

**Tameside MBC**

Children’s Services Directorate

**Free Entitlement Funding Provider Directory – Change of Details**

**Section 1: What has changed?**

Change of Provider Name registered with Ofsted	<input type="checkbox"/>	Please complete Section 2
Change of Provision – Increase / Decrease in places	<input type="checkbox"/>	Please complete Section 3
Change to your Ofsted Registration	<input type="checkbox"/>	Please complete Section 4
Transfer of Ownership – retaining same Ofsted Registration e.g. Directorship Buyout	<input type="checkbox"/>	Please complete Section 5
Change of Bank Details	<input type="checkbox"/>	Please Complete Section 6

**Section 2: Change of Provider Name (as registered exactly with Ofsted)**

<b>Current Provider Name:</b>	
<b>New Provider Name:</b>	

**Section 3: Change of Provision**

<b>Change to Number Registered For:</b>			
<b>Provider Name:</b>			
<b>Current Number</b>		<b>New Number</b>	
<b>Reason for change e.g. opened / closed a room</b>			
<b>How will this affect the number of funded places you can offer?</b>			
<b>Please state the maximum number of FEF places (Full or Part time equivalent as appropriate) you can accommodate for these age ranges:</b>	9 Months to 2 Years Olds		
	2 Year Olds		
	3 & 4 Year Old		

**Section 4: Change to your Ofsted Registration Details**

<b>Current Registration Name:</b>	
<b>New Registration Name:</b>	
<b>Current Registration Address:</b>	
<b>New Registration Address</b>	

**Section 5: Change of Ownership (under same Ofsted Registration)**

<b>Provider Name:</b>	
<b>Name of New Owner(s) / Partners / Director(s) / Trustee(s)</b>	
1.	
2.	
3.	
4.	
5.	

**If your setting is owned/ managed by a registered company with a different name to your setting please provide the following details to advise of all changes:**

<b>Registered Company Address:</b>		
	<b>Postcode:</b>	
<b>Company registration number:</b>		



**Section 8: BACS Form**

**PAYMENT OF FREE ENTITLEMENT FUNDING**

Please make payments of Free Entitlement Funding by BACS (Bankers Automated Clearing Services).

Please note: - payments must be made to an account where the account name is not an individual

**Provision Details**

<b>Name of Setting:</b>	
<b>Address:</b>	
<b>Post Code:</b>	

**Bank Details**

<b>Bank Name:</b>	
<b>Bank Address:</b>	
<b>Bank Post Code:</b>	
<b>Account Name:</b>	
<b>Bank Sorting Code:</b>	
<b>Bank Account Number:</b>	

<b>Signed:</b>	
<b>Print Name:</b>	
<b>Position:</b>	
<b>Date:</b>	

**IMPORTANT**

If your bank account details change, please contact the Funding Team on 0161 342 2299