

## Cash ISA Transfer Request

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do not use the return or enter keys.  Please ensure this form is signed and then forwarded to: Everyday Banking, PO Box 5612, MANCHESTER, M61 0WN																
							l. Customer deta	nils								
Title	Mr 📗 I	/Irs	Miss		Ms		Oth	er								
- irst name										(Ple	ease	e sp	ecif	fy)		
Middle name(s)																
iurname																
Address line 1																
address line 2																
Address line 3																
Address line 4																
Postcode																
RBS ISA number																
Sort code																
National Insurance number																
Date of birth DD/MM/YYYY)																
2. Transfer infor	mation															
Name of current Cash ISA provider																
Existing ISA number																
Sort code																

Roll/reference number

need you to give them specific information before the transfer can go ahead. Please check with your existing ISA provider if you are not sure about this.
I would like to:
Close and transfer the ISA
OR
Undertake a partial transfer
Amount of partial transfer £
For customers undertaking a partial transfer only: If you have subscribed to this ISA for the current tax year, do you want to include the subscription for the current year?
Yes OR No
<b>Important</b> the amount in your account representing the current tax year subscription can only be transferred in whole and <b>not</b> in part.
3. Transfer authority
I authorise my existing ISA Manager (named above) to transfer my Cash ISA to Royal Bank of Scotland plc.
I authorise my existing ISA Manager (named above) to provide RBS with any information, written or non-written, relating to the request to transfer my ISA/ISA funds.
Where a notice period is required for closure/part transfer of the existing Cash ISA, I give my consent to:
Serve the full notice period before this instruction can be processed
OR
Proceed immediately with the transfer and apply any penalty which may occur
I authorise RBS to hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash and to make on my behalf any claims to relief of tax in respect of ISA investments.
I agree to the ISA Terms and Conditions.
I declare that this application form has been completed to the best of my knowledge and belief.
Customer signature
X
Name (in full)

The terms and conditions of some ISA products do not allow only part of an ISA to be transferred. Your existing provider may

Date (DD/MM/YYYY)

Please note:

For RBS branch use only								
CIN number								
Branch sort code								
Staff contact name								
Branch contact number								

## **Instruction to existing ISA Manager**

Please make cheques payable to 'Royal Bank of Scotland plc (customer name/ISA number)' and send with ISA Transfer Certificate to the address below, or send the ISA funds via electronic transfer to the ISA account number and sort code quoted in the above 'Customer details' section.

Please send the ISA Transfer Certificate to the address below:

Everyday Banking, PO Box 5612, MANCHESTER, M61 0WN