

Business Deposit Account Application

For use by businesses based in Wales only.

Important: Before completing this form please read the specific conditions for each and every account you are opening and the 'General Terms and Conditions for the operation of Savings Accounts' leaflet. These provide important information about your account with the Society. In addition please read the form 'Proving Your Identity'. Please complete this form using BLOCK CAPITALS in BLACK INK and then read and sign the Declaration on the reverse. If you require any assistance in completing this form, please call your nearest branch office – details available at www.swansea-bs.co.uk

SWANSEA
BUILDING SOCIETY

Established 1923

www.swansea-bs.co.uk

For Society use only

Account Number

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Account Information

I/We would like to open the following account(s)

Business Instant Access Saver

Business 90 Day Notice

Type of Business

- Limited Company Partnership Sole trader Limited liability partnership
 SIPP/SSAS Charity/ association Trust

Please indicate the number of signatures required for each withdrawal		Company Number/Firm SRA ID number <i>(where applicable)</i>											
Full Business Name		Business Start Date	<table border="1"><tr><td>D</td><td>D</td><td>/</td><td>M</td><td>M</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y				
Business Registered Address													
		Postcode											
Trading address (if different)													
		Postcode											
Business Phone Number		E-mail address											

Authorised Signatories

Where there are more than two Account Operators of the proposed account please request the 'Additional Account Operators' form.

First Applicant

Are you an existing customer? (Y/N)			
Title (Mr/Mrs/Etc.)			
Forename(s) in full			
Surname			
Current Address (personal not business)			
Postcode		Time at address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Previous Address <i>Only complete if you have lived at current address for less than 3 years</i>			
		Postcode	
Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Home Phone (+ Code)			
Work Phone (+ Code)			
Mobile Phone (+ Code)			
email Address			
Nationality			
Are you resident for tax purposes anywhere other than the UK? (Y/N)			
Are you a citizen only of the UK? (Y/N)			
Position held in business			

Second Applicant

Are you an existing customer? (Y/N)			
Title (Mr/Mrs/Etc.)			
Forename(s) in full			
Surname			
Current Address (personal not business)			
Postcode		Time at address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Previous Address <i>Only complete if you have lived at current address for less than 3 years</i>			
		Postcode	
Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Home Phone (+ Code)			
Work Phone (+ Code)			
Mobile Phone (+ Code)			
email Address			
Nationality			
Are you resident for tax purposes anywhere other than the UK? (Y/N)			
Are you a citizen only of the UK? (Y/N)			
Position held in business			

Operating the Account

Please detail main contact for enquiries:

Name		Contact Number	
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Shareholding and Ownership Information

Please confirm if any account signatories own or control 25% or more of the business capital, profit or voting rights.

Signatory One Signatory Two Signatory Three Signatory Four

How many other individuals own or control 25% or more of the business capital, profit or voting rights and are NOT account signatories?*

*Please note that a separate additional holder form will need to be completed by each of these individuals

About Your Business/Organisation

What does your business / organisation do?	
	Number of Directors/Principals/Partners

Expected Account Frequency

Reason for opening the account	
Source of opening deposit / future funds	
Expected frequency of account use	Anticipated turnover of deposit account (excluding initial deposit)

Your Nominated Account

I/we require all withdrawals to be transferred to the organisations bank account as follows. Please note the 'Bank Account Name' should be the name of the account as registered with your bank.

Bank Account Name		Bank Name	
Bank Address			
Bank Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>	Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Interest Instructions

I/We request that the interest be: (please tick) Added to the account Transferred to a bank account (*enter details below*)

For solicitor operated General Client Accounts only, the account details quoted must be your Office account

Transferred to a Swansea Building Society account

SBS Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Transfer to other Bank/non SBS Building Society account

Name of Bank			
Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>	Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account Holder(s) Name	Reference number (if applicable)		

On-line Registration

Please tick the box if you would like to register for the Society's online banking service. Please note that you will be sent an e-mail from the Society detailing your account number and a link to the Society's online registration pages to allow for online registration to take place. (Please note that if you have registered a nominated bank account above, you will still need to register that account when you complete the online registration process.)

