

# **Account Opening Application Form**

### **Personal Accounts**

Currency: Sterling	US Dollar		Other
Ace Current Account		90 Day Not	ice
Online Easy Access Account		35 Day Not	iice
Fixed Term Deposit Account		Interest Pa	yment Frequency
6 Month Fixed Term Deposit		Monthly (ava	ilable for 1, 2, 3, 5 and 7 year terms)
1 Year Fixed Term Deposit		Annually (ava	nilable for 2, 3, 5 and 7 year terms)
2 Year Fixed Term Deposit		Maturity (ava	nilable for all products)
3 Year Fixed Term Deposit		Other Pro	ducts (Please Specify)
5 Year Fixed Term Deposit			<del>-</del>
7 Year Fixed Term Deposit		If you are	applying for a Fixed Term Deposit
Debit Card			ovide details of your nominated or interest/principal payments.
Other:		Sort Code	:
(Please Specify)			
(FOR UBL UK INTERNAL USE ON	NLY (Branches	to ensure that	t all sections are completed))
Branch Name:	`		Tax
A/c No.			R85 Joint Account
APEX No:			R105
Date:			Beneficiary A/C: Yes No  (Please select 'Yes' if the account holder is not the beneficial owner of the funds being used in this account)
Account processed by:			Mandate Holder: Yes No
Input by:			Power of Attorney Holder: Yes No



### Individual tax residency self-certification form INSTRUCTIONS

Please read these instructions before completing the form.

Regulations based on the OECD Common Reporting Standard ("CRS") require Financial Institutions to collect and report certain information about an account holder's tax residence. Each jurisdiction has its own rules for defining tax residence, and jurisdictions have provided information on how to determine if you are resident in the jurisdiction on the following website: [OECD AEOI Portal]. In general, you will find that tax residence is the country in which you live. Special circumstances may cause you to be resident elsewhere or resident in more than one country at the same time (dual residency). If you are a U.S. citizen or tax resident under U.S. law, you should indicate that you are a U.S. tax resident on this form and you may also need to fill in an IRS W-9 form. For more information on tax residence, please consult your tax adviser or the information at the following link: [OECD AEOI Portal].

If your tax residence (or the account holder, if you are completing the form on their behalf) is located outside the United Kingdom, we may be legally obliged to pass on the information in this form and other financial information with respect to your financial accounts to HMRC and they may exchange this information with tax authorities of another jurisdiction or jurisdictions pursuant to intergovernmental agreements to exchange financial account information.

This form will remain valid unless there is a change in circumstances relating to information, such as the account holder's tax status or other mandatory field information, that makes this form incorrect or incomplete. In that case you must notify us and provide an updated self-certification.

This form is intended to request information consistent with local law requirements.

#### As a financial institution, we are not allowed to give tax advice.

If you have any questions about this form, these instructions, or defining your tax residency status, please speak to your tax adviser or domestic tax authority.

You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested, on the OECD automatic exchange of information portal.

# **FIRST APPLICANT** (Please complete all section in BLOCK Capitals) Section 1 - Personal Information

1.	Title and Surname	Mr/Mrs/Miss/Ms/Other						
2.	Forenames							
3a.	Current Residential Address							
	Post Code	Country						
b.	Date of Entry to this address (eg. 01/06/2005)	D D M M Y Y Y Y						
	if less than 3 years, please tell us your last address							
	Post Code	Country						
	Please attach a	seperate sheet if you have lived in more than 2 addresses in the last 3 years and state dates of entry.						
c.	Mailing address (if different from Current Residential Address)							
	Post Code	Country						
4.	Home Phone number (ir							
	Mobile number (including of	ountry code)						
5.	Email Address (email address is mandatory, i	f you are opting for Online Banking and/or electronic statements)						
6.	Date of Birth	D D M M Y Y Y 7a. Nationality						
7b.	Dual Nationality (if yes, state country)	8. Place of Birth (town/city)						
9.	Country of Birth							
10a.	Do you have residence	in the USA Yes No						
	If yes, please provide ad	ldress						
b.	Have you ever held a US	SA Green Card? Yes No						
C.	Are either of your paren	nts born in the USA or were USA Citizens?						
11.	Country of Permanent residence							
12.	Are you ordinarily resident in the UK for Tax purposes	Yes No						
		Please ask us about payment of interest without deduction of tax (applicable for under 16 and over 65 years)  You have to fill in a declaration form (R105) in case you want to receive interest without deduction of tax						
Sec		sidence for Tax Purposes and related Taxpayer Identification Number number* ("TIN") (See Appendix)						
1.		owing table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's						
	•	more than three countries please use a separate sheet						
	·	ease provide the appropriate reason A, B or C where indicated below:						
	Reason A - The country where you are liable to pay tax does not issue TINs to its residents							

