Hotel and Care Home

Hotel: for casual residents and those passing through

Care Home: for those in need of permanent care

Standing Order Mandate

YOUR NAME:	……..
ADDRESS:	……
NAME OF BANK:	……..
BANK ADDRESS:	……
ACCOUNT TO BE DEBITED:	……..
SORT CODE:	……..
ACCOUNT NUMBER:	……
ACCOUNT NAME:	……..
BENFICIARY DETAILS:	**PIG INN HEAVEN LTD**
BANK:	BARCLAYS BANK, 1 YORKSHIRE STREET, ROCHDALE, OL16 1BH
SORT SODE:	20-72-67
ACCOUNT NUMBER:	13815005

PAYMENT DETAILS

AMOUNT OF FIRST PAYMENT £ DATE OF FIRST PAYMENT……...

AMOUNT OF PAYMENT IN WORDS:

AND THEREAFTER TO BE PAID MONTHLY / ANNUALLY …….. day of……..

Please continue payment until further notice in writing:

CUSTOMER SIGNATURE: ……
DATE……

CUSTOMER CONTACT TELEPHONE NUMBER:…….

All boxes must be completed for the standing order to be processed. Please send the completed form to your bank, and a copy to Pig Inn Heaven Ltd at Solutions House, Dane Street, Rochdale, OL11 4EZ.

If you prefer to pay by cheque, please send a cheque and your details directly to us at Pig Inn Heaven

Registered Office: Pigs Inn Heaven Ltd,
Solutions House, Dane Street,
Rochdale, OL11 4EZ