

# ISA APPLICATION FORM

# PLEASE NOTE, TRANSFERS FROM STOCKS & SHARES ISAS ARE NOT PERMITTED.

AFTER COMPLETING THIS FORM PLEASE RETURN THIS APPLICATION FORM TO: **FREEPOST**, **FAMILY BUILDING SOCIETY**. ALTERNATIVELY YOU CAN UPLOAD YOUR APPLICATION FORM SECURELY USING THE FOLLOWING LINK **FAMILYBUILDINGSOCIETY.CO.UK/FILE-UPLOAD** AND SELECTING "CUSTOMER SERVICES - SAVINGS" IN THE "DESIRED RECIPIENT DEPARTMENT AT FBS" FIELD.

# **ACCOUNT DETAILS**

PLEASE FULLY COMPLETE IN BLOCK CAPITALS. FIELDS MARKED WITH A \* ARE OPTIONAL.

# **OPENING INVESTMENT**

I APPLY TO SUBSCRIBE TO A CASH ISA FOR THE CURRENT TAX YEAR:

And each subsequent year until further notice. (You cannot subscribe to another Cash ISA with us within this tax year. You may subscribe to another Cash ISA with another provider, however you must ensure your subscription for the current tax year does not exceed the ISA subscription allowance)

|--|

subscription allowance)							
ACCOUNT HO	OLDER			CURREN	T TAX YEAR	INVEST	MENTS
TITLE:	MR / MRS / MISS / MS		I ENCLOSE THE SUM OF:		£	£	
SURNAME:					ASE TRANSFER	£	
FORENAMES:				THE SUM OF:			
PERMANENT					nce" to transfer the clos	-	-
HOME ADDRESS:				ACCOUNT NUMBER:	HER SAVINGS ACCO	OUNT WITH US	).
					I be made payable to " <b>F</b>	amily Building	Society"
POSTCODE:				followed by your	r name.		
LENGTH OF TIME AT ADDRESS:	YEARS MONTHS			PREVIOU	JS TAX YEAF	RINVEST	MENTS
HOME PHONE:*				PI FASF TRAN	ISFER THE SUM OF:	£	
MOBILE PHONE:*					nce" to transfer the clos		
ENAMI ADDDESS *				•	HER ISA WITH US.	sing balance)	
EMAIL ADDRESS:*				ACCOUNT	IER ISA WITTI OS.		
DATE OF BIRTH:	DD MM YYYY			NUMBER:			
NATIONALITY:							
MARITAL STATUS:					NSFERS FRO		
OCCUPATION			PROVIDER - INCLUDING CURRENT TAX YEAR				
OCCUPATION: NATIONAL					ANSFER ALL OF MY	£	
INSURANCE NO:				(If closing balan	ce not known, please gi	ve an estimate)	
(It you do not know your N Return. Otherwise your en	ational Insurance number, please nployer or Tax Office may be able	refer to your P60, No to help).	tice of Coding, or Tax	FROM MY EXI	ISTING ISA PROVIDE	ER:	
	oile phone number or email addre n or with important information a						
	erns we have about the activity o		,	(An ISA Transfe	er Form must also be co	mpleted. Please	note, we only
TAX IDENTIFICATION (Only applicable to foreign	N NUMBER: gn nationals working in the UK)				ers in of current tax year evious tax year Cash IS		ou can transfer
				OR			
				OK			
	TO RECEIVE ACCOUNT			ISA TRAI	NSFERS FRO	M ANOT	HER
UPDATES FROM US? (	e.g. statements)				ER – PREVIO	US TAX	YEARS
POST	1AIL TEXT			ONLY	ANICEED		
IF YOU ARE AN EXIST PLEASE STATE YOUR				I APPLY TO TR (Delete as appro		ALL	PART
LEASE STATE TOOK	, CCCOTT HOMBEN.			OF MY ISA FU	NDS IN THE SUM OF	=: £	
		(If exact balance not known, please give an estimate)					
				FROM MY EXI	STING ISA PROVIDE	R:	

(An ISA Transfer Form must also be completed)

# PLEASE NOTE, TRANSFERS FROM STOCKS & SHARES ISAS ARE NOT PERMITTED.

YOUR PRODUCT CHOICE									
Please select your product choice below. Please note, not all products listed below are always available. Please check availability before applying:									
FLEXIBLE ISA		ISSUE <sup>†</sup>							
35 DAY NOTICE CASH ISA		ISSUE†							
FIXED RATE CASH ISA		ISSUE <sup>†</sup>							
MARKET TRACKER CASH ISA		ISSUE <sup>†</sup>							
IF YOU'RE APPLYING FOR A FIXED RA	ATE CAS	H ISA, PL	EASE S	ELEC <sup>-</sup>	Т ТНЕ	FIXED	RATE	LENG	TH:
YEARS MONTHS OF	RUNTIL	DD	ММ	YY	ΥΥ				
† The issue number can be found in brackets a	·					te or the	e Summ	ary Box	flyer.
ACCOUNT NAME:									
ACCOUNT NUMBER:									
BANK NAME:							1		
SORT CODE:			_			_			
BRANCH:									
REFERENCE IF APPLICABLE:									
(Please note that we will require evidence of cheque crossed "cancelled" showing your name	ownership ne, sort co	of the Nor ode and acc	ninated ount nu	Accou mber, (	nt abov or an or	e, such a iginal ba	as a pay ank state	ring-in s ement)	lip or
I / WE HAVE ENCLOSED THE OWNERSHIP EVIDENCE REQUIRED									
(Please note that if evidence is not provided w	ith your a	pplication f	orm, the	en your	withdra	wal payı	ments w	vill be de	elayed)
HOW DID YOU FIND OUT ABOUT TH	IS ACCC	DUNT?							
USING YOUR PERSON	AL IN	1FORI	MAT	ION					
Personal information which you suppl     to open and manage the account     for fraud prevention				ber of v	ways, fo	r examp	ole:		

- for management and audit of our business
- for market research and statistical analysis
- 2. Information about you will be kept after your account is closed.
- We may share your information with, and obtain information about you from, credit reference agencies to 3. check your identity. This will not affect your credit score.
- We may share your personal information with other people or organisations, for example:
  - third parties for processing on our behalf
  - governmental and regulatory bodies (such as HMRC and the Financial Conduct Authority)
  - for fraud prevention and detection purposes
  - other payment services providersif required to do so by law

  - with your consent
- We may use your information to tell you about other products and services we think may be of interest to you. 5.
- We may monitor or record any communications you have with us in the interests of staff training, customer service and security.
- For further details about how your personal information is used, and your rights under data protection law, please refer to the enclosed leaflet, "How We Use Personal Information".

IDA			
IDP			
PAYEE			
DRAWER			
SORT CODE			
A/C No.			
KYC			

THIS SECTION IS FOR SOCIETY USE

PLEASE COMPLETE **OVERLEAF, SIGNING** AND DATING THE **CONSENT AND** CONFIRMATION SECTION.

### **DECLARATIONS**

#### 1. GENERAL

I hereby declare that:

- 1.1 I have received the following:
  - Product Features leaflet
  - General Conditions for our Savings Accounts booklet
  - The Financial Services Compensation Scheme (FSCS) Information Sheet
  - The leaflet on "How We Use Personal Information".
- 1.2 I agree to notify the Society of any changes to my personal details as set out overleaf.
- 1.3 The information supplied on this form is true and correct to the best of my knowledge and belief.
- 1.4 All subscriptions made, and to be made, belong to me.
- 1.5 I am 18 years of age or over.
- 1.6 I have not subscribed/made payments, and will not subscribe/make payments, more than the overall subscription/payment limit in total to a cash ISA, a stocks and shares ISA, an innovative finance ISA, and a Lifetime ISA in the same tax year.
- 1.7 I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform Family Building Society if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.
- 1.8 I agree to the ISA terms and conditions.

#### 2. I AUTHORISE FAMILY BUILDING SOCIETY

- 2.1.1 To hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of those investments and any other cash.
- 2.1.2 To make on my behalf any claims to relief from tax in respect of ISA investments.

