

Please complete this form in BLOCK CAPITALS and in black ink and fax to: 1850 211612/0044 131 278 0876. Alternatively you may wish to complete the paperwork by printing this form, scanning the completed document, attaching it to an email and submit to fax.bankline.administration@rbs.co.uk. Password re-activation will take up to 2 working hours to process and will be sent to your registered email address. Please mark option boxes with an 'x'.

1. Customer details - this section is mandatory

Company name	<input type="text"/>		
Bankline ID	<input type="text"/>		
Main account number	<input type="text"/>	Sort code	<input type="text"/>

2. User details

User ID	<input type="text"/>
Forename	<input type="text"/>
Surname	<input type="text"/>

3. Reason for request

User has forgotten Password/PIN (New Activation Code will be issued to User)

4. Confirmation

I/We confirm that the details on this form are full and correct and agree to notify the Bank of any changes.
I/We confirm that the parties signing this application are the same as the parties that have signed the Bank Account Mandate(s)

Customer signature(s) (must be signatory on bank Mandate)

Name _____

Date (DD/MM/YYYY) _____

Name _____

Date (DD/MM/YYYY) _____

For GTS Operations use only

I confirm that all the signatures on the form have been checked.

Staff Signature

Name _____

Date (DD/MM/YYYY) _____

Staff Signature

Name _____

Date (DD/MM/YYYY) _____