



Friendly and Affordable Financial Services

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Sheffield Credit Union Limited
16 Commercial Street, Sheffield S1 2AT
Registered in England and Wales
Registered number: 637C

Housing Provider's Payment Instruction Form

Form to be completed for each Tenant for every start and change in payment*

Housing Provider's Name: _____
Tenant's Name: _____ Member No (if known): _____
Tenant Address: _____
Date of form: _____ Date instruction to start: _____

Please indicate what payment you require from your Tenant (please note if income is received fortnightly/four weekly, payments cannot be paid monthly – monthly payments can only be made if income is received monthly)	
Rent:	amount £_____ (4 weekly/monthly)
Rent Arrears:	amount £_____ (4 weekly/monthly)
Service Charge/other:	amount £_____ (4 weekly/monthly)
The total of these amounts will be paid as one sum.	

CHANGES TO REQUIRED PAYMENTS CONFIRMATION

The above payment represents a new arrangement set up

The above payment represents an amendment to the existing arrangement effective from the above date

The existing payments need to cease with effect from the above date (if no payment due, please set above amounts to zero)

Sheffield Credit Union requires all changes to be notified on a Payment Instruction Form and cannot accept responsibility for paying an incorrect amount where a Payment Instruction Form has not been received. Please return completed forms to Sheffield Credit Union, giving at least 10 days notice of the change required.

SIGNATURE: _____ **DATE:** _____

*all increases in payments will be confirmed with the member before being actioned.

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For Office Use Only:

Task:	Completed by:	Date:
Update managed credits		
Update MDCM		
Apply charge (if applicable)		

Change Number: _____ Chargeable/Not Chargeable (please circle)