

Change a business address and/or contact details

For Business Banking customers

Before you begin: It's best to save this form to your computer and open it using Adobe Acrobat Reader. Doing this will allow you to fill in the PDF and upload signatures. You can get the latest version of Adobe Acrobat Reader by visiting <https://get.adobe.com/reader/>

Guidance notes

- This form is enabled for completion through an online PDF which will help us to give you the fastest service, although it is still possible to print it if required. You can save the form at any time using the toolbar at the top of the screen.
- Fields marked with an * are mandatory and must be completed in order to complete your application.
- Following completion of all the fields, an image of your signature can be uploaded to the form in the signatories section.

1 About you

Please write clearly in the white spaces with capital letters or cross the boxes.

Please provide details of your **main** business account:

Full name of business *

Branch sort code *

Account number *

2 Business contact changes

Would you like to update your primary business contact, telephone number or email address? *

Yes

No

If **yes** please complete Section 2.1.

If **no** please go to Section 3.

2.1 New contact details (if applicable)

Please note: The primary business contact must be a **full power** signatory on the account.

New primary contact numbers (this **must** include UK area dialling code if it's a landline or the area code, if overseas)

Title Mr Mrs Miss Ms Other (please specify)

Your first name(s)

Your last name

Telephone

Mobile

Fax

New primary business email address

3 Business address changes

Would you like to update your business address? *

Yes

No

If **yes** please complete Sections 3.1 to 3.3 (if applicable).

If **no** please go to Section 4.

Please note: you can add up to **three** new addresses.

3.1 First new address details (if applicable)

Which address would you like to change? (please cross **all** that apply)

Mailing address

(The default address that all mail will be sent to)

Trading/business address

(Where your day to day business activities take place)

Registered address

(This must match the address held at Companies House)

Solicitor's address

(The address of your solicitor)

Accountant address

(The address of your accountant)

New address (include building name if applicable)

Post code or Zip Code

3.2

Second new address details (if applicable)

Which address would you like to change? (please cross **all** that apply)

Mailing address

(The default address that all mail will be sent to)

**Trading/business address**

(Where your day to day business activities take place)

**Registered address**

(This must match the address held at Companies House)

**Solicitor's address**

(The address of your solicitor)

**Accountant address**

(The address of your accountant)



New address (include building name if applicable)

Post code or Zip Code

3.3

Third new address details (if applicable)

Which address would you like to change? (please cross **all** that apply)

Mailing address

(The default address that all mail will be sent to)

**Trading/business address**

(Where your day to day business activities take place)

**Registered address**

(This must match the address held at Companies House)

**Solicitor's address**

(The address of your solicitor)

**Accountant address**

(The address of your accountant)



New address (include building name if applicable)

Post code or Zip Code

Please note: these changes applies to **all** Lloyds Bank accounts operating under **this** Business Name.

If you have accounts, products or services with **one or more** of the following parts of the Lloyds Banking Group, **we will** inform them of your new details:

- Lloyds Bank Business Credit Cards
- Lloyds Bank Business Currency Accounts
- Lloyds Bank Business Loans
- All Lloyds Bank online services for Business Banking.

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Keep me informed

If you wish to be kept informed via SMS on the progress of this request, please provide a valid mobile number, title and surname below.

This information will be used for the purposes of **this request only**.

Please leave this section **blank** if you **do not** wish to receive SMS updates.

Your mobile phone number (UK only)

Title Mr Mrs Miss Ms Other (please specify)



Your first names

Your last name

5.1

Approver declaration

Please read the guidance note carefully before you sign this printable form, in order to help us complete your request quickly. If you are unsure who can sign this form, please contact your Relationship Team. Alternatively please call our friendly advisors on **0345 072 5555**. We're open Monday to Friday, 7am-8pm or Saturday, 9am-2pm (except UK bank holidays).

Who should sign?

- This form must be signed by Full Power signatories named on your mandate. The number of signatories who need to sign is set out on your mandate signing instructions.

By signing you confirm that information given in this form is accurate.

5.2

Approvers signatures

There are **two** ways to add signatures to the form:

- Upload an image of your signature
- Print and sign with a pen.

To upload an image:

- Save the form to your device
- Open the form in **Adobe Acrobat Reader**
- Select the signature field to upload your image.

We strongly recommend you send the form to any other approvers and/or people who've been added to sign first.

Once you're satisfied, please sign and return the form to us (see details below).

