



Credit Union
Brent & Ealing

Credit Union Office
Civic Centre
High Street
Uxbridge
UB8 1UW
Tel: 01895 250956

Payroll Deduction Instruction Form

To: _____ hereinafter referred to as the "Employer"

Payroll Number: _____ Member Number _____

Surname: _____ First Name: _____

Date of Birth: _____ Telephone No: _____

I hereby authorise the Employer to deduct the total amount (A) shown below from my salary each month.

Savings Account (Share 1) £ _____

Loan Repayment £ _____

Christmas Account £ _____

Holiday Account £ _____

Total Deduction from Salary £ _____ (A)

From the next available date until further notice

I further agree and understand that:

- 1. This form instructs the Employer to deduct from my salary the total deduction shown above.**
- 2. I will not vary this instruction without the knowledge and consent of the Credit Union of Brent and Ealing Ltd**
- 3. In the event of my leaving the employment of the Employer, any outstanding loan will become fully repayable.**
- 4. I hereby authorise the Employer or any of its associated companies to supply and make available to the credit union or its administrators, any personal information they may need in order to recover and money owed by me. I also authorise the credit union to disclose my account details to my employer if required.**

Signed: _____

Dated _____