

## **Banker's Confirmation Request Form**

## **Personal Banking**

Please complete Part One of this Banker's Confirmation Request Form in BLOCK CAPITALS.

PART ONE		
Banking Details – To be completed by you		- CONTRACTOR - CON
Name and address of your bank		
	Po	ostcode/Zipcode
Date		
Dear Sir/Madam Your Customer		Account Number
In accordance with your customer's consent, as detailed below, we would be grateful for your assistance as follows:		
Verification of identity – To be completed b	y you	
We request for your verification of the identity of your	customer, as recommended	d by the Guidance Notes relating to the
prevention of Money laundering in the United Kingdon	n:	
Title Surname	_ First name(s)	
Sex Date of birth	Nationality	
Residential Address		
		Postcode/Zipcode
Customer Consent – To be completed by yo	u	
I authorise Skrill Limited to request confirmation of the details above and a banker's reference as requested.		
Full Name	Signature	Date
PART TWO		
Verification Request Response – To be completed by your Bank		
Banker – Please Complete Part Two.		
We confirm that the name, residential address, date of	birth and sample signature	match those in our records.
What is the length of your relationship with the custon	ner? Years	
For and on behalf of		Bank Stamp
Signed		11
Name		
Position Date	Mark Marie	