

Sheffield Credit Union Limited 35 Townhead Street Sheffield S1 2EB Registered in England and Wales Registered number: 637C

T: 0114 276 0787 E: admin@sheffieldcreditunion.com W: www.sheffieldcreditunion.com

Third Party Authorisation

Both the member and the person to whom authority is to be delegated should complete this form.

Section A - Me	embers details		
Title:	_ Full Name:		
Address: _			
-		Postcode:	
Member Numb	er:		
Section B – A	gents details		
Title:	_ Full Name:		
Address: _			
_		Postcode:	
Date of Birth: _	//		
Daytime Telepl	hone Number:		

Section C - Declaration

I hereby authorise the individual whose details appear in section B to be able to:

- a) withdraw funds from my credit union account
- b) discuss all aspects of my credit union account.

I authorise Sheffield Credit Union Ltd to accept and to act upon all such orders and instructions as received by the Agent.

I agree that Sheffield Credit Union Ltd will not be responsible for any losses, costs, liabilities or expenses incurred by the organisation as a result of any dispute between myself and the Agent named in section B, in respect of any matter connected to my credit union account or any contradictory instructions or orders received from myself and the Agent.

Termination

You may terminate this third party authorisation by informing Sheffield Credit Union Ltd in writing. Termination will take effect only when Sheffield Credit Union Ltd has received your written instruction.

Agreement of the Agent

- I confirm I am over 18 years of age and resident in the UK
- I agree to indemnify Sheffield Credit Union Ltd and its associated companies against any losses, costs, liabilities or expenses incurred by me or Sheffield Credit Union Ltd arising directly or indirectly from any unauthorised transaction.
- I agree that this third party authorisation constitutes the entire agreement between the agent and Sheffield Credit Union Ltd in relation to the above account
- I agree to be bound by Sheffield Credit Union Ltd terms and conditions

Your personal data will be verified and processed by us in accordance to our terms and conditions and subject to the General Data Protection Regulations. If the information relating to you cannot be verified, we will ask you to provide additional information. If we cannot verify your Identity or that of your chosen agent, the nominated agent will not be able to act as Third Party to your account.

Signature of account holder	Date//
Signature of Agent	Date//
Witnessed by	Date//

Please Note: We recommend that all forms are submitted either in person at one of our offices or by post.

Please be aware that should you choose to send any personal or sensitive information to us by email this will be at your own risk and we cannot accept any responsibility for a third party acquiring this via unlawful actions outside of the organisations control.

You can subscribe or unsubscribe from receiving marketing information and change your marketing preferences at any time. We will only send information on our products and services and your details will not be passed to third parties. Please use the details in the header to contact us about your marketing preferences.

For Office Use:		
ID Provided 1)	2)	
Address Verification		
Staff Signature	Date	