

Please complete this form in BLOCK CAPITALS and in black ink and post to:

Ulster Bank Ireland DAC, PO Box 4015, Dublin 2.

1. Ulster Bank credit card details

Account name

16 Digit PAN of your Ulster Bank credit card

2. Contact details

Address line 1

Address line 2

Address line 3

Address line 4

Post code

Contact telephone number(s)

Home contact number

Preferred daytime contact number
(including extension if applicable)

Date of birth (DD/MM/YY)

3. Balance transfer details – Please list your balance transfers in order of preference. Once this has been carried out you will receive confirmation on your statement.Beneficiary credit card PAN (16 digit
card number where payment is to be made)

Amount €

Beneficiary credit card PAN (16 digit
card number where payment is to be made)

Amount €

Beneficiary credit card PAN (16 digit
card number where payment is to be made)

Amount €

Customer signature

Date: _____

The amount of the balance transfer(s) that we process will depend on the allocated credit limit. Should your credit limit be insufficient to process all transfer requests, we will action them according to the order in which you have provided them to us. You can only transfer balances from non NatWest Group companies' credit or store cards. Ulster Bank is not responsible if a credit or store card provider will not accept payment. We cannot accept responsibility for interest charged by other credit card providers. We can refuse to accept any balance transfer request.