

Your United Trust Bank account details

Name of Account Holder(s):

Account No:

Section B

Request details

With reference to the above account, I/we would like to request a withdrawal* of £ _____ or to close* the account.

*Delete as appropriate

(Tick as appropriate):

On expiry of the required notice/maturity

Immediately

You are not entitled to withdraw any funds from fixed deposit accounts unless the fixed deposit period has matured or from notice accounts, unless you have given sufficient notice. In exceptional circumstances and entirely at UTB's discretion, we may allow withdrawals from your account prior to the date on which they are due. A penalty charge may be applied for this and a reason for the early withdrawal must be provided below:

All repayments, interest payments and withdrawals from your United Trust Bank account will be made to the Nominated Bank account. We will not make any payments to any account other than your Nominated Bank account.

Section C

Please sign in accordance with existing mandate

Sole or first applicant

Second joint applicant

Signature:

Signature:

Name: _____

Name: _____

Date: _____

Date: _____

Third joint applicant

Fourth joint applicant

Signature:

Signature:

Name: _____

Name: _____

Date: _____

Date: _____

Please return your completed request to: United Trust Bank Limited, One Ropemaker Street, London EC2Y 9AW

United Trust Bank Limited, One Ropemaker Street, London EC2Y 9AW
Telephone: 020 7190 5599 Fax: 020 7190 5550 Email: deposits@utbank.co.uk www.utbank.co.uk
Registered in England and Wales 549690
Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority

