



Time Invest – Withdrawal Request Form

Date of Request: _____

Client Information

- Full Name: _____
- Account Number / Client ID: _____
- Email Address: _____
- Phone Number: _____

Withdrawal Details

- Withdrawal Amount (£): _____
- Currency (if applicable): _____
- Preferred Withdrawal Method:
 - Bank Transfer
 - Other (please specify): _____

Bank Account Details (for Bank Transfer):

- Account Name: _____
- Bank Name: _____
- Account Number / IBAN: _____
- Sort Code / SWIFT/BIC: _____

Reason for Withdrawal (Optional):

Declaration

I confirm that:

1. I am the account holder or an authorised person on this account.
2. The information provided above is accurate and complete.
3. I understand that processing may take up to [insert timeframe, e.g., 5–7 business days].

Client Signature: _____

Date: _____