# Third party mandate

#### This third party mandate can only be used for the M&S Everyday Savings Account.

Complete this mandate when you wish another person or persons to have authority on your account(s) and return via post to M&S Bank. We will then undertake a security check. The third party mandate will not come into force until this check has been completed. A confirmation letter will be issued to the account holder(s) once completed. For more detail on how we will use your personal information, please read our Privacy Notice at marksandspencer.com/bankprivacynotice.

#### General guidelines/instructions

- Complete in black ink only.
- Do not use correction fluid.
- The account holder(s) must initial any corrections or deletions.
- The mandate can only be cancelled in writing by the account holder(s).
- You cannot use this form for all of your joint and sole accounts. If you wish another person or persons to operate your joint and sole accounts, please complete separate third party mandates.
- This mandate does not cover any future accounts opened with us. A separate third party mandate must be submitted once the new account is active.
- The completed mandate should be returned to M&S Bank, Po Box 10565, 51 Saffron Road, Wigston, LE18 9FT.

### Identification and address verification of third party signatories

To comply with current regulations, M&S Bank must identify and verify the address(es) of any person(s) that you authorise to operate your account(s). We may be able to do this electronically. If we're not able to verify any details electronically, we will contact you with a list of acceptable forms of ID and address verification.

# Third party mandate

To: M&S Bank

Date DD - MM - YYYY	CIN				
For more detail on how we will use your personal infor bank.marksandspencer.com/legal-information/privacy-n		cy notice at			
SECTION 1 – Account holder details					
Account or reference numbers					
Account holder name					
House number or name	Street name				
Town/City	County				
Postcode	Country				
Associatio) of					
Account(s) of Insert your name(s) as it appears in the	title of the account.				
Until l/either of us give you notice in writing to the contra		(anadam (iaa)			
Insert full name of person(s) you are authorising to act as third party(ies) on my/our account(s) specified by		gnatory(les)			
SECTION 2 – Account details	ctow.				
If you have any existing third party signatories on your actified have any existing third party signatories on your actified lives a signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have any existing third party signatories on your actified have a signatories of the signatori		Yes No Not	applicable		
Sort code $\begin{bmatrix} 4 & 0 & -1 & 2 & -5 & 4 \end{bmatrix}$		Sort code 4 0	- 1 2 - 5 4		
Account number	,	Account number			
SECTION 3 -Authority					
3(i) Please ensure that you have ticked the appropriate bo	ox for each option.				
The third party(ies) are authorised to:  a) sign cheques and other instructions for payment of deposit cash	on my/our behalf whether any ac	count is in debit or credit,	Yes No		
b) obtain information relating to my/our account(s) w	th the bank.		Yes No		
c) deal with certain transactions relating to the accou	nt(s) detailed above.		Yes No		
Only the account holder(s) can: close account(s); open ad and address on the account. <b>Note: This mandate can on</b>	, ,		es; and change the names		
and address on the account. Note: This mandate can on	ty be cancetted in writing by t		ONE individually		
3(ii) Where the account holder(s) names two or more third individually or jointly when giving instructions to the k	, , ,		Any TWO together		
Please insert a tick in one of the boxes to indicate you	ır choice.	All to	sign TOGETHER		
Note: If you have named more than one third party as sign individually.	nd section 3(ii) is left blank, w				
Note: Telephone access will only be available to third	party signatories if they are a	uthorised to sign individu	ally.		
SECTION 4 - Telephone access					
Does the third party require telephone access? (Only appl mandate is unrestricted)	icable if each third party signato	ry can sign individually and	the Yes No		
If yes, please indicate who requires access					
Note: If section 4 is left blank, we will assume telepho	ne access is not required.				

### Third party signatory/signatories

For more detail on how we will use your personal information, please read our privacy notice at bank.marksandspencer.com/legal-information/privacy-notice.

- 1. All third party signatories must complete their details and sign the signatory box below only new signatories need to sign.
- 2. Each third party signatory must provide the Bank with the required documentation to prove their identity and address.
- 3. Unused signatory boxes are to be ruled through.

THIRD PARTY PERSO	DNAL D	ETAILS							
Title	Mr		Mrs	Ms		Miss	Dr [		Other (please specify)
First name						Middle name			
Surname									
Are you now or have you ev	ver been l	known by any	other name	es? eg profes	ssional or m	naiden name	Yes	No	
If you have been known by If you need further space, p				nem below. T	here is spa	ce for 2 additio	nal names	below.	
Other name 1						$\neg$			1
Title	Mr		Mrs	Ms		Miss	Dr		Other (please specify)
First name						Middle name			
Surname									
Other name 2									I
Title	Mr		Mrs	Ms		Miss	Dr [		Other (please specify)
First name						Middle name			
Surname									
Date of birth	DD	- M M	- Y Y	Y					
Nationality/Citizenship (1)									
You may be a national or c example. If you hold more									ional elections, for
Nationality/Citizenship (2)				1	Nationality/	Citizenship (3)			
Contact telephone number									
Current address (please no	te we are	unable to acc	ept c/o or F	O Box addre	esses)				
				Postcode			Country		
How long have you lived he	ere?	years	mont	hs					
If you've been at your curre There is space for two addit									s period.
Previous address 1									
				Postcode			Country		
How long have you lived he	ere?	years	mont	hs					
Previous address 2									
				Postcode			Country		
How long have you lived he	ere?	years	mont	hs					
By signing below you agr Conditions which you've i	-	erate the acc	ount(s), de	tailed in sec	ction 2 of t	this form, in ac	cordance	with M&S	Banking Terms and
To prevent crime and to ve your details against any da and identification purposes creditworthiness. If you pro	tabase, pu s. A record	ıblic or otherw I of the search	vise, and ma will be reta	ay also use t ained. The re	he details y cord will no	ou have providet be visible to c	ed to assist other partie	t other comes and will r	npanies for verification not impact upon your
I give permission for you	to carry	out appropri	ate checks	against my	name.				
Signature	X								

