

Corporate Savings Application Form

New Account number

Branch



I enclose £ To open the following account

For full terms and conditions and identification requirements please refer to the appropriate leaflets. **Please complete in ink all sections of the form in BLOCK CAPITALS or tick white boxes where provided Please complete all the sections marked with an*. If you require an account where you are not the beneficial owner e.g. Trustee, please ask us for details.**

If the business or any of the signatories have an account with us, please give your account number here

1st Signatory 2nd Signatory

BUSINESS DETAILS

Full name of business*

Registration number*

Business Type* Registered Charity Club or Association Limited Company LLP Limited Partnership
Unincorporated Business Sole Trader

Registered Address*

 Postcode*

Registered office: Tick here if registered address is the same as the correspondence address

Correspondence Address

 Postcode*

Business phone number*

Business email address*

When was the business established?* /

What does the business do?*

Number of employees*

Annual turnover* £

1ST SIGNATORY DETAILS

Title* Surname*
Mr/Mrs/Ms/ Miss/Other

Forenames* (in full)

Date of Birth*

Country of Birth*

Place of Birth*

Status* Single Married Partnership
Living with Partner Widowed Separated/ Divorced

National Insurance Number

Nationality*

Second Nationality (if applicable)

2ND SIGNATORY DETAILS

Title* Surname*
Mr/Mrs/Ms/ Miss/Other

Forenames* (in full)

Date of Birth*

Country of Birth*

Place of Birth*

Status* Single Married Partnership
Living with Partner Widowed Separated/ Divorced

National Insurance Number

Nationality*

Second Nationality (if applicable)

1ST SIGNATORY DETAILS

Other countries you are resident for tax

Taxpayer Identification Number
(Please provide this number if you do not solely reside in the UK)

Position within the business*

Telephone Number (Home)*

Telephone Number (Work)*

Telephone Number (Mobile)*

Email*

Preferred contact method* Home Work Mobile Email

Permanent Residential Address*

Postcode*

Residential Status*
Property owned outright Property owned with mortgage
Tenant Living with parents/family

Time at current address*

Employment Status
Employment Self employed
Not employed Retired

2ND SIGNATORY DETAILS

Other countries you are resident for tax

Taxpayer Identification Number
(Please provide this number if you do not solely reside in the UK)

Position within the business*

Telephone Number (Home)*

Telephone Number (Work)*

Telephone Number (Mobile)*

Email*

Preferred contact method* Home Work Mobile Email

Permanent Residential Address*

Postcode*

Residential Status*
Property owned outright Property owned with mortgage
Tenant Living with parents/family

Time at current address*

Employment Status
Employment Self employed
Not employed Retired

INTEREST INSTRUCTIONS

Please note, the interest options are subject to product criteria.

I/We would like the interest*

Added to the account

Transferred to another Saffron Building Society account

Paid into the business bank account:

Account number Sort Code - -

Bank name

Bank account name

FIRST SIGNATORY MARKETING PREFERENCES

Saffron Building Society and its group companies (This group consists of Saffron Building Society and its subsidiaries including Crocus Home Loans Ltd) will not share or use any information about you and your account outside of the group for marketing purposes.

Do you want to receive details about the relevant products, services and member offers provided by Saffron Building Society and its selected partners?

Yes No

If Yes, you agree to be contacted regarding these types of communications by the following method(s) (please tick all applicable):

Email Letter Telephone SMS

If you later decide that you wish us to stop sending you marketing communications, you can at any time ask us to do so by phone, post, or at one of our branches.

If No, the Society and its group of companies accepts that you do not wish to receive marketing communications.

SECOND SIGNATORY MARKETING PREFERENCES

Saffron Building Society and its group companies (This group consists of Saffron Building Society and its subsidiaries including Crocus Home Loans Ltd) will not share or use any information about you and your account outside of the group for marketing purposes.

Do you want to receive details about the relevant products, services and member offers provided by Saffron Building Society and its selected partners?

Yes No

If Yes, you agree to be contacted regarding these types of communications by the following method(s) (please tick all applicable):

Email Letter Telephone SMS

If you later decide that you wish us to stop sending you marketing communications, you can at any time ask us to do so by phone, post, or at one of our branches.

If No, the Society and its group of companies accepts that you do not wish to receive marketing communications.

