

## **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):						
	<u>D: Wha</u>	t was the turnov	er i.e. total Banı	k lodgements for		
Last calendar year: €/£			Current year to date: € /£			
		E: Total intere	est payable/rece	ivable:		
• Last calendar year: Debit €/£			Credit €/£			
• Current year to date: Debit €/£			Credit /£€			
Please ind one accou		her the balances of separate details of	are debit or cred on each account	dit. Where client	e last twelve months. operates more than	
Month	Max	Min	Month	Max	Min	
1	IVIUA	IVIIII	7	IVIUX		
2			8			
3			9			
4			10			
5			11			
6			12			
Please giv	th 1 is the most red ve your opinion reg m of €/£	arding the suitab			be issued	
(Authorised	l Bank Official) <b>Signed</b>	':				
Bank Stan	np:	D	ate:			