The Financial Services Compensation Scheme (FSCS)

I/We confirm receipt of the information sheet relating to The Financial Services Compensation Scheme

Declaration

I, as owner of the business, or acting on behalf of the body corporate, association, partnership, firm, trust, organisation or other entity (whether or not having separate legal personality), named in this application (the "Business") declare and agree that:

- (a) I confirm that I have read:
 - (i) any marketing literature relating to the account I am opening and
 - (ii) the 'General Terms and Conditions for the operation of Savings Accounts' and agree to be bound by them and the Rules of the Society (copies of which are available upon request) and any subsequent Terms and Conditions and Rules for the time being in force.
- (b) Confirm that I have the full power and authority to apply for the account and to bind the Business to the terms of this application and, where applicable, I certify that
 - (i) a resolution has been passed by a quorum of authorised persons present that the account(s) be opened with the Society and that I sign this declaration on behalf of the Business, and
 - (ii) the Business is otherwise empowered by, and acting with, its constitution, memorandum articles of association, LLP/partnership agreement, rules regulations or bye laws (where applicable) in giving instructions to Swansea Building Society in the terms set out in this application. If you ask I will provide evidence of this.
- (c) Authorise you to accept instructions in relation to this account in accordance with the signature mandate provided or the Business' current authorised signatory list as amended and notified to the Society from time to time.
- (d) The money I am investing in this account belongs to the above named business and I will provide such Other Source of Funds, Source of Wealth, Anti-Money Laundering and Know Your Customer documentation or information as you may require.
- (e) The information on this form is true to the best of my knowledge and belief.

Your personal information:

We need to collect information about you in order to open and administer your savings account. The legal basis on which we process your data will be one or more of: the processing is necessary for us to provide you with the financial product you are seeking; it is necessary to comply with our legal obligations; it is in our legitimate business interests in relation to such purposes or with your consent.

- For the purpose of data protection legislation, the Society is the organisation responsible for the processing of the personal information held about you. You have various rights in relation to your personal information, including the right to request a copy of the details held about you by the Society and, where necessary, for inaccurate information about you to be corrected.
- If you make a joint application with your spouse, partner, family member or another party, we will also need to collect personal information about that person. If you make a joint application on behalf of the joint applicant, you agree to show them our Summary Privacy Notice and that you have all necessary consents to enable you to provide us with their information.

- The information we collect is used to verify your identity, administer your accounts, provide you with our services and to communicate with you about other products or services of ours that we think may be of interest to you.
- When using your information we may also share information with anyone you appoint to administer or operate your account; regulatory and government bodies; auditors; any individuals/organisations that we use to provide services to us; and any other person or organisation if the law, public duty or our legitimate interests require us to do so.
- We undertake checks about you with Fraud Prevention Agencies ('FPAs') for the purposes of preventing fraud and money laundering, and to verify your identity. If false or inaccurate information and fraud is suspected then we will record this and share the information with FPAs.
- In making your application you acknowledge that you have received and read the summary of our full Privacy Notice contained in our "Summary Privacy Notice" leaflet. Our full Privacy Notices are available from all our offices and on our website at www.swansea-bs.co.uk/privacy-information

Receipt of correspondence

To enable the Society to reduce its carbon footprint, customers will automatically receive correspondence from the Society by e-mail and their preferred contact method will be noted as e-mail (the Society reserves the right to use another method if required). I understand that I can change my mind at any time and request NOT to receive such information by e-mail only by visiting or telephoning any of the Society's branch offices (contact details available at www.swansea-bs.co.uk) or by e-mailing dpo@swansea-bs.co.uk.

(Where a customer has signed up to online access with the Society, they are unable to change this except in exceptional circumstances and will automatically receive communication from the Society via e-mail.)

Please note that the e-mail address given must be the personal e-mail address of the account holder(s) rather than a family member / work e-mail address.

Where a customer does not have a personal e-mail address or we are unable to contact by e-mail, correspondence will be sent by post.

Keeping you informed about other Products & Services

The Society would like to provide you with information on our products and services by e-mail or telephone unless you opt out of receiving this information. Please note the Society will continue to provide you with regulatory and service communications even if you have opted out.

I understand that I can change my mind at any time and request NOT to receive any details about the Society's products and services by visiting or telephoning any of the Society's branch offices (contact details available at www.swansea-bs.co.uk) or by e-mailing dpo@swansea-bs.co.uk.

Marketing Preferences

The Society would like to provide you with information on our products and services unless you opt out of receiving this information. Please note the Society will continue to provide you with regulatory and service communications even if you have opted out. If you would like to receive this information, please can you choose how by ticking all the boxes that apply below.

Applicant 1	<input type="checkbox"/> Email	<input type="checkbox"/> Mail	<input type="checkbox"/> Telephone	<input type="checkbox"/> SMS	Applicant 2	<input type="checkbox"/> Email	<input type="checkbox"/> Mail	<input type="checkbox"/> Telephone	<input type="checkbox"/> SMS
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(First Applicant) Signed	Date	<input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="YYYY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/>
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(Second Applicant) Signed	Date	<input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="YYYY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/>
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Account Title	Customer Number(s)	
Account Number	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	Scanned
Initials	Date	<input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="YYYY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/>