HOW WE USE YOUR DATA

When you open an account, we are required by law to confirm your identity. We will ask you to provide proof of your identity and current residential address. We will also seek to validate your identity and residence via an online search facility using information held by Credit Reference Agencies including the Electoral Register and any database (public or otherwise) to which the Credit Reference Agencies have access. They may also use your details in the future to assist other companies for verification purposes. A record of this search will be retained.

In order to prevent or detect fraud, the personal information we have collected from you will be shared with fraud prevention agencies who will use it to prevent fraud and money-laundering and to verify your identity.

If fraud is detected, you could be refused certain services, finance or employment. Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found in our Customer Privacy Notice.

We will share your data with regulatory bodies, such as HMRC, where we are required to do so by any regulations or legislation with which we are obliged to comply.

Any information about you and your account may be shared within the Society for business analysis and market research purposes. We will update all of your records when you inform us of a change to your personal details, to keep your records up to date.

DECLARATION

I/We (each for his or her own part) hereby declare:

That the sum shown overleaf is being invested on behalf of the business on the front of this application.

We declare that:

(a) to the best of our knowledge and belief, no company, society, or other body of persons (whether incorporated or not) is beneficially interested in the income from the funds being invested.

(b) the income there for is not income within Section 686 ICTA 1988 (discretionary and accumulation trusts) as defined in Sub Section (2) of that Section.

Before signing this form, you should carefully read our Customer Privacy Notice, which explains the purpose of collecting this data; the retention period; lawful reasons for processing and who this data is shared with.

SHAREHOLDING

Please confirm if any account signatories own or control more than 25% of the business capital, profit or voting rights*: We are required by law to confirm the identity of these shareholders. We will need to identify the shareholders regardless of whether they are signatories or not.

Shareholder One

Shareholder Two

Shareholder Three (must fill in separate application form)

Shareholder 4 (must fill in separate application form)

Please give the details of any other individuals (Directors, Trustees, Shareholders) or business(es) who own or control more than 25% of the business capital, profit or voting rights*:

Please select the number of other individual shareholders (if applicable)* 1 2 3 4

Shareholder one

Title* Surname*
Mr/Mrs/Ms/ Miss/Other

Forenames* (in full)

Date of Birth*

Permanent Residential Address*

 Postcode*

Shareholder two

Title* Surname*
Mr/Mrs/Ms/ Miss/Other

Forenames* (in full)

Date of Birth*

Permanent Residential Address*

 Postcode*

SIGNING INSTRUCTIONS FOR ACCOUNT WITH MULTIPLE ACCOUNT SIGNATORIES

For accounts with multiple account signatories, tell us how many signatures you would like us to take as your authorisation for account operation:

For a corporate savings account we require a minimum of 2 signatures.

(Please note if more than one signature is required for authorisation of account operation you will be unable to have online account access.)

NEW ACCOUNT QUESTIONNAIRE

REASON FOR OPENING ACCOUNT

Frequency of Deposit Regular Deposits Occasional One-off

Approximate Amount

Frequency of Withdrawal Regular Withdrawal Occasional One-off

Approximate Amount

DEPOSIT ON OPENING ACCOUNT

Type of Funds*

Cash Cheques
 Combined Transfer

Origin of Funds*

(e.g. business account)

PLEASE SIGN

This is our standard customer agreement upon which we intend to rely. For your own benefit and protection you should fully read the declarations on this application form and the terms and conditions on the account that you wish to open. You should do this before signing this application form. If you do not understand any of the points please ask us for further information. You are confirming the receipt of the Financial Services Compensation Scheme Information Sheet and Exclusions List.

D	D	M	M	Y	Y	Y	Y
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Signatory one

Signature

Name

Signatory two

Signature

Name

If there are more than two signatories, tick here and complete the other parties' details on a separate form.

Saffron Building Society is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Financial Services Register no. 100015)

Directors signature

As a Director I give authority to the signatory(s) to open and operate the account on behalf of the business.

Signature

Name

Position within the business
e.g. Director

Directors signature

As a Director I give authority to the signatory(s) to open and operate the account on behalf of the business.

Signature

Position within the business
e.g. Director

Directors signature

As a Director I give authority to the signatory(s) to open and operate the account on behalf of the business.

Signature

Name

Position within the business
e.g. Director

FOR SOCIETY USE ONLY

Business Number

Customer number one

Customer number two

Postal account

Input by

Date

Checked by

Date

Mandatory literature provided