

## **FUNDS RECLAIM FORM**

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS AND ATTACH SELF CERTIFIED ID COPIES

Primary Account Holder Name/ Business Account Name  Joint Holder 1 Name/ Authorised Signatory Name  Contact Number (Including Area Code)  Joint Holder 3 Name Authorised Signatory Name  Email Address  For any further applicants please complete another form (Customer Details section only).  Account Details  I/We request to reclaim funds from my/our Primary Current/Savings and all linked Current/Savings/Deposit Accounts.  Primary Account Number	Reclaim Request by			
Primary Account Holder Name/ Business Account Name  Joint Holder 1 Name/ Authorised Signatory Name  Joint Holder 2 Name/ Authorised Signatory Name  Contact Number (Including Area Code)  Joint Holder 3 Name Authorised Signatory Name  Email Address  For any further applicants please complete another form (Customer Details section only).  **Count Details**  I/We request to reclaim funds from my/our Primary Current/Savings and all linked Current/Savings/Deposit Accounts.  Primary Account Number    I/We request for my/our Fixed Term Deposit accounts to remain open, (Please tick box)   Please provide alternative account details for monthly/annual interest payments (if applicable)   Account Numbers   I/We request for all my/our Fixed Term Deposit accounts to be closed, (Please tick box)    Wayment Details   I/We request all funds from the accounts listed in the Account Details section to be transferred to the details provided below.    UK Bank Account   Account Name   Account Name   Account Number	□Branch □Email □Post Branch of Primary A	CCCOUNT: Date :		
Primary Account Holder Name/ Business Account Name  Joint Holder 1 Name/ Authorised Signatory Name  Doint Holder 2 Name/ Authorised Signatory Name  For any further applicants please complete another form (Customer Details section only).  Count Details  I/We request to reclaim funds from my/our Primary Current/Savings and all linked Current/Savings/Deposit Accounts.  Primary Account Number    I/We request for my/our Fixed Term Deposit accounts to remain open. (Please tick box)   Please provide alternative account details for monthly/annual interest payments (if applicable)   Account Numbers   I/We request for all my/our Fixed Term Deposit accounts to be closed, (Please tick box)    Wayment Details   I/We request all funds from the accounts listed in the Account Details section to be transferred to the details provided below.    UK Bank Account   Sort Code   Account Number   Account Number   Account Number   Account Number   Intermediary Bank Details (if applicable)	Customer Details			
Joint Holder 1 Name/ Authorised Signatory Name    Joint Holder 2 Name/ Authorised Signatory Name   Contact Number (Including Area Code)	Customer ID(s)	Address		
Joint Holder 1 Name/ Authorised Signatory Name    Joint Holder 2 Name/ Authorised Signatory Name   Contact Number (Including Area Code)				
Joint Holder 2 Name/ Authorised Signatory Name  Contact Number (Including Area Code)  Joint Holder 3 Name Authorised Signatory Name  Email Address  For any further applicants please complete another form (Customer Details section only).  Account Details  I/We request to reclaim funds from my/our Primary Current/Savings and all linked Current/Savings/Deposit Accounts.  Primary Account Number  I/We request for my/our Fixed Term Deposit accounts to remain open, (Please tick box) Please provide alternative account details for monthly/annual interest payments (if applicable)  Account Numbers  I/We request all funds from the accounts listed in the Account Details section to be transferred to the details provided below.  DK Bank Account  Account Name  Sort Code  Intermediary Bank Details (if applicable)	Primary Account Holder Name/ Business Account N	Name		
Joint Holder 2 Name/ Authorised Signatory Name  Contact Number (Including Area Code)  Joint Holder 3 Name Authorised Signatory Name  Email Address  For any further applicants please complete another form (Customer Details section only).  Account Details  I/We request to reclaim funds from my/our Primary Current/Savings and all linked Current/Savings/Deposit Accounts.  Primary Account Number  I/We request for my/our Fixed Term Deposit accounts to remain open, (Please tick box) Please provide alternative account details for monthly/annual interest payments (if applicable)  Account Numbers  I/We request all funds from the accounts listed in the Account Details section to be transferred to the details provided below.  DK Bank Account  Account Name  Sort Code  Intermediary Bank Details (if applicable)				
Joint Holder 2 Name/ Authorised Signatory Name    Contact Number (Including Area Code)	Joint Holder 1 Name/ Authorised Signatory Name	_		
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DUK Bank Account  Account Name  Bank Name  Account Number  International Bank Account  Account Name  Intermediary Bank Details (if applicable)	Payment Details			
Account Name  Bank Name  Account Number  International Bank Account Account Name  Intermediary Bank Details (if applicable)	I/We request all funds from the accounts listed in the Account Details section to be transferred to the details provided below.			
Bank Name  Account Number  International Bank Account Account Name  Intermediary Bank Details (if applicable)	☐ UK Bank Account			
Bank Name  Account Number  International Bank Account Account Name  Intermediary Bank Details (if applicable)	Account Name	Sort Code		
International Bank Account Account Name Intermediary Bank Details (if applicable)				
International Bank Account Account Name Intermediary Bank Details (if applicable)	Bank Name	Account Number		
Account Name  Intermediary Bank Details (if applicable)	Dank Ivanio	Account Humbol		
Account Name  Intermediary Bank Details (if applicable)				
	☐International Bank Account			
Bank Name  IBAN (International Bank Account Number)	Account Name	Intermediary Bank Details (if applicable)		
Bank Name IBAN (International Bank Account Number)				
DAIN (INTERNATIONAL BANK ACCOUNT NUMBER)	Rank Nama	IRAN (International Pank Associat Number)		
	Dank Name	IDAN (IIITEIIIAHOHAI DAHK ACCOUNT NUMBER)		
Branch Name SWIFT Code (or IFSC)	Branch Name	SWIFT Code (or IFSC)		

