



Add/Verify Bank Account Details

Wrap/Fundzone Account

For financial adviser use only.

Wrap/Fundzone Account Number

Is the bank account

Joint

Individual

Employer

Partner

Third Party

Account Name



Account Name should not exceed 36 characters

Account Number

Sort code

Is the account to be used for

Direct Debits

If we have not already received a Direct Debit Mandate, please upload to the client's document library and notify wrap_servicing@abrdn.com

Withdrawals

(not available unless wrap/fundzone account holder is named on bank account)

Verification of account

I confirm the bank verification received is sufficient to demonstrate my client's ownership of this bank account and was received at a direct one to one meeting; I am satisfied that this is not a fraudulent request in any way.

I acknowledge that abrdn reserve the right to obtain sight of the documentation used to verify this account at any time in the future.

Adviser's name



Adviser's name required

Date

(DD/MM/YYYY)

The form does not need a wet signature; simply type the adviser's name. Upload the form to the client document library. Notify us that a form has been submitted by sending an email to NonTelephony.BankChangeAuthorisation@abrdn.com and include the account WP number, date and time of submission.

There is no guarantee that any email you send will be received or will not have been tampered with. You should not send personal details by email.

For more information visit abrdn.com/adviser

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