



BACS Authorisation Form

To allow Howard James Recruitment Consultancy Ltd (The Agency) to pay you directly into your bank account, please complete the form below. Your account can be held by either a bank or building society. The Agency can pay you into any account nominated by this form, if the money is transferred to an account other than one in your name signing this form absolves The Agency from any responsibility for the money. By completing this form and returning it to The Agency you acknowledge you are asking for any future payments from The Agency to be paid into this account. To change nominated bank account, you must complete and return a further BACS form and return to The Agency.

Full Name	<input type="text"/>										
Date of Birth	<input type="text"/>										
Email Address	<input type="text"/>										
Mobile No:	<input type="text"/>										
Address	<input type="text"/>										
Postcode	<input type="text"/>										
N.I Number	<table border="1"><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Bank Name	<input type="text"/>										
Bank Location	<input type="text"/>										
Account Holder Name	<input type="text"/>										
Sort Code	<table border="1"><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
Account Number	<table border="1"><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

I hereby authorise The Agency to pay any money due now or in the future into the above bank account

Signed:

Printed Name:

Date: ____/____/____