#### 3. AGREEMENT TO ASSIGN CONVERSION BENEFITS TO CHARITY

- By applying to open a share account on or after 14 February 2000 I agree with the Society and the Charities Aid Foundation ("the CAF") that I will assign to the CAF (or to any charity(ies) nominated by it or by the Society under the provisions of a deed dated 11 February 2000 between the Society and the CAF, in which case references to the CAF shall include references to any other charity(ies) but to no other person), the rights to any relevant conversion benefits (defined in paragraph 3.2. below). This agreement to assign will not apply to me if I fall within any class of persons which, as at today's date, the Society wishes to be excluded from such obligation. This agreement is irrevocable and authorises the Society to transfer to the CAF any such benefits without further notice to me. I understand that neither the Society nor the CAF will release me from this agreement or vary its terms and (except as set out in paragraph 3.3 below) I will continue to be bound by the agreement even if the Society decides at some time in the future that it is no longer in the best interests of the Society to continue with the above assignment condition generally in respect of new members.
- 3.2 "Relevant conversion benefits" means any benefits to which I might become entitled as a shareholding member of the Society under the terms of any future transfer of the Society's business to a company (i.e. on a conversion or take-over) which is completed at any time within the five years immediately following the

- date on which my share account is opened or, if applicable, the shorter period set out in the list referred to below. "Relevant conversion benefits" does not include the statutory right to have shares in the Society (including any balances on share accounts) converted into deposits with the company on a conversion or take-over.
- 3.2.1 If the Society merges with any other society, after the date of such merger the "Society" includes such other society.
- I authorise the Society to pass to the CAF such information relating to me and my accounts with the Society as the CAF may reasonably require in order to administer this agreement and the relevant conversion benefits and for no other purpose. I consent to both the Society and the CAF holding and processing such information for such purposes. A list of the classes of persons which the Society currently wishes to be excluded from the agreement to assign, or in respect of which a shorter period applies, (which list may change from time to time but not with retrospective effect) is available on request from the Society's branch or principal office.

# INFORMATION ABOUT ELECTRONIC PAYMENTS TO AND FROM YOUR ACCOUNT

Each month we will send you a statement listing the electronic payments on your account, unless there are no payments in that month. This excludes crediting or payment of interest. Alternatively, we can give you this information on request or via our Online Service. If you do not wish to receive such monthly statements, please tick the box

#### **MARKETING**

We would like to tell you	about our produ	ucts, services, a	nd events and those of our							
carefully selected partners (a list of which is available on request). We will always										
treat your personal detai	treat your personal details with the utmost care and will never share them with other									
companies for marketing	purposes. If you	ı give consent t	his will last as long as you							
have a relationship with u	is. If you agree to	o us communic	ating with you for marketing							
purposes, please tick the relevant boxes below to confirm how we may contact you.										
Post Email	Phone	Text								

You can unsubscribe from marketing at any time by writing to: Family Building Society
Ebbisham House, 30 Church Street, Epsom, Surrey KT17 4NL.

#### CONSENT AND CONFIRMATION

For your own benefit and protection you should carefully read the Product Features leaflet, Product Summary Box and the General Conditions for our Savings Accounts Booklet as these contain the terms and conditions upon which we intend to rely. You should do this before signing this application form. If you have any questions about the account terms and conditions please contact our New Business Team on 03330 140141 or newbusiness@familybsoc.co.uk

# By signing this application form you are:

- confirming that you have read the section "Using Your Personal Information" above, and the leaflet "How We Use Personal Information" which accompanies this application form.
- making the declarations and giving the authorities set out in the section "DECLARATIONS" above.
- agreeing to the use of your personal information to enable us to provide you with payment services, such as faster payments, to and from your account.

ACCOUNT HOLDER	SIGNED:		DATE:	DD	ММ	YYYY
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If you need this application form in an alternative format please call our New Business Team on 03330 140141.

# PLEASE RETURN THIS APPLICATION FORM TO:

Freepost FAMILY BUILDING SOCIETY. ALTERNATIVELY YOU CAN UPLOAD YOUR APPLICATION FORM SECURELY TO familybuildingsociety.co.uk/file-upload

PLEASE RETAIN THE PRODUCT FEATURES LEAFLET, GENERAL CONDITIONS FOR OUR SAVINGS ACCOUNTS BOOKLET AND THE FSCS INFORMATION SHEET FOR YOUR FUTURE REFERENCE.