

CHAPS payment form



Please complete all sections of the form in full, as we cannot process your CHAPS payment without this information.

There is a charge for sending a CHAPS payment, this is currently £28. You can find more information about charges in the Standard Service Tariff document available [here](#)

Please note, we will call you to validate the details of your payment request. The processing of your payment may be subject to delay if we we're unable to get in touch.

Your details:

| | |
|-------------------------|------------------------|
| Your Account number | <input type="text"/> |
| Account Name (remitter) | <input type="text"/> |
| Amount to pay | £ <input type="text"/> |
| Amount in words | <input type="text"/> |

Beneficiary Details:

| | |
|----------------------------|----------------------|
| Beneficiary Name | <input type="text"/> |
| Beneficiary Account number | <input type="text"/> |
| Beneficiary Sort Code | <input type="text"/> |
| Payment Reference | <input type="text"/> |
| Reason for payment | <input type="text"/> |

This transaction is undertaken based solely upon the instruction received from you, and carried out by the Bank strictly on the understanding that:

- **the transfer shall be sent entirely at your risk** and once funds have been transferred, they may not be recoverable by the Bank
- **you have fully verified the payment details of the recipient are correct** from either the recipient or by an independent source
- **the Bank and its agents shall not be responsible for any loss, delay or damage howsoever caused** except where due to the negligence of the Bank or its' officers.

I/We have read and accept the terms and conditions, linked [here](#).

Please sign this instruction in accordance with your bank mandate.

| | | | | | |
|-----------|----------------------|-----------|----------------------|------|----------------------|
| Full Name | <input type="text"/> | Signature | <input type="text"/> | Date | <input type="text"/> |
| Full Name | <input type="text"/> | Signature | <input type="text"/> | Date | <input type="text"/> |
| Full Name | <input type="text"/> | Signature | <input type="text"/> | Date | <input type="text"/> |

Please note we do not accept digital signatures.

Once completed, you can return your form to Unity by email or Post using the details below:

Email: us@unity.co.uk (Subject line - CHAPS REQUEST)

Post: Unity Trust Bank, PO Box 7193, Planetary Road, Willenhall, WV1 9DG

For processing times please see our CHAPS payments page online www.unity.co.uk/chaps-payment

Unity Trust Bank is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Unity Trust Bank is entered in the Financial Services Register under number 204570.
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