

## Authority to Disclose Information – Xero Direct Bank Feed

Please complete the information below:

### Personal details

Customer Name

Xero Login Email

Xero Organisation Name

(please copy from the top left corner of your screen when logged into Xero)

12 Digit Customer Number

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### Declaration

I/We using the Xero Login Email give authority to Metro Bank to disclose information of nominated accounts of the above mentioned Organisation and authorise Xero (UK) Limited to receive this information.

I/We on behalf of the Business owner of the nominated account(s) authorise Metro Bank to disclose the historical transaction data relating to the account(s) nominated below by electronic file transfer to Xero Limited.

Account Name	Account Number

("Nominated Accounts")

## Authority to disclose Information - Xero Direct Bank Feed - (continued)

### The Very Important Stuff

#### Terms and Conditions:

I/We accept and agree to the following:

1. I/We authorise Metro Bank to disclose Information relating to the account(s) nominated above (the "Nominated Accounts") to Xero Limited. "Information" means all account balance and transaction details for Nominated Accounts. The account balance will be as at the date and time the Information is transmitted by Metro Bank.
2. I/We request and authorise Metro Bank to release the Information to Xero as often as Xero requests the information.
3. I/We understand that the Information will be disclosed by electronic transmission to Xero. I/We accept and acknowledge that electronic services are subject to interruption or temporary suspension for a variety of reasons from time to time.
4. I/We acknowledge that, to the maximum extent permitted by law, neither Metro Bank nor Xero will be liable in contract, tort (including negligence) misrepresentation or otherwise for any damage, loss or costs arising under or in connection with these Terms and Conditions.
5. I/We agree to indemnify Xero and Metro Bank against any loss, damage, cost, expense, claim, proceeding or liability of whatever kind (other than arising from negligence or fraud by Metro Bank or Xero) which Metro Bank or Xero may suffer as a result of acting on My/Our instructions.
6. My/Our authority for Metro Bank to disclose information to Xero will continue in full force and effect until Metro Bank receives notice from Me/Us withdrawing it. I/We understand that I/We can withdraw My/Our authority by changing the direct bank feed preferences to 'No' in the Metro Bank Internet Banking portal or by contacting Xero.
7. The service charge of £1 (+VAT) per account per month will be deducted by Xero from an account specified by Me/Us. In addition Me/Us will be charged subscription fees as agreed between Me/Us and Xero.

**You are reminded that the Metro Bank "Our Service Relationship with Business Customers" brochure (the 'Terms and Conditions') and the relevant Important Information Summary (the 'IIS'), govern the operation and use of Metro Bank Accounts and services.**

### Signatures

**Sole Trader** (please circle)

**Director/Company Secretary/Member/Partner/Officer of Association** (please circle)

on behalf of the Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership, Club, Society or other Unincorporated Association

**Authorised Signatory 1**  
**Print Name**

**Signature**

Date

**Sole Trader** (please circle)

**Director/Company Secretary/Member/Partner/Officer of Association** (please circle)

on behalf of the Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership, Club, Society or other Unincorporated Association

**Authorised Signatory 2**  
**Print Name**

**Signature**

Date

After completion please return this form to your Relationship Manager or the below address:  
Metro Bank Business Service Team, Xero set up, One Southampton Row, London, WC1B 5HA

### Metro Bank Internal use only

Please note only authorised signatories with a full access to internet banking can request this service.

☐ I have checked the mandate and I'm happy with the signatures provided.

**Print Name**

**Signature**

**Role**

Date

**Store Opening Hours:** Monday - Friday 8am - 8pm • Saturday 8am - 6pm • Sunday 11am - 5pm  
**Business Customer Service Team:** 0345 08 08 508

[metrobankonline.co.uk](https://metrobankonline.co.uk)