

## BANK ENQUIRY CONSENT FORM

(Please complete and send original of this form to your bank in order to facilitate Tattersalls Ltd in seeking a banker's reference)

## PRIVATE & CONFIDENTIAL

ENQUIRY TO:	
Your Bank Name: Your Bank's Address:	
Your Bank's Sort Code:	
ENQUIRY FROM:	Tattersalls Ltd Terrace House Newmarket Suffolk CB8 9BT Phone: +44 (0) 1638 665931 Fax: +44 (0) 1638 617602 Email: accountsvp@tattersalls.com
INFORMATION REQUESTED ON: I/We request your opinion as to the means and standing of:  Your Name: Your Account Number: Your Address:  And his/her trustworthiness in the way of business to the extent of the sum of:	
CONSENT: (To be completed by the person who is the subject of the enquiry)	
I/We	consent to
Providing a reference on me/us to Tattersalls Ltd., Terrace House, Newmarket, Suffolk, CB8 9BT and I/We authorise my/our bank (where applicable) to deduct such charges as may be appropriate.	
Signature	Date

Note: Please submit a copy of this form to Tattersalls Ltd at least 7 DAYS BEFORE THE SALE

 $Fax: +44\ (0)1638\ 617602 \qquad Tel: +44\ (0)1638\ 665931 \qquad Email: accounts vp@tattersalls.com$