Reason B - You are otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

**Reason C** - No TIN is required. (Note. Only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed)

	Country of tax reside	nco	TIN		If no TIN available	enter Reason A, B or C
	Country of tax resider	nce	TIN		ii no riiv available	enter Reason A, B or C
	1					
	2					
	-					
	3					
	DI LI LI LI				N. 15	
		the following box	kes why you are una	able to obtain a T	N if you selected Re	ason <b>B</b> above.
	1					
	2					
	3					
Sec	ction 3 - Other Informa	tion				
	Do you have any other a		ited Pank LIV2	Yes		No
1.	If yes, please state accou		iteu barik UK!	Tes		INO
2			titu udan maristaria (	Internal of 134-1-1	haukina)	
2.	Security Questions? (use		, , , ,	iniernet and Mobile	ounking)	
	2.1 QUESTION 1 Mothe	er's Maiden Nam	ne Answer 1			
	2.2 QUESTION 2 Name	e of First School	Answer 2			
	2.3 QUESTION 3 Favou	urite Famous Per	son Answer 3			
3.	Name on Debit Card					
4.	Tick the box that applies to you	Home ow	ner Living	with parents	Rented	Other/Please specify
5.	Tick the box that applies to you	Single Other	Marrie	ed	Divorced or Seperated	Widowed
6.	applies to you	Employed Student	Self-employ Retired		Inemployed Inousewife	Other/Please specify
Sec	ction 4 - Employment (†	for employed and	l self-employed app	licants)		
1.	Your Occupation					
2.	Your employer's name and address (or your business name and address if you are Self Employed) Post Code			Country	<i>'</i>	
3.	Daytime Phone no. (including country code)					
4.	How long have you been in your business?	with the present	employer or		Years	Months
5.	How is your salary paid?	D	irect into your bank	By chequ	e in cash	
6.	What is your annual gross income? in £'s					

# **SECOND APPLICANT** (Please complete all section in BLOCK Capitals)

### Section 1 - Personal Information

1.	Your relationship with f	irst applicant							
2.	Title and Surname	Mr/Mrs/Miss/Ms/Other							
3.	Forenames								
4a.	Current Residential Address								
	Post Code	Country							
b.	Date of Entry to this address (eg. 01/06/2005)	DD MM YYYY							
	if less than 3 years, please tell us your last address								
	Post Code	Country							
	Please attach o	a seperate sheet if you have lived in more than 2 addresses in the last 3 years and state dates of entry.							
C.	Mailing address (if different from Current Residential Address)								
	Post Code	Country							
5.	Home Phone number (	ncluding country code)							
	Mobile number (including	country code)							
6.	Email Address (email address is mandatory,	if you are opting for Online Banking and/or electronic statements)							
7.	Date of Birth	D D M M Y Y Y 8a. Nationality							
8b.	Dual Nationality (if yes, state country)	9. Place of Birth (town/city)							
10.	Country of Birth								
11a	. Do you have residence	in the USA Yes No							
	If yes, please provide a	ddress							
b	. Have you ever held a U	SA Green Card? Yes No							
С	. Are either of your pare	nts born in the USA or were USA Citizens? Yes No							
12.	Country of Permanent residence								
13.	Are you ordinarily resident in the UK	Yes No							
	for Tax purposes	Please ask us about payment of interest without deduction of tax (applicable for under 16 and over 65 years)  You have to fill in a declaration form (R105) in case you want to receive interest without deduction of tax							
Sec		esidence for Tax Purposes and related Taxpayer Identification Number							
	or equivalent	number* ("TIN") (See Appendix)							
1.	Please complete the fol TIN for each country in	lowing table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's dicated.							
	If you are tax resident in	n more than three countries please use a separate sheet							
	If a TIN is unavailable p	ease provide the appropriate reason A, B or C where indicated below:							
	Reason A - The country where you are liable to pay tax does not issue TINs to its residents								

