

## ACS Payment Slip

Your Details – Please use <b>black</b> ink to complete this form	
Organisation name	
ACS reference numb	er (as quoted on correspondence, but not required for Initial Registration)
Organisation address:	
Street	
Town	
County	
Postcode	Telephone number
Payment amount £	
Payment for:	Application Initial Registration Annual Re-Registration Goods
	Other Please detail
Method of Payment (tick one)   Credit Card/Debit Card – Please call 0300 123 2018 to make payment   BACS – A payment for the above amount has been made to the SIA using the following details:   Bank Name: BARCLAYS Bank Address: Knightsbridge   Sort Code: 20-06-05   Account Name: Security Industry Authority   Your bank name   Your bank branch   The reference to accompany your BACS payment should be your ACS reference number	
Authorisation and Declaration I have read and understood the Terms & Conditions and sign this payment slip on behalf of:	
Organisation Name	
Your Name (block capitals)	
Signature	
Date	/ / (DD/MM/YY)

If you have any further enquiries please consult our website at: www.sia.homeoffice.gov.uk