Dormant Account Reclaim



Who we are

The organisation responsible for processing your personal and financial information is National Westminster Bank Plc, a member of NatWest Group.

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do **not** use the return or enter keys. Please complete in BLOCK CAPITALS. All boxes marked * must be completed. Incomplete information will result in a delay to the reclaim process.

Once complete, please sign and return the form along with copies of the relevant ID to:

Dormant Account Reclaim Team, Fourth Floor, 1 Hardman Boulevard, Manchester, M3 3AQ. Alternatively, you can email this form to personaldormantteam@natwest.com. Please do not send any originals.

We can advise on how to encrypt your documents for additional security by calling us on 0345 366 6594 (for overseas customers please call 00441634648143) or, alternatively, you can chat with us using our webchat service https://personal.natwest.com/sharedservices we are open 8am – 6pm, Monday to Friday (excluding bank holidays).

ID is required for all signatories on the account.

Once all information including ID has been received, your request will be processed. This may take up to 38 working days.

*Account number					*Sort code			
Mr	Mrs	Miss	Ms	Other				
					(Please specify)			
e(s)								
		*N	lationality					
		O	ccupation					
	Mr ne(s)		ne(s) *N		ne(s) *Nationality			

Ensure that full and complete names are listed; any withheld names can result in delays to the reclaim process.

If your name or title has changed since the date of dormancy, please provide a copy of one of the following documents:

- Marriage or Civil Partnership Marriage/Civil Partnership Certificate
- Change of Name Deed Poll/Statutory Declaration
- Divorce Decree Absolute and Birth Certificate or Final Dissolution and Birth Certificate
- *Current Residential Address (PO Box correspondence and Care of Addresses are not acceptable)

Address line 1

Address line 2

Address line 3

overseas country						
Postcode						
		ess informati	on which may	help us locc	ate your Dormant	Account in the box below:
*Preferred daytime of (including extension in applicable)						
*Email address						
Please provide full de	etails for a	ny additiona	l account hold	ders below:		
*Title	Mr	Mrs	Miss	Ms	Other	
*First name						(Please specify)
*Middle name(s)						
*Surname						
*Previous/Maiden na	me(s)					
*Date of birth			*	Nationality		
Place of birth Occupation						
*Current Residential	Address (P	O Box corre	spondence an	nd Care of A	ddresses are not	acceptable)
Address line 1						
Address line 2						
Address line 3						
Address line 4 OR overseas country						
Postcode						

Address line 4 OR

3. Claimant ID

We need one item of photographic ID such as a Passport and one item showing proof of address such as a Utility Bill or Bank statement dated within the last 6 months (please do not send any originals). If the account has more than one to sign, then ID is required from all parties.

If you reside overseas, all parties who are signatories on the account must provide certified copies of ID documents. The certification can be undertaken by an Embassy/Notary Public/Lawyer/Attorney **but they must be locatable on the world wide web**.

Web address of Notary

Contact details of Notary

Please refer to the Dormancy Webpage for details of what ID we will accept https://www.natwest.com/current-accounts/dormant-accounts.html and use the box below to confirm which photographic and which proof of address ID has been sent.

sent.							
Photographic ID							
Address ID							
4. Transfer inst	ructions						
Credit another Please choose o *An existing Nat *Beneficiary Bar	ne of the fo	llowing trans	fer options	*An account	at another Bank		
*Account number				*Sort code			
*Reconfirm account number				*Reconfirm sort code			
*Account reference (if required)							
*Title	Mr	Mrs	Miss	Ms	Other		
*First name(s)						(Please specify)	
*Middle name(s)							
*Surname							
*Date of birth							
Ensure that full and complete names are listed; any withheld names can result in delays to the reclaim process.							
*Current Residential Address (PO Box correspondence and Care of Addresses are not acceptable)							
Address line 1							
Address line 2							
Address line 3							
Address line 4 OR overseas country							

Postcode

Joint account h	older deta	ils (if any)				
*Title	Mr	Mrs	Miss	Ms	Other	
*First name(s)						(Please specify)
*Middle name(s)					
*Surname						
*Date of birth						
Ensure that full	and compl	ete names c	are listed; any	y withheld na	mes can result	in delays to the reclaim process.
*Current Reside	ntial Addre	ss (PO Box o	corresponder	nce and Care	of Addresses a	re not acceptable)
Address line 1						
Address line 2						
Address line 3 Address line 4 (
Postcode						
OR						
need to be retu	rned to a U only be mo	K based Bai ade in GBP.	nk account. A charge o	of £15 will als		d a foreign payment and the funds will from the total reclaim
*First name(s)						
*Middle name(s)					
*Surname						
*Date of birth						
Beneficiary add	dress					
Address line 1						
Address line 2						
Address line 3						
Address line 4 C)R					
overseas countr	У					
Postcode						
Beneficiary Ba	nk Details					
Beneficiary Ban	k Name					
Beneficiary add	ress line 1					

Beneficiary address line 2

Beneficiary address line 4	
Post code	
SWIFT/BIC	
BSB/Routing/Sort code	
IBAN/Account number	
Intermediary Bank Details (if applicable)	
Intermediary Bank Name	
SWIFT/BIC	
5. Claimant Signature(s)	
Please provide your full and valid signatures	
Name (in full)	Name (in full)
Date (DD/MM/YYYY)	Date (DD/MM/YYYY)

Beneficiary address line 3