Change of Name



Member Number:			Date:
Current Details:			
Account Name:			
Signature:			
New Details:			
Account Name:			
Signature:			
New Viso	a Card Requ	uired	
Office Use Only			
Staff Initials:	Operator#:		
Verification of Identity Details			
Customer Identification Procedur	re - Individual c	carried out and	document(s) produced were:
Equifax PEP and Sanction Report	t completed: R	eference Numb	ber:
InfoTrack Verification Passed:	Yes	No	N/A
Reference Number from Info Track Report:			Date Completed: