

**Minutes of a Meeting of the Policy, Resources & General Purposes Committee, held at the Town Hall, Rye, on Monday 23 March 2015**

**PRESENT** Councillors Granville Bantick, Mike Boyd, John Breeds, Jonathan Breeds (**Committee Chairman** - Deputy Mayor), Mike Eve (**Committee Vice-Chairman**), Bernardine Fiddimore (Mayor), Jo Kirkham, Shaun Rogers, Sam Souster

**IN ATTENDANCE** Richard Farhall - Town Clerk; 2 members of the public

*The meeting commenced at 7.59pm.*

**76 APOLOGIES**

Apologies for absence – and the reason lodged with the Clerk – were accepted from Cllr Ian Potter.

**77 CODE OF CONDUCT: DISCLOSURES OF INTEREST**

There were no declarations of interest.

**78 RYE HERITAGE CENTRE:  
NAT WEST MANDATE FORM (NWB50047 - APPENDIX)**

**RESOLVED** That the authorised signatories in the current mandate, for the accounts detailed in section 2, be changed in accordance within sections 5 and 6 and the current mandate will continue as amended.

*The meeting ended at 8pm.*

Date ..... Chairman .....



The purpose of this mandate is for you to tell us who is authorised to give us any instructions relating to the operation of your account.

This mandate should **only** be used for **unincorporated community organisations and unincorporated charities**. E.g. sports teams, scouts, guides and school PTAs. If your organisation is registered at Companies House or is governed by a Trust Deed then please speak to a member of staff who will provide the correct mandate to complete.

Corrections to the form **must be signed** by **all** the authorised signatories who have signed the declaration in section 8.

Complete this form in BLOCK CAPITALS and black ink. Please mark option boxes with an 'X'.

**Your information**

For details of how we will use your information, please look for the padlock symbol below and in the account Terms and Conditions. You should already have received a copy of the Terms and Conditions for this account, however, if you still require a copy, please contact your branch.

**1. Full organisation name**

**New organisation to NatWest** – insert the full name of your organisation.

**Existing organisations to NatWest** – insert your organisation name as it appears on your statement.

RYE TOWN COUNCIL
RYE HERITAGE CENTRE

**2. Application to accounts**

**(new organisation to NatWest – if account details are unknown please leave account numbers and sort codes blank)**

Please choose either section 2.1 or 2.2.

**EITHER:**

2.1  This mandate applies to all existing and future **accounts** of the Organisation

Account number  Sort code

**OR:**

2.2  This mandate only applies to the **accounts** of the Organisation detailed below:

Account numbers	Sort code	Account numbers	Sort code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If there are more than 6 accounts, please detail on a separate sheet and attach to this mandate.

Total number of accounts detailed in section 2.2

**What do you wish the Bank to do?**

- Set up a mandate for the first time** – Please complete **all** sections **except 5 and 7**.
- Add new authorised signatories** – Please complete **all** sections **except 4 and 5** (section **7** will also need completing if adding a new authorised signatory to the account will result in a change to the current address / mailing details).
- Remove an existing authorised signatory** – Please complete **all** sections **except 4 and 6** (section **7** will also need completing if removing a authorised signatory from the account will result in a change to the current address / mailing details).
- Change the signing rules** – Please complete **all** sections **except 5, 6 and 7**.

**Update an existing signature** – This mandate cannot be used to update an existing signature that has changed - please speak to a Branch member of staff or your Relationship Manager who will be able to help you.

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**3. Resolution**

**New accounts:**

This resolution must be passed at a meeting of the members or relevant management committee of the organisation

It was resolved that a banking relationship will be maintained with National Westminster Bank Plc (the **Bank**) in accordance with this mandate and that:

- The individuals identified as **authorised signatories** may, in accordance with the **signing rules**, sign cheques and give instructions for Standing Orders, Direct Debits, Electronic Payments, Banker's Drafts and other payments on the accounts even if it causes an account to be overdrawn or exceed any limit.
- Any **authorised signatory** may give other instructions or requests for information to the Bank in relation to the accounts; opening accounts with the same **signing rules** and **authorised signatories**; closing accounts; or other banking services or products.
- The Bank may accept instructions that do not have an original written authorised signature provided the Bank is satisfied that the instruction is genuine and subject to any other agreement the Bank may require for those instructions.
- The organisation will provide to the Bank a copy of its constitution and any amendment to the constitution, certified as correct by the Secretary.
- This mandate will continue until the organisation gives the Bank a replacement mandate.

**Existing accounts:**

This resolution must be passed at a meeting of the members or relevant management committee of the organisation

It was resolved that:

- the **signing rules** in the current mandate, for the accounts detailed in section 2, be replaced in accordance with section 4; and/or
- the **authorised signatories** in the current mandate, for the accounts detailed in section 2, be changed in accordance with sections 5 and 6 and the current mandate will continue as amended.

**4. Signing rules – Only complete this section if a change of signing rules is required or you are setting up a mandate for the first time**

Select **one** of the following options.

The bank may act on the instructions of:

• Any  authorised signatories for unlimited amounts.  
• **For example:** Any  authorised signatories for unlimited amounts.

OR

•  **All** authorised signatories for unlimited amounts - please place a cross in the box if choosing this option.

OR

• Any  authorised signatories, for amounts up to and including £  ·  and  authorised signatories over this amount.  
• **For example:** Any  authorised signatories, for amounts up to and including £  ·  and  authorised signatories over this amount.

OR

• Any other combination of the authorised signatories as specified in the box below.

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**5. Removing an authorised signatory – Use this section to remove an authorised signatory from the account**

Select **one** of the following options

Remove **all** existing authorised signatories.

**OR**

Remove the existing authorised signatories named below.

Name (in full)	
Name (in full)	
Name (in full)	
Name (in full)	
Name (in full)	
Name (in full)	
Name (in full)	

**6. Authorised signatories for the account specified in section 2 – Do not complete this section if you are only removing an existing authorised signatory or changing the signing rules.**

**Set up a mandate for the first time – All intended authorised signatories must sign this section.**

**Add new authorised signatories – All authorised signatories being added must sign this section.**

If more than 8 authorised signatories are required, please photocopy the following page, complete and attach to this Mandate.

**Please cross through any unused boxes in this section and on any additional sheets.**

**Giving your consent**  
By signing below you agree that the Bank may:

- obtain information about you from credit reference agencies to verify your identity.
- obtain information about you from fraud prevention agencies.
- pass your details to fraud prevention agencies to prevent fraud and money laundering, if false or inaccurate information is provided and fraud is suspected.

Specimen signature (please sign within the box)

Print first name JOHN  
Print surname BREEDS  
Official position COUNCILLOR  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name JOSEPHINE  
Print surname KIRKHAM  
Official position COUNCILLOR  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name MICHAEL  
Print surname BOYD  
Official position COUNCILLOR  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name SHAUN  
Print surname ROGERS  
Official position COUNCILLOR  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name JONATHAN  
Print surname BREEDS  
Official position COUNCILLOR  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name SAMUEL  
Print surname SOUSTER  
Official position COUNCILLOR  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name \_\_\_\_\_  
Print surname \_\_\_\_\_  
Official position \_\_\_\_\_  
(e.g. Committee member, treasurer)

Specimen signature (please sign within the box)

Print first name \_\_\_\_\_  
Print surname \_\_\_\_\_  
Official position \_\_\_\_\_  
(e.g. Committee member, treasurer)

**7. Official address of your organisation** – If your organisation does not have its own premises please provide the details of the main contact for your organisation.

Contact name	<input type="text"/>
Address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4 OR overseas country	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>
Contact number	<input type="text"/>
Charity registration number (if applicable)	<input type="text"/>

**Please note – if you would like bank statements and other correspondence sent to a different address please complete the details below**

Contact name	<input type="text"/>
Address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4 OR overseas country	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>

**8. Declaration**

We certify that:

The Resolution set out in section 3 was passed at a meeting at which a quorum was present.

In respect of this mandate and any additional authorised signatory pages:

- all the signatures are genuine;
- the information given is correct; and
- we have signed all corrections.

**New accounts only** – this section must be signed by two of the authorised signatories detailed on this mandate.

**Existing accounts only** –

- two existing authorised signatories must sign in the boxes below;
- where only one existing authorised signatory remains, they must sign in the box below along with a new authorised signatory and a copy of the minutes of the meeting giving authority to the new authorised signatory, must be enclosed;
- if there are no longer any existing authorised signatories remaining, two new authorised signatories must sign the boxes below and a copy of the minutes of the meeting giving authority to the new authorised signatories, must be enclosed.

Signature of authorised signatory

Please ensure that you sign within the box

Print first name BERNARDINE

Print surname FIDDIMORE

Official position COUNCILLOR

Date (DD/MM/YYYY) 23/3/2015

Signature of authorised signatory

Please ensure that you sign within the box

Print first name MICHAEL

Print surname EVE

Official position COUNCILLOR

Date (DD/MM/YYYY) 23/3/2015