**Reason B** - You are otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

**Reason C** - No TIN is required. (Note. Only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed)

	below do not require the rinv		,		
	Country of tax residence		TIN		If no TIN available enter Reason A, B or C
	1				
	2				
	2				
	3				
		illowing boxes	s why you are unable to obt	ain a TIN	N if you selected Reason <b>B</b> above.
	1				
	2				
	3				
Sec	ction 3 - Other Information				
1.	Do you have any other accou	nts with United	ed Bank UK?	es es	No
	If yes, please state account no				
2.	Security Questions? (Used to ve	erify your identity	when registering for Internet and	l Mobile b	panking)
	2.1 QUESTION 1 Mother's	: Maiden Name	e Answer 1		
	2.2 QUESTION 2 Name of	First School	Answer 2		
	2.3 QUESTION 3 Favourite	e Famous Perso	son Answer 3		
3.	Name on Debit Card				
4.	Tick the box that applies to you	Home owner	r Living with parer	nts	Rented Other/Please specify
5.	Tick the box that	Single	Married		Divorced or Seperated Widowed
	applies to you	Other			'
6.	Tick the box that Empl	oyed	Self-employed	Ur	nemployed
	applies to you Stude	ent	Retired	Но	ousewife Other/Please specify
Sec	ction 4 - Employment (for en	nployed and se	elf-employed applicants)		
		profess and Sc.	a, emproyed applicants)		
	Your Occupation Your employer's name				
۷.	and address (or your				
	business name and address if you are				
	Self Employed)				
_	Post Code			Country	
3.	Daytime Phone no. (including country code)				
4.	How long have you been with in your business?	the present em	nployer or	Y	ears Months
5.	How is your salary paid?	Direc	ct into your bank By	cheque	in cash
6.	What is your annual gross income? in £'s				

To be completed by Joir	nt Applicants only		
Account to be operated by:	Either Jointly*	•	
* If you select jointly and are apply to NetBanking will not be granted	ving for a Current Account, d.	a Debit Card will not be issued	d and access



#### Section 6 - Agreement of Declaration

#### Your agreement with us:

By signing below, you, the individual(s) named in this form are:

- (1) confirming you are applying to the Bank for banking services;
- (2) confirming that any details you have supplied to us are true and complete;
- (3) authorising us to:
  - (i) make credit reference and other enquiries in connection with this application in accordance with our normal procedures; and
  - (ii) disclose information to licensed credit reference agencies and otherwise in accordance with the relevant conditions of our General Terms and Conditions.
- (4) confirming that you understand that credit reference agencies record information and the information they record may be used by other organisations to help make decisions about credit and credit related services and to manage accounts for customers and for fraud prevention, debtor tracing, debt recovery and to check a customer's identity to prevent money laundering;
- (5) agreeing to be bound by the terms of the application and the Bank's General Terms and Conditions which contain your obligations to us and our obligations to you which may be altered from time to time;
- (6) confirming that you understand that UBL UK can decline your account application or close your account without disclosing a reason or providing any prior notice;
- (7) confirming that you understand how UBL UK will collect and use your data and that this will be as defined in the Bank's Privacy Policy and Personal Banking Terms and Conditions. In addition, confirming that you consent for UBL UK to collect and use your data in the manner described in these documents.

#### For Joint Accounts only:

- (A) You agree that we may debit your joint Account with cheques and other forms of instructions for payment authorised by any one of you as detailed in our General Terms and Conditions.
- (B) You agree that we will send regular statements of Account to only one of you unless otherwise notified to us in writing.
- (C) Each of you agree to indemnify the Bank against any loss or damage suffered by the Bank should any information given by any of the Account holders prove incorrect.

#### **Marketing Declaration**

Your data is safe with us - we do not share your data for marketing outside United Bank UK.

