**NAMA STANDARD FORM OF AUDITOR REQUEST**

This form approved by Banking & Payments Federation Ireland and The Consultative Committee of Accountancy Bodies - Ireland (CCAB-I) (amended for the purposes of NAMA)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Auditor)

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Our Ref \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Customer/Client Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account number/Holding branch \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/ We have read this document and I/We authorise you to provide the information in order to do so requested herein in respect of the accounts of the above-name customer and also to disclose the number of joint accounts, if any, to which the above-named customer is party.

Please send this information to our auditor(s),

Yours faithfully

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorised Signature(s)**

Dear Sir

We report that at the close of business on / / the records of this branch showed:-

1. Bank Accounts

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Description of a/cs  (including deposit a/cs) | S/SX  Note A | Date of last letter outlining terms/conditions of borrowing | Balance | Dr./Cr. | Amounts accrued but not posted at above date (Note B) | |
| Estimated Interest  Dr/Cr | Estim. Current Account Fees & other charges |
|  |  |  |  |  |  |  |

**Note A**: Where a specific letter of set-off for principal exists affecting any of the above accounts, please indicate this by adding ‘S’ to the account title. If the set-off refers to accounts other than those being reported on use ‘SX’. (Other set-off may arise either at law or on foot of a bank security document).

**Note B:** The provision of this information may entail work and cost. If the information is not essential this request should be deleted.

The information available at branch contained in sections 1 and 2 above is given in confidence on behalf of NAMA/NALM for your use only, in your capacity as Auditor(s) and without responsibility on the part of the Bank, Service Provider, NAMA/NALM or any of its officials.

**Note**:    No information can or will be given which would disclose confidential information regarding other customers. **We are acting on the assumption that you have been properly authorised by any data subjects, in respect of whom their personal data is furnished in this response, to process and provide that data to you.**

Note-

Signed…………………………………………………Manager (Service Provider)

Date………………………………………………

1. FULL TITLES AND DATES OF CLOSURE OF ALL ACCOUNTS CLOSED DURING PERIOD:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. CUSTOMER’S ASSETS

Nature of security held directly from customer (e.g. Deeds, Stocks, Shares etc.). **Amount only**

of any guarantees held for the benefit of the customer.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. CONTINGENT LIABILITIES

All known contingent liabilities

|  |  |  |
| --- | --- | --- |
| (a) Total of Bills discounted for your customer, with recourse | Dates(s) | Amount |
|  |  |
| (b) Amounts and dates of each Guarantee, (excluding Acceptances)  Bond or Indemnity given to you by the customer. |  |  |
| (c.) Amounts and dates of each Guarantee, (excluding Acceptances)  Bond or Indemnity given by you on behalf of your customer. |  |  |
| (d) Total of Bills drawn on and accepted by Bank on behalf of customers  (excluding (f) hereunder) |  |  |
| (e) Total Forward Foreign Contracts |  |  |
| (f) Total of Outstanding Liabilities under Documentary Credits |  |  |
| (g) Others – Please give details |  |  |

The information available at branch contained in sections 3 and 4 above is given in confidence on behalf of NAMA/NALM for your use only, in your capacity as Auditor(s) and without responsibility on the part of the Bank, Service Provider, NAMA/NALM or any of its officials.

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Signed…………………………………………………Manager ( NAMA/NALM)

Date………………………………………………