

Transfer Authority for your Existing Cash ISA Provider



Information about the investor (to be completed by the ISA investor)

Title:	First name(s):	Surname:
Date of birth:	National Insurance number (if you have one):	
Permanent residential address:		
		Postcode:
Contact telephone number (inc. area code):		

Information about the ISA to be transferred (to be completed by the ISA investor)

Name of existing ISA Manager:
Address of existing ISA Manager:
Postcode:
Account number of existing ISA to be transferred:
1. Do you want to close your current cash ISA and transfer all the balance, including the accrued interest? YES <input type="checkbox"/> NO <input type="checkbox"/> <i>If requesting a partial transfer, please check with your existing ISA Manager that this is possible.</i>
2. Have you subscribed to your current cash ISA in the current tax year? YES <input type="checkbox"/> NO <input type="checkbox"/>
<i>If you answered YES to Q1, please ignore Q3 & Q4</i>
3. If you answered YES to Q2: Do you want to transfer current tax year subscriptions as part of this transfer? YES <input type="checkbox"/> NO <input type="checkbox"/> <i>It is important to note that under HM Revenue & Customs ISA Regulations, only whole transfers of current tax year subscriptions and interest can be accepted.</i>
4. Please specify how much of your cash ISA you want to transfer: If only current year subscription plus interest is to be transferred, tick here <input type="checkbox"/> OR specify £ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OR _____

Transfer authority (to be completed by the ISA investor)

I authorise my existing ISA Manager (as specified above) to transfer the ISA (account number above) to Manchester Building Society. I authorise my existing ISA Manager to provide Manchester Building Society with any information, written or non-written, concerning the cash ISA and to accept any instructions from them relating to the cash ISA being transferred.

Where a period of notice is required for closure/part transfer of the existing cash ISA, I give my consent to either: [ISA investor to tick as appropriate]

1. serve the full notice period before this instruction can be processed
OR
2. proceed immediately with the transfer and bearing any consequential penalty which may be applied

Signed:	Date:
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Transfer acceptance (to be completed by new ISA Manager)

In circumstances where the funds to be transferred are not cash deposits, please notify me as I may not be able to accept the transfer. Otherwise I the Manchester Building Society am willing to accept this investor's cash ISA funds, subject to HMRC rules (the ISA Regulations). I deem the date shown below to be the transfer date of this cash ISA.

Date:	Email: savings@themanchester.co.uk
Name: Manchester Building Society	Telephone: 0161 923 8065
Address: PO Box 4256, Manchester	Postcode: M60 3AX