We promise to keep you informed with regards to our products and services that may be of specific interest to you. Please confirm below how we may contact you.

write to us

Yes No

phone us

Yes No

email us

Yes No

5

es No

If you choose 'No' for all these options, we will not be able to tell you about any products or services we could supply.

#### Declaration (please read)

I/We have received a copy of the leaflet for the account described overleaf

Individual or joint investors:

a) as sole beneficial owner.

b) as joint beneficial owners.

I/We have read and understood the Terms & Conditions of the account and agree to be bound by them.

You have the right to apply for a copy of your information (subject to the payment of a small fee) and to ask for any inaccuracies to be corrected.

#### **Declaration and Signature**

I/We understand that the information supplied by me/us is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with United Bank UK setting out how United Bank UK may use and share the information supplied by me/us.

I/We acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I/We certify that I/We am/are the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates.



I/We declare that all statements made in this declaration are, to the best of my/our knowledge and belief correct, and complete.						
residency status of the become incorrect, and	ise United Bank UK within 90 days of any change in circumstances which affects the tax individual identified in Section 1 of this form or causes the information contained herein to to provide United Bank UK with a suitably updated self-certification and Declaration within hange in circumstances.					
Signature:*						
Print name:*						
Date:*						
Second Applicant (in	case of Joint Account)					
Signature:*						
Print name:*						
Date:*						
	he Account Holder please indicate the capacity in which you are signing the form. If or of attorney please obtain a separate form available at our branches, complete and					
Capacity:*						

<b>UB</b> L	U	NITE	D B/	ANK	UK										
		5	SIG	NA	JT	JRI	E <b>C</b>	AR	RD	Dat	e	/	ı	/	
A/C Number															
TITLE OF A/C															
Anyone sign				S	SIGNEI	JOIN	TLY								
NAM	1E		•		Signature										
SPECIAL INSTRUCTION	ONS:														

(UBL UI	NITED BA	NK UK								
OBC	SIG	NATU	JRE (	CAF	RD	Date	e	/	/	_
A/C Number										
TITLE OF A/C										
ANYONE SIGN		SIGNED	JOINTLY							
Name	'	Signature								
SPECIAL INSTRUCTIONS:										



### **INFORMATION SHEET**

Basic information about the protection of your eligible deposits							
Eligible deposits in United National Bank Limited are protected by:	The Financial Services Compensation Scheme ("FSCS") <sup>1</sup>						
Limit of protection:	f85,000 per depositor per bank <sup>2</sup> The following trading names are part of your bank: United National Bank Limited, United Bank UK and UBL UK						
If you have more eligible deposits at the same bank / building society / credit union:	All your eligible deposits at the same bank are "aggregated" and the total is subject to the limit of £85,000. <sup>2</sup>						
If you have a joint account with other person(s):	The limit of £85,000 applies to each depositor separately. <sup>3</sup>						
Reimbursement period in case of bank, building society or credit union's failure:	20 working days <sup>4</sup>						
Currency of reimbursement:	Pound sterling (GBP, £) or, for branches of UK banks operating in other EEA Member States, the currency of that State.						
To contact United National Bank Limited for enquiries relating to your account:	You can visit one of our branches, call us, go online or write to us at the address below:- Central Operations, 391-393 Stratford Road, Birmingham, B11 4JZ						
To contact the FSCS for further information on compensation:	Financial Services Compensation Scheme 10th Floor Beaufort House 15 St Botolph Street London EC3A 7QU  Tel: 0800 678 1100 or 020 7741 4100  Email: ICT@fscs.org.uk						
More information:	http://www.fscs.org.uk						
Acknowledgement of receipt by the depositor:							



#### **Additional information**

#### 1 Scheme responsible for the protection of your eligible deposit

Your eligible deposit is covered by a statutory Deposit Guarantee Scheme. If insolvency of your bank should occur, your eligible deposits would be repaid up to £85.000 by the Deposit Guarantee Scheme.

#### 2 General limit of protection

If a covered deposit is unavailable because a bank is unable to meet its financial obligations, depositors are repaid by a Deposit Guarantee Scheme. This repayment covers at maximum £85,000 per bank. This means that all eligible deposits at the same bank are added up in order to determine the coverage level. If, for instance a depositor holds a savings account with £80,000 and a current account with £20,000, he or she will only be repaid £85,000.

