

RENEWAL

Amber Account Number

Account number input fields



CREDIT AGREEMENT REGULATED BY THE CONSUMER CREDIT ACT 1974

RUNNING ACCOUNT CREDIT AGREEMENT

Broker/Intermediary Details

Broker/Intermediary Name and Town, Intermediary No., Your Reference Number

Customer Details

Title, Forename, Surname or Company Name, House No/Name, Street Name, Village/Town, City/County, Postcode, Home Telephone, Work Telephone, Time at present address, Date Of Birth

Only valid if Card Holder is the Customer named on the Agreement. Card must be a Debit or Credit Card - NOT Solo, Electron or any other card not displaying a Cheque Guarantee symbol.

Card Number, Expiry Date, Valid From, Issue Number

Insurance Details

Inception/Renewal Date, Motor, Household, Buildings, Other, Insurance Company, Plan, Insurance Premium (IP), Deposit (D), Balance (IP - D)

Yes I require Premium Protector to cover me against Sickness, Unemployment Accident and Death and confirm that I have received a summary of the cover and main policy exclusions

Your first repayment is due 14 days from the date of this agreement or 30 days from the Inception/Renewal Date whichever is later. The first repayment date cannot be changed, however, if you wish to change the repayment date thereafter, please indicate your Preferred Date here.

The Agreement

The credit limit for this Account is the Total Balance as shown above or such amount as we may notify you in writing from time to time. The amount of the monthly payment will be advised to you in writing from time to time.

The monthly rate of interest is % which is equivalent to an APR of % based upon the above credit limit and taking account of the date of the first payment.

The financial details specified above are dependent upon our receipt of the completed Agreement within 30 days of the Inception/Renewal Date. In the event that we do not receive the completed Agreement within the time specified, we reserve the right to vary any or all of the financial details shown above by seven days notice to you in writing given before the first monthly payment becomes due on the Account.

Notwithstanding the statements above, this Agreement will not be regulated by the Consumer Credit Act 1974 if you are a limited company or the credit exceeds £25,000. This means that the protections and provisions under the Consumer Credit Act 1974 shall not apply (see clause 13 overleaf)

Customer Declaration and Data Protection

- By signing this agreement I understand and agree that: a) the information given by me and contained in this Agreement is true and correct b) I am 18 years of age or over c) the information given by me and other information relating to this Agreement may only be used in accordance with the purposes and disclosures under current data protection legislation; and d) I have read and understood the data protection notification overleaf and I consent to the activities described. e) If you do not wish to receive marketing material please tick box this (see clause 5(c) overleaf)



YOUR RIGHT TO CANCEL

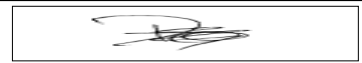
Once you have signed this agreement you will have for a short time a right to cancel it. Exact details of how and when you can do this will be sent to you by post by us.

This is a Credit Agreement regulated by the Consumer Credit Act 1974. Sign it only if you want to be legally bound by its terms

RENEWAL

Date(s) of Signature(s), Signature(s) of Customer(s)

Signed on behalf of Amber Select Ltd, Amber House, Lindenwood, Chineham Business Park, Basingstoke, RG24 8QY.



Instruction to your Bank or Building Society to pay Direct Debits

Amber Select Ltd, Amber House, Lindenwood, Chineham Business Park, Basingstoke RG24 8QY.

1. Name and full postal address of your Bank or Building Society Branch

To: The Manager, Bank or Building Society, Address, Postcode

2. Name(s) of account holder(s)

Account holder name input fields

3. Branch Sort Code (from the top right corner of your cheque)

Branch Sort Code input fields

4. Bank or Building Society Account number

Account number input fields

Originators Identification Number

765046



5. Amber Select Ltd Account Number

Account number input fields

6. Instruction to your Bank or Building Society.

Please pay Amber Select Ltd Direct Debits from the account detailed on this Instruction, subject to the safeguards assured by The Direct Debit Guarantee (see reverse for Direct Debit Guarantee) I understand that this instruction may remain with Amber Select Ltd and, if so details will be passed electronically to my Bank/Building Society.

Are the bank details new?

Banks and Building Societies may not accept Direct Debit instructions for some types of account

3546040912