

# PERSONAL SAVINGS ACCOUNT

## DETAILS AMENDMENT FORM

This form should be used to amend existing account details with us. If you require any assistance please contact our customer service team on **0345 845 0829**, lines are open 8am and 6pm Monday to Friday (10am Wednesdays). Please note that a separate form is required for each account you have with us. Additional forms are available to download from our website, [www.scottishwidowsbank.co.uk](http://www.scottishwidowsbank.co.uk) or on request from our customer service team either by telephone or by post.

**Please complete ALL fields in this section, and update other sections as required.**

Account Number

**First customer**

**Second customer**

Name of

Account Holder

Nationality (List all if more than one)

Countries of tax residency (List all if more than one)

Town/city of birth

Country of birth

Tin

By TIN, we mean your Taxpayer Identification Number or similar tax payer reference you hold for countries you are tax resident in.

Occupation

Do you intend to save into this account on an ongoing basis? (please select)

No:      No activity planned.    Yes: Monthly £                      and/or Annually £

### CHANGE OF CODE WORD

Existing

New

First Primary School

Mother's Maiden Name

Personal Choice

Always take reasonable steps to keep the passwords and other security information secret at all times. This is essential to help prevent fraud and protect the accounts. Take care when storing or disposing of information about your accounts. You should take simple steps such as shredding printed material. It's essential that you tell us as soon as possible if you suspect or discover someone else knows your security information – call our customer service team on **0345 845 0829**.



## YOUR MARKETING CHOICES

We'd like to keep you up to date on products and offers that may be of interest to you. Select how you want us to contact you below.

This won't affect any information we have to send you, such as statements.

Don't worry, if you change your mind, you can update your choices at any time.

	FIRST CUSTOMER		SECOND CUSTOMER	
<b>INTERNET BANKING</b> You'll see relevant messages when you log on to Internet Banking and our apps. If you choose 'No', you may still see messages, but they won't be tailored to you.	Yes	No	Yes	No
<b>EMAIL</b>	Yes	No	Yes	No
<b>POST</b>	Yes	No	Yes	No
<b>DEVICE MESSAGING</b> You'll receive relevant notifications to your mobile device.	Yes	No	Yes	No
<b>TEXT MESSAGE</b>	Yes	No	Yes	No
<b>PHONE</b>	Yes	No	Yes	No

### About Scottish Widows Bank

By saying yes you are giving your consent to Scottish Widows Bank to use your personal information to send you relevant offers and products. Scottish Widows Bank includes the following legal entities: Lloyds Bank plc.

Scottish Widows Bank may send you carefully selected messages on products and offers, from other companies within Lloyds Banking Group. <http://www.lloydsbankinggroup.com/our-brands/>

If changing name, please supply confirmation of both your old and new signatures below.

If not, please sign in the new/current signature box/boxes only.

### NEW/CURRENT SIGNATURE

First Customer:

Signature

Date (DD MM YYYY)

Second Customer:

Signature

Date (DD MM YYYY)

### OLD SIGNATURE

First Customer:

Signature

Second Customer:

Signature

Return your completed form to us at:

Scottish Widows Bank  
Deposit Customer Services  
PO Box 12757  
67 Morrison Street  
Edinburgh  
EH3 8YJ

Copies of our literature can be provided in large print or in Braille and additional assistance is available to any customer upon request.

If you have any special requirements please contact our customer service team on **0345 845 0829**.

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