For bank use only

Night Safe facilities



Please complete the front of this form for Limited Companies, Clubs, Societies, Limited Liability Partnerships and other Organisations.

For other types of Partnership and Sole Traders please use the reverse of this form

1	Details of your organisation			
Please write clearly in the white spaces with capital letters.		Your bank and branch name		
The f	ull name of the organisation			
		Your branch sort code Your account number		
Custo	mer contact name	Customer contact telephone number including area dialling code		
2 Your agreement				
Atan	neeting of the Directors/Officers/Members/Trustees of:	We acknowledge that it is our responsibility to insure the contents of the e against loss or theft before your staff have opened it.	nvelope	
	"the Organisation"	6 A paying-in slip is to be placed inside the envelope.		
		7 Fees will be charged for using this service as notified by the Bank from time to time.	9	
held o	on sresolved that:	8 We authorise the following officials:		
1	We acknowledge receipt of a key(s) to the door of the Night Safe at the Lloyds Bank plc/Lloyds Bank International Limited (the "Bank") branch shown in Section 1.			
2	The key(s) shall remain the property of the Bank, to whom it is returnable on demand.			
3	The Night Safe is to be used only when the Bank is closed. The envelope only, is to be lodged in the Night Safe and the door to the Night Safe is to be locked immediately afterwards.	to advise you of the names of our representatives who are authorised to a		
	The key(s) to the door of the Night Safe shall at all times remain under the control of the authorised officers who will be responsible for their safekeeping.	envelopes and to give receipts for them. Our Organisation Secretary may a any changes to the list.	dvise you of	
4	The Bank is duly authorised to open the envelope and to credit the contents to our account.	I hereby confirm that the signatures in Section 3 are those of the duly authorised officials.		
	We acknowledge that the contents of the envelope are only received by the Bank on the next business day after the envelope has been placed in the Night Safe.	Secretary's signature		
5	The envelope when placed in the Night Safe is deemed to be held by the Bank for safe custody only. The normal relationship of Banker and Customer only comes into effect when the officers of the Bank, in accordance with this authority, have opened the			
	envelope and paid in the contents.	Date		
3	Authorised officials' details			
Positi	on held	Position held		
Your	signature	Your signature		
Date		Date		
Positi	on held	Position held		
Your signature		Your signature		
Da	te	Date		

How many Night Safe trap keys were issued?

Night Safe facilities



Please complete this page for Partnerships and Sole Traders only.			
1 Your details			
Please write clearly in the white spaces with capital letters. Your full names Business name (if applicable)	Your bank and branch name Your account number Customer contact name Customer contact telephone number including area dialling code		
2 Your agreement			
 I/We acknowledge receipt of a key(s) to the door of the Night Safe at the Lloyds Bank plc/ Lloyds Bank International Limited (the "Bank") branch shown in Section 1, upon the following terms and conditions: The key(s) shall remain the property of the Bank, to whom it is returnable on demand. The Night Safe is to be used only when the Bank is closed. The envelope only, is to be lodged in the Night Safe and the door to the Night Safe is to be locked immediately afterwards. The key(s) to the door of the Night Safe shall at all times remain under the control of the undersigned who will be responsible for their safekeeping. The Bank is duly authorised to open the envelope and to credit the contents to my/our account. I/We acknowledge that the contents of the envelope are only received by the Bank on the next business day after the envelope has been placed in the Night Safe. Your signature 	 The envelope when placed in the Night Safe is deemed to be held by the Bank for safe custody only. The normal relationship of Banker and Customer only comes into effect when the officers of the Bank, in accordance with this authority, have opened the envelope and paid in the contents. I/We acknowledge that it is my/our responsibility to insure the contents of the envelope against loss or theft before your staff have opened it. A paying-in slip is to be placed inside the envelope. Fees will be charged for using this service as notified by the Bank from time to time. Your signature		
Date	Date		
Your signature Date	Your signature Date		
For bank use only	How many Night Safe trap keys were issued?		

Lloyds Bank plc. Registered Office: 25 Gresham Street, London EC2V 7HN. Registered in England and Wales, no. 2065.

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under registration number 119278.

Lloyds Bank International Limited. Registered Office and principal place of business: PO Box 160, 25 New Street, St. Helier, Jersey JE4 8RG. Registered in Jersey, number 4029.

Regulated by the Jersey Financial Services Commission. We abide by the Jersey Code of Practice for Consumer Lending.

The Isle of Man branch of Lloyds Bank International Limited is licensed by the Isle of Man Financial Services Authority to conduct deposit-taking and investment business and is also registered as an insurance intermediary in respect of general business.