

Application for Company Accounts

www.bucksbs.co.uk

Please note, all sections of this form are mandatory

Your Investment

We wish to invest the sum of £ into the following account: Company No Notice Company 30 Day Notice

Company 120 Day Notice

Interest is to be paid: Annually into the account Annually to the bank below Monthly to the bank below

Please provide the following details:

Source of Funds:
For example, business account savings, membership fees etc.

Approximate amount to be saved:

Up to £20,000 £20,000 - £50,000 £50,000 - £100,000
 £100,000 - £250,000 Over £250,000

How often will you use the account?

Monthly Quarterly Half Yearly Annually

Your Organisation

Type of Organisation: Sole Trader Partnership Club/Association Local Authority

Limited Company - Registered Company Number Charity - Registered Charity Number

Society Community Group Other - Please specify

FCA or other Registration Number (if applicable)

Business Classification: If you are a **public or private ltd company**, what is the size of your organisation?

- Micro** - Employs fewer than 10 persons and whose annual turnover and/or balance sheet total does not exceed EUR 2 million
- Small** - Employs fewer than 50 persons and whose annual turnover and/or balance sheet total does not exceed EUR 10 million
- Medium** - Employs fewer than 250 persons, whose annual turnover does not exceed EUR 50 million and whose balance sheet total does not exceed EUR 43 million

Company Name
(and trading name if applicable):

Nature of Business:

Business Address:

Postcode:

Registered Address
(if different):

Postcode:

Correspondence Address
(if different):

Postcode:

IMPORTANT: You must have an existing bank account in the name of the organisation to open the account. We will request a bank statement to evidence the account.

Name and Address of Bank:

Postcode:

Account Number:

Sort Code:

People of Significant Control (PSC) / Account Signatories

If you require more than 4 signatories, please fill out the 'Authorised Signatories' section of an additional application form.

PSC / Signatory 1

Please note, Signatory 1 will be the primary contact on this account.

Title:		Surname:	
Forename(s):			
Date of Birth:		Nationality:	
Home Address:			
		Postcode:	
Position in Organisation:			
Telephone (day):		Mobile:	

Tax Residency:

Do you hold tax residency status in any country besides the United Kingdom? Yes No

If yes, please note we are unable to open accounts for individuals who hold tax residency status in any other country, despite also being a UK tax resident.

Do you hold UK citizenship only? Yes No

People of Significant Control:

Do you hold 25% shares or more? Yes No **If yes, please state the percentage:**

Will you be a signatory on the account? Yes No

Are you (or are you related to or have a close association with someone who is) in a prominent position in public life? (head of Government, member of judiciary, high ranking member of the services or senior in state owned enterprise) Yes No

If yes, please provide details

PSC / Signatory 2

Title:		Surname:	
Forename(s):			
Date of Birth:		Nationality:	
Home Address:			
		Postcode:	
Position in Organisation:			
Telephone (day):		Mobile:	

Tax Residency:

Do you hold tax residency status in any country besides the United Kingdom? Yes No

If yes, please note we are unable to open accounts for individuals who hold tax residency status in any other country, despite also being a UK tax resident.

Do you hold UK citizenship only? Yes No

People of Significant Control:

Do you hold 25% shares or more? Yes No **If yes, please state the percentage:**

Will you be a signatory on the account? Yes No

Are you (or are you related to or have a close association with someone who is) in a prominent position in public life? (head of Government, member of judiciary, high ranking member of the services or senior in state owned enterprise) Yes No

If yes, please provide details

People of Significant Control (PSC) / Account Signatories

If you require more than 4 signatories, please fill out the 'Authorised Signatories' section of an additional application form.