NOTE:\*Please note the funds can only be transferred to an account in your own name.

\*\*Charges may apply to transfer of funds. Please refer to the Service Charges section on our website
(www.bankofbarodauk.com > Download Forms > Schedule of Charges) or ask a member of staff.

Bank of Baroda (UK) Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (FRN: 768016). Bank of Baroda (UK) Limited is registered in England and Wales (Company Registration No: (10826803), with a registered office at 32, City Road, London – EC1Y 2BD (UK).

Tel. No: +44 (0) 3331553333, E mail: <a href="mailto:customercare.uksub@bankofbaroda.com">customercare.uksub@bankofbaroda.com</a>, Website: <a href="mailto:https://www.bankofbarodauk.com">https://www.bankofbarodauk.com</a>



## **FUNDS RECLAIM FORM**

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Authorisation (Subject to Mode of Operation)			
By signing this form, I/We are authorising Bank of Baroda (UK) Limited to reclaim funds from my/our accounts and transfer to the account details provided, in the Payment Details section.			
Primary Account Holder/ Authorised Signatory Name	Joint Holder 1/ Authorised Signatory Name		
Primary Account Holder/Authorised Signatory Signature	Joint Holder 1/ Authorised Signatory Signature		
Joint Holder 2/ Authorised Signatory Name	Joint Holder 3/ Authorised Signatory Name		
Joint Holder 2/ Authorised Signatory Signature	Joint Holder 3/ Authorised Signatory Signature		
Staff Use only (Branch)			
Staff Maker Name	Staff Checker Name		
Stail Maker Name	Stail Checker Name		
Staff Maker Signature	Staff Checker Signature		
Otali Maker Digitature	Citati Chicoker Cignature		
Employee ID Number	Employee ID Number		
Please indicate which administrations have been completed:			
All information on this form has been accurately captured.			
If the Reclaim Form is received by Email or Post, the Call Back is evidenced.			
Interest calculated and credited/debited till date.			
All applicable charges are recovered			
Valid customer KYC ID - self certified copies retained (For All Holders)			
Valid customer Proof of Address (For All Holders) - self certified copies retained <b>or</b>			
Call Validate performed and result is Pass. Evidence retained (Where applicable)			
Dow Jones Performed for all account holders			
Account Review Completed (where applicable)			
All Exception Approvals obtained and retained			
Customer Details to be updated on CBS by BGSS YES NO			
The form is signed as per the mode of operation stated on our records and reclaim instructed			
accordingly.			
Payment executed as per customer instructions, account balance is NIL. Funds Transferred to Named parties only.  Page 2 of 2			
Bank of Baroda (UK) Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (FRN: 768016). Bank of Baroda (UK) Limited is registered in England and Wales (Company Registration No: (10826803), with a registered office at 32, City Road, London – EC1Y 2BD (UK).  Tel. No: +44 (0) 3331553333, E mail: <a href="mailto:customercare.uksub@bankofbaroda.com">customercare.uksub@bankofbaroda.com</a> , Website: <a href="https://www.bankofbarodauk.com">https://www.bankofbarodauk.com</a>			