This method will also be applied if a bank operates under different trading names. United National Bank Limited also trades under United Bank UK and UBL UK. This means that all eligible deposits with one or more of these trading names are in total covered up to £85,000.

In some cases eligible deposits which are categorised as "temporary high balances" are protected above £85,000 for six months after the amount has been credited or from the moment when such eligible deposits become legally transferable. These are eligible deposits connected with certain events including:

- a) certain transactions relating to the depositor's current or prospective only or main residence or dwelling;
- b) a death, or the depositor's marriage or civil partnership, divorce, retirement, dismissal, redundancy or invalidity;
- c) the payment to the depositor of insurance benefits or compensation for criminal injuries or wrongful conviction.

More information can be obtained under http://www.fscs.org.uk

#### 3 Limit of protection for joint accounts

In case of joint accounts, the limit of £85,000 applies to each depositor.

However, eligible deposits in an account to which two or more persons are entitled as members of a business partnership, association or grouping of a similar nature, without legal personality, are aggregated and treated as if made by a single depositor for the purpose of calculating the limit of £85,000.

#### 4 Reimbursement

The responsible Deposit Guarantee Scheme is the Financial Services Compensation Scheme, 10th Floor Beaufort House, 15 St Botolph Street, London, EC3A 7QU, Tel: 0800 678 1100 or 020 7741 4100, Email: ICT@fscs.org.uk. It will repay your eligible deposits (up to £85,000) within 20 working days until 31 December 2018; within 15 working days from 1 January 2019 until 31 December 2020; within 10 working days from 1 January 2021 to 31 December 2023; and within 7 working days from 1 January 2024 onwards, save where specific exceptions apply.

Where the FSCS cannot make the repayable amount available within 7 working days, it will, from 1 June 2016 until 31 December 2023, ensure that you have access to an appropriate amount of your covered deposits to cover the cost of living (in the case of a depositor which is an individual) or to cover necessary business expenses or operating costs (in the case of a depositor which is not an individual or a large company) within 5 working days of a request. Again, there are specific exceptions to this obligation.

In the case of a depositor which is a large company, where the FSCS cannot make the repayable amount available within 7 working days, it will, from 3 July 2015 until 1 December 2016, ensure that you have access to your covered deposits within fifteen working days of a request containing sufficient information to enable it to make a payment, save where specific exceptions apply.

In the case of a depositor which is a small local authority, where the FSCS cannot make the repayable amount available within 7 working days, it will, from 3 July 2015 until 1 June 2016, ensure that you have access to your covered deposits within fifteen working days of a request containing sufficient information to enable it to make a payment, save where specific exceptions apply.

If you have not been repaid within these deadlines, you should contact the Deposit Guarantee Scheme since the time to claim reimbursement may be barred after a certain time limit. Further information can be obtained under <a href="http://www.fscs.org.uk">http://www.fscs.org.uk</a>.

#### 5 Other important information

In general, all retail depositors and businesses are covered by Deposit Guarantee Schemes. Exceptions for certain deposits are stated on the website of the responsible Deposit Guarantee Scheme. Your bank, building society or credit union will also inform you of any exclusions from protection which may apply. If deposits are eligible, the bank, building society or credit union shall also confirm this on the statement of account.



### **EXCLUSIONS LIST**

A deposit is excluded from protection if:

- The holder and any beneficial owner of the deposit have never been identified in accordance with money laundering requirements. For further information, contact your bank.
- 2. The deposit arises out of transactions in connection with which there has been a criminal conviction for money laundering.
- 3. It is a deposit made by a depositor which is one of the following:
  - credit institution
  - financial institution
  - investment firm
  - insurance undertaking
  - reinsurance undertaking
  - collective investment undertaking
  - pension or retirement fund 1
  - public authority, other than a small local authority.

For further information about exclusions, refer to the FSCS website at <a href="https://www.FSCS.org.uk">www.FSCS.org.uk</a>

<sup>1</sup> Deposits by personal pension schemes, stakeholder pension schemes and occupational pension schemes of micro, small and medium sized enterprises are not excluded