



# Applicant Authority Form

Applicant 1 Surname	Applicant 2 Surname	Postcode

Please complete the Authority Form detailed below.

To whom it may concern

**Re: Authority Form**

Lender/Company Name	
Account Reference	

Please accept this as formal authority to release any information as requested by United Trust Bank, regarding the above account.

Yours sincerely

**Applicant 1**

**Applicant 2**

Address:

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Address:

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Postcode:

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Postcode:

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Signed

Signed

Date:

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Date:

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