

le chéile

Group

BANK INFORMATION FORM

PLEASE SIGN THIS LETTER OF AUTHORITY AND SEND IT TO YOUR BANK

Bank: _____

Address: _____

For the attention of: _____ Account name/s: _____

I/We hereby authorise the Bank to complete this form giving details of our banking arrangements, facilities and balances

Signed by the Client: _____ For and on behalf of: _____

A: Please fill in the current balances of the Accounts below

- Current Account(s) € _____
- Deposit Account(s) € _____
- Term Loan Account(s) € _____
- Undischarged Bonds € _____
- Other Account(s)/Contingencies (specify) _____

B: Detail the authorised limits in respect of:

- Overdraft € _____
- Loan Account € _____
- Bonds € _____
- Other Accounts € _____

When is the next review date: _____

Has the Bank granted all the facilities applied for in the last three years (Please circle your answer)? Y / N

C: Please detail security held by the Bank against the facilities listed in Section B above (attach additional information of required):

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D: What was the turnover i.e. total Bank lodgements for:

Last calendar year: € _____ Current year to date: € _____

E: Total interest payable/receivable:

- Last calendar year: Debit € _____ Credit € _____
- Current year to date: Debit € _____ Credit € _____

Please state the max and min monthly balances of the current account for the last twelve months. Please indicate clearly whether the balances are debit or credit. Where client operates more than one account please append separate details on each account.

Period From : _____ Period To : _____

Month	Max	Min	Month	Max	Min
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

(NB: Month 1 is the most recent month)

Please give your opinion regarding the suitability of your clients for a Bond to be issued

for the sum of € _____ for a period of _____

(Authorised Bank Official) Signed: _____

Bank Stamp: _____ Date: _____