## Third party signatory/signatories

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THIRD PARTY PERSO	DNAL D	ETAILS						
Title	Mr		Mrs	Ms		Miss	Dr	Other (please specify)
First name						Middle name		
Surname								
Are you now or have you e	ver been k	nown by an <u>ı</u>	y other name	es? eg profe	ssional or r	naiden name	Yes	No
If you have been known by If you need further space, I				hem below.	There is spa	ace for 2 addition	onal names	below.
Other name 1	<u> </u>		٦		Г	<b>_</b>		
Title	Mr		Mrs	Ms		Miss	Dr	Other (please specify)
First name						Middle name		
Surname								
Other name 2		_	7		_			
Title	Mr		Mrs	Ms	L	Miss	Dr	Other (please specify)
First name						Middle name		
Surname								
Date of birth	DD	- M M	- Y Y	Y				
Nationality/Citizenship (1)								
You may be a national or c example. If you hold more								te in its national elections, for three).
Nationality/Citizenship (2)					Nationality,	/Citizenship (3)		
Contact telephone number								
Current address (please no	te we are ı	unable to ac	:cept c/o or F	PO Box add	esses)			
				Postcode			Country	
How long have you lived he	ere?	years	mont	:hs				
If you've been at your curre. There is space for two addi	∟ ent addres:	s less than t						
Previous address 1								
				Postcode			Country	
How long have you lived he	ere?	years	mont				,	
0 ,								
Previous address 2								
				Postcode			Country	
How long have you lived he	ere?	years	mont	:hs				
By signing below you ago Conditions which you've		rate the ac	count(s), de	tailed in se	ction 2 of	this form, in a	ccordance	with M&S Banking Terms and
your details against any da	tabase, pu s. A record	blic or other of the searc	rwise, and ma	ay also use ained. The re	the details y ecord will no	you have provid ot be visible to	ded to assis other parti	edit reference agency will check st other companies for verification es and will not impact upon your fraud prevention agencies.
I give permission for you	to carry	out appropi	riate checks	against m	y name.			
Signature	X							

## Third party signatory/signatories

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THIRD PARTY PERSO	DNAL D	ETAILS						
Title	Mr		Mrs	Ms		Miss	Dr	Other (please specify)
First name						Middle name		
Surname								
Are you now or have you e	ver been k	nown by an <u>ı</u>	y other name	es? eg profe	ssional or r	naiden name	Yes	No
If you have been known by If you need further space, I				hem below.	There is spa	ace for 2 addition	onal names	below.
Other name 1	<u> </u>		٦		Г	<b>_</b>		
Title	Mr		Mrs	Ms		Miss	Dr	Other (please specify)
First name						Middle name		
Surname								
Other name 2		_	7		_			
Title	Mr		Mrs	Ms	L	Miss	Dr	Other (please specify)
First name						Middle name		
Surname								
Date of birth	DD	- M M	- Y Y	Y				
Nationality/Citizenship (1)								
You may be a national or c example. If you hold more								te in its national elections, for three).
Nationality/Citizenship (2)					Nationality,	/Citizenship (3)		
Contact telephone number								
Current address (please no	te we are ı	unable to ac	:cept c/o or F	PO Box add	esses)			
				Postcode			Country	
How long have you lived he	ere?	years	mont	:hs				
If you've been at your curre. There is space for two addi	∟ ent addres:	s less than t						
Previous address 1								
				Postcode			Country	
How long have you lived he	ere?	years	mont				,	
0 ,								
Previous address 2								
				Postcode			Country	
How long have you lived he	ere?	years	mont	:hs				
By signing below you ago Conditions which you've		rate the ac	count(s), de	tailed in se	ction 2 of	this form, in a	ccordance	with M&S Banking Terms and
your details against any da	tabase, pu s. A record	blic or other of the searc	rwise, and ma	ay also use ained. The re	the details y ecord will no	you have provid ot be visible to	ded to assis other parti	edit reference agency will check st other companies for verification es and will not impact upon your fraud prevention agencies.
I give permission for you	to carry	out appropi	riate checks	against m	y name.			
Signature	X							

### Account holder(s)

I/We agree that:

- i. any debt or other liability incurred under this mandate shall be the responsibility of the account holder(s) in accordance with M&S Banking terms and conditions.
- ii. M&S Bank is under no obligation to ascertain or enquire into the purpose(s) for which any of the above authorities in section 3 are exercised;
- iii. this mandate, if not revoked by me/us, shall be binding until you receive written notice of my death/either of our deaths.

### Full names and signatures of all account holders

1. Name	
Signature	×
2. Name	
Signature	×