PSC / Signatory 3

Title:		Surname:	
Forename(s):			
Date of Birth:		Nationality:	
Home Address:			
		Postcode:	
Position in Organisation:			
Telephone (day):		Mobile:	
Tax Residency:			
Do you hold tax residency status in any country besides the United Kingdom? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please note we are unable to open accounts for individuals who hold tax residency status in any other country, despite also being a UK tax resident.</i>			
Do you hold UK citizenship only? <input type="checkbox"/> Yes <input type="checkbox"/> No			
People of Significant Control:			
Do you hold 25% shares or more? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state the percentage: <input type="text"/>			
Will you be a signatory on the account? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you (or are you related to or have a close association with someone who is) in a prominent position in public life? (head of Government, member of judiciary, high ranking member of the services or senior in state owned enterprise) <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide details			

PSC / Signatory 4

Title:		Surname:	
Forename(s):			
Date of Birth:		Nationality:	
Home Address:			
		Postcode:	
Position in Organisation:			
Telephone (day):		Mobile:	
Tax Residency:			
Do you hold tax residency status in any country besides the United Kingdom? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please note we are unable to open accounts for individuals who hold tax residency status in any other country, despite also being a UK tax resident.</i>			
Do you hold UK citizenship only? <input type="checkbox"/> Yes <input type="checkbox"/> No			
People of Significant Control:			
Do you hold 25% shares or more? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state the percentage: <input type="text"/>			
Will you be a signatory on the account? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you (or are you related to or have a close association with someone who is) in a prominent position in public life? (head of Government, member of judiciary, high ranking member of the services or senior in state owned enterprise) <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide details			

Personal Information

Buckinghamshire Building Society is committed to protecting your privacy and keeping your personal information secure. When you register an enquiry or complete an application form, you are authorising the Society to collect your personal information to process and operate your account(s). The Society does not share your data with any other organisation for marketing or promotional purposes. Our Privacy Notice is available on our website or you can ask us to send you a copy.

Keeping You Informed

In order to provide you with the service you require, Buckinghamshire Building Society will use your contact details to provide you with information about your account and the Society. We will not share this information with any third parties. Please tick one preferred contact method:

Signatory 1 Email Telephone/SMS Post
 Signatory 2 Email Telephone/SMS Post
Signatory 3 Email Telephone/SMS Post
 Signatory 4 Email Telephone/SMS Post

Marketing Preferences

We'd love to keep you updated about important information like our latest savings account rates, community initiatives and new mortgage products. If you would like us to send you marketing communications, please tick at least one box below (you can tick all three):

Signatory 1 Email Telephone/SMS Post
 Signatory 2 Email Telephone/SMS Post
Signatory 3 Email Telephone/SMS Post
 Signatory 4 Email Telephone/SMS Post

Customer Declaration

- (i) I/We declare that we have received and read the account Terms and Conditions, the Savers General Terms and Conditions, and agree to be bound by the Rules of the Society (Available on request).
- (ii) I/We certify that I/we have the authority to invest money and operate this account on behalf of the named organisation.
- (iii) I/We understand that evidence of identification is required for the organisation as stated in the identification leaflet, for all signatories to the account and for directors and owners of the organisation. I/We agree that the Society can use an electronic identification system to confirm their identity and that further evidence must also be provided. This is to prevent fraud.
- (iv) I/We undertake to advise Buckinghamshire Building Society of any changes in circumstances which affect my/our tax residency status.
- (v) I/We declare that I/we have completed this application form to the best of my/our knowledge and belief.
- (vi) I/We agree to inform the Society immediately in writing if there is a change to any of the authorised signatories.
- (vii) I/We agree that the Society may act on instructions agreed by the organisation and is not required to enquire into the correctness, validity or completeness of instructions in the application.
- (viii) I/We acknowledge that we have received and read the FSCS information sheet and exclusion list.

Number of signatures required for withdrawals: any 1 2 3 4 all signatories

Signature 1:	Date:	Signature 2:	Date:
Signature 3:	Date:	Signature 4:	Date:

For office use only

Customer Number	Book Number	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"/> <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"/> <input type="text"/> <input type="text"/>

CKSR Memo? (if applicable) Yes No