

Post Office® Business Cheque Encashment Facility

Please note – when filling out this form use the tab and arrow keys to move between the relevant fields. Ensure you do not use the return or enter keys. Please complete in BLOCK CAPITALS.

The Customer instructs AIB (NI) to set up a Business Cheque Encashment Facility to enable a **Customer** or an individual authorised by the Customer (an **Authorised Person**), to withdraw money over the counter at one of the **Post Office®** branches.

1. Type of request				
New Facility Amendment	t to existing Post Office mandat	е		
Please enter reason				
2. Customer details				
Account name (as shown on cheque book)				
Site Reference				
Account Number		Sort code		
3. Business Cheque Encashment details				
If you need help finding the name please visit: http://www.postoffice. For amendment applications please. Nominated Post Office® Branch results for the please visit: http://www.postoffice. 1	e.co.uk/branch-finder ase ensure to re-confirm the deta	ils of the Post Offic	e® branch you are amendir Post Office® Branch Postcode	For Post Office® use only
Visits Number of Visits per week Other Please Specify Amount Required Maximum withdrawal amount in a Amount in words	1 2 3 4 ny one day? £	5 6		

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4. Identification of Authorised Persons	4. Identification of Authorised Persons				
Cheques will be made payable to: "Post Office Ltd" – and may only be cashed by the named Authorised Perso who must present the appropriate ID:	on below (or an Authorised Signatory specified in the mandate)				
Authorised Persons:					
ID to be presented (on every visit to nominated branch) I confirm that the Authorised Persons must present one of the fe	ollowing IDs on every occasion:				
5. Customer agreement					
reimburse the Bank on demand in full (without applying any se from us arising from such indemnity failing.	e counter. If or when providing the Facility. If a gainst all claims, demands, actions, losses, damages, costs greeing to provide the above arrangement and we undertake to est-off or deduction) with any amounts which the Bank may claim ons contained in the AIB (NI) Business Account terms and conditions, less than 5 business days' notice to cancel the Facility or gives the facility may be abused or give rise to fraud on the account. Service of the facility or gives the facility may be abused or give rise to fraud on the account.				
Customer Signature(s)	Customer Signature(s)				
Name	Name				
Day Month Year Date / / /	Day Month Year Date / / / / / / / / / / / / / / / / / / /				
Customer Signature(s)	Customer Signature(s)				
Name	Name				
Day Month Year Date / / / / / / / / / / / / / / / / / / /	Day Month Year Date / / / / / / / / / / / / / / / / / / /				

Customers – please return all completed forms to your bank contact for authorisation.