

PHYSICAL ENVIRONMENT

Head of Service: Yvonne Baulk

Housing Headquarters

3rd Floor, Cunninghame House, Irvine KA12 8EE

Tel: 01294 324603 Fax: 01294 324624



North Ayrshire Council
Comhairle Siorrachd Àir a Tuath

Our Ref: 06/JF

If telephoning please ask for: Business Planning Team (01294) 324603

Dear Sir/Madam,

MONTHLY STANDING ORDER

Thank you for your recent request for a Standing Order form. Please complete the attached form, following the instructions detailed below.

1. Enter your bank account number, payment reference number and your name.
2. Enter the amount to be paid monthly in words and figures. **This will be your weekly rental charge multiplied by 52 weeks and then divided by 12.**
3. Enter the month in which payment is to commence, if not already on form.
4. Enter your name, address, signature and date.

If you decide to cancel your Standing Order, you must inform the Rent Accounting Team in writing.

When you have completed the form, **SEND PART 1 TO YOUR BANK AND PART 2 TO HOUSING SERVICES, NORTH AYRSHIRE COUNCIL, 3rd FLOOR, CUNNINGHAME HOUSE, IRVINE, KA12 8EE.**

Yours faithfully,

J. Faddes.

Jean Faddes
Co-ordinator Business Planning (Rental)

NORTH AYRSHIRE COUNCIL – STANDING ORDER RENTS - MONTHLY

PART 1. TO BE COMPLETED AND SENT TO YOUR BANK

To The Manager

Name of Bank

Address of Bank

1. Please make the payment stated below and debit my/our Account No.

* Details to be quoted on payment advice: **Payment Reference No.**

Tenants Name

*** (THIS INFORMATION MUST BE QUOTED BY THE BANK ON ALL PAYMENTS)**

Name of Payee: North Ayrshire Council
Housing Rents Account No. 30443706

2. Bank and branch to which payment is to be made: Clydesdale Bank PLC, Code 82-65-22,
151 High Street, IRVINE.

Amount in words £.....

3. Date of payments: 1st day of each month. Commencing 1st..... 2021 until
further notice.

THIS CANCELS MY PREVIOUS STANDING ORDER FOR RENT

4. Name

Address

Signature

Date

**PART 2. TO BE COMPLETED AND RETURNED TO NORTH AYRSHIRE COUNCIL, 3RD FLOOR,
HOUSING SERVICES DEPARTMENT, CUNNINGHAME HOUSE,
IRVINE, KA12 8EE.**

Name of Bank.....

Address of Bank.....

Bank Account No.

This is to certify that I have instructed my bank to pay £..... to you on the 1st day of each
month commencing 1st 2021 until further notice.

Payment Reference No.

Name

Address

Signature.....

Date