

Change of Address Form

This form can be completed electronically, saved and printed.

If completing manually, please complete in black ink and BLOCK CAPITALS. Please complete in full.

PLEASE COMPLETE A FORM FOR EACH ACCOUNT HOLDER

Surname	
Title	Mr Mrs Miss Ms Other
Forename(s) in full	
Previous Address	Postcode
New Address	Postcode
Date moved to this ad	dress
Home telephone	
Work telephone	
Mobile number	
Email	
Preferred corresponde	ence Email Post Phone Preferred contact time AM PM
Please note that if you hold accounts for your children under the age of 18 these will also be amended if they reside with yourself. Please list below	
Savings Account Num	ber Child's full name
Savings Account Num	ber Child's full name
Savings Account Num	ber Child's full name
Please tick if you are registered for Chorley On-Line so that we can update your details On-Line	
 I confirm that the information I have provided in this form is correct. I hereby request that the information above will be used to update all my personal details for all my Chorley Building Society accounts, including any joint / third party accounts. Where I am requesting the change of personal details on behalf of the above named account holder, I confirm that I have the authority to do so. 	
Signature	
Date D D	
	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. This information is available on our website www.chorleybs.co.uk/privacy	
FOR INTERNAL USE ONLY	
Customer number	Checked By: Date:
Customer Advisor:	Date: