

Regular Saver Maturity Form

This form can be completed electronically then saved and printed. If completing manually, please complete in black ink and BLOCK CAPITALS. If you need any help completing this form, please call us on 01257 235003 or visit your local branch.

Full Name	
Regular Saver Account Numb	per
Option 1	
Transfer via BACS to my n	ominated account (excluding £1.00 to rollover to my new Regular Saver):
Chorley Building Society Acco	ount Number
OR	
Account Name	
Bank Name	
Sort Code	
Account Number	
Option 2	
Full closure via BACS to m	ny nominated account:
Chorley Building Society Acco	punt Number
OR	
Account Name	
Bank Name	
Sort Code	
Account Number	
If you take no action on maturity the balance will be automatically transferred into an instant access Chorleian Account within the Society bearing the account holder's name	
Signature:	Date: DD MM YYYY
Your Personal Information and what we do with it	
We are a data controller of your personal information. The way that we process your personal information is described in our Privacy Notice. The information is available on our website www.chorleybs.co.uk/privacy	
FOR INTERNAL USE ONLY	
Account number	Checked By Date
Customer Advisor	Date