

CHANGE OF ADDRESS FORM

Client Name(s): _____

Account Number: _____

Current Address Details: _____

New Address Details: _____

Contact Number: _____

.....

I/We authorise KBC Bank Ireland to amend my contact details as above:

Name	<input type="text" value="BLOCK CAPITALS PLEASE"/>	Name	<input type="text" value="BLOCK CAPITALS PLEASE"/>
Signed	<input type="text"/>	Signed	<input type="text"/>
Date	<input type="text" value="d d m m y y y y"/>	Date	<input type="text" value="d d m m y y y y"/>