First authoriser's name *

First authoriser's signature *

Second authoriser's name (if required)

Second authoriser's signature (if required)

Third authoriser's name (if required)

Third authoriser's signature (if required)

Fourth authoriser's name (if required)

Fourth authoriser's signature (if required)

Date this change is effective from: *

D	D	M	M	Y	Y	Y	Y
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Personal address changes

Does your personal address also need to change? *
 (Please tell us if your personal address has changed regardless of whether you have a personal account with us)

Yes No

If **yes** please complete the rest of the form.

If **no** please return the partially completed (Sections 1 to 6) form to us.

6.1 About you

Do you have a personal account with Lloyds Bank?

Yes No

If **yes** please complete this section.

If **no** please go to Section 6.2.

Your name (as on your **personal** account)

Your branch sort code

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Your account number

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Previous house number/name

Previous postcode

Your date of birth

D	D	M	M	Y	Y	Y	Y
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Do you hold any joint accounts?

Yes No

If **yes** please confirm that the joint party is moving with you and would like their address updated on their joint and sole accounts.

Yes No

If **yes** please ensure the additional signature of the joint party is captured in Section 8.

If **no** we will change your address only.

Joint accounts only:

Full name of joint customer (as on your personal account)

Date of birth

D	D	M	M	Y	Y	Y	Y
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6.2 Your new residential address and personal contact details

New residential address details (include house name if applicable)

Post code or Zip Code

What is your **new** residential status?

Owner – no mortgage Owner – with mortgage Local authority tenant Private tenant Living with parents

Other (please specify)

New personal home telephone number

(this **must** include UK area dialling code or area code, if overseas)

New personal mobile number (including area code, if overseas)

New personal email address

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Your personal statement address

Would you like you **personal** account statements to be posted to an address different to your **residential** mailing address? *

Yes No

If **yes** please complete Section 7.1.

If **no** please go to Section 8 (all correspondence will go the personal mailing address).

7.1 Your new personal statement address

Only complete this section if you wish for your statements and chequebooks to be sent to an address different to your residential address.

New personal correspondence address for statements

Post code or Zip Code

Please provide details of which account(s) you would like this correspondence address to be recorded on:

Branch sort code

Account number

I confirm that the information given is correct.

Your name

Your signature

Name of additional signatory (if required by your signing instructions held with the bank ***)

Signature

Date this change is effective from:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Would you like confirmation of your change of address?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If yes how would you like to be contacted?

Letter	SMS
<input type="checkbox"/>	<input type="checkbox"/>

Please note:

If you have accounts, or other products or services with **one or more** of the following parts of the Lloyds Banking Group**, **we will** inform them of your new details:

- Lloyds Bank Business Credit Cards
- Lloyds Bank Insurance*
- Lloyds Bank Private Banking
- Scottish Widows

If they need any further information, they will contact you directly.

* If Lloyds Bank Insurance has arranged a policy for you through a separate insurance company you will still need to contact that company directly, as your failure to do so could affect your insurance cover.

** If you have a Lloyds Bank Car Finance product (Fixed Car Finance or Flex Car Finance) please contact **0333 202 7946** or sign in to **www.mycarfinance.com** to update your address details.

*** This additional signature is only mandatory if you are moving the joint party address/ sole accounts.

Please return completed form to: Lloyds Bank, Business Banking, BX1 1LT

For bank use only

Staff member's name (in capitals)

Is the customer present?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Has the customer's signature been confirmed?

<input type="checkbox"/>	<input type="checkbox"/>
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Have the customer's signing rules been confirmed?

<input type="checkbox"/>	<input type="checkbox"/>
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Has the SMDU been updated (if applicable)?

<input type="checkbox"/>	<input type="checkbox"/>
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When completed, please stamp below and send to the processing site on the day of receipt – always use the signpost tool

(Branch stamp with today's date)

Please contact us if you would like this information in an alternative format such as Braille, large print or audio.

Lloyds Bank plc Registered Office: 25 Gresham Street, London EC2V 7HN. Registered in England and Wales no. 2065. Telephone: 0207 626 1500.

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under Registration Number 119278.

Eligible deposits with us are protected by the Financial Services Compensation Scheme (FSCS). We are covered by the Financial Ombudsman Service (FOS).

Please note that due to FSCS and FOS eligibility criteria not all business customers will be covered.

We adhere to The Standards of Lending Practice which are monitored and enforced by the LSB: www.lendingstandardsboard.org.uk