Change of name and/or address form

Use this form to change your name or address. Please use **BLOCK CAPITALS** and **BLACK** ink throughout.

Mark selection boxes clearly with a ✓. If you make a mistake, just place a line through the box and mark the correct box with a ✓.

The account

Account number

Sort code

☐ We will use this information to change all of your Virgin Money savings and current accounts unless you tell us otherwise.

If there are any accounts you do not wish to change, please tell us the account number(s) in the space below.

Name and address changes

Please complete this section to amend a name, address or phone number of any account holder (the address of the first named account holder will be used for all correspondence).

1st customer

If applicable, please state the previous name

Title

Forename(s)

Surname

Address

Postcode

Contact phone numbers. Please list all numbers.

2nd customer

If applicable, please state the previous name

Title

Forename(s)

Surname

Address

Postcode

Contact phone numbers. Please list all numbers.

3rd customer

If applicable, please state the previous name

Title

Forename(s)

Surname

Address

Postcode

Contact phone numbers. Please list all numbers.

4th customer

If applicable, please state the previous name

Title

Forename(s)

Surname

Address

Postcode

Contact phone numbers. Please list all numbers.

We will need to see your marriage certificate/decree absolute or deed poll as evidence of your name change. As evidence of your previous name we'll need to see your birth certificate or marriage certificate.

You can either take the document to a Virgin Money Store, along with this form, or send us the document and we will send it back to you.

Declaration

I/We declare that the information contained within this form is correct.Ensure ALL signatories sign below or the form could be returned.

Signed (to be signed by all signatories registered on the account). When you give us, your new signature can you also give us your previous signature next to it. We will use it to verify the signature we hold.

Date signed

D	D	M	M	Y	Y	Y	Y

Date signed

D	D	M	M	Y	Y	Y	Y

Date signed

D	D	M	M	Y	Y	Y	Y

Date signed

D	D	M	M	Y	Y	Y	Y

Office use only

Checked by (colleague name):
Store:
Date:
Contact details:

WDC use only

☐ COD ☐ COT ☐ POA

☐ COD (EX) ☐ COT (EX)

ID applicant 1

ID applicant 2

ID applicant 3

ID applicant4

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