

ADDING AN ADDITIONAL ACCOUNT HOLDER

APPLICATION FORM

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THIS FORM IS TO BE USED WHEN ACCOUNT HOLDER(S) WANT TO ADD ANOTHER PERSON TO A SAVINGS ACCOUNT HELD WITH US.

Please note the following:

- An application form must be completed by all new account holders.
- The last interest payment made will be deemed to have been earned by the original account holder(s). The next interest payment paid will be considered to be earned by both existing and new account holder(s).
- In some instances it may be necessary to change the account number.

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

ACCOUNT DET	AILS				AX RESIDENC							
ACCOUNT NUMBER:				-	LEASE REFER TO THE N OMPLETING THIS SEC		THE END (OF THIS I	-ORM BEF	-ORE		
NAME(S) OF EXISTING ACCOUNT HOLDERS:				1.	ARE YOU A CITIZEN A RESIDENT OF THE UK		Y	ES	NO (pleas quest	se answer ions 2-5)		
				2	. ARE YOU A CITIZEN C TAX RESIDENT IN TH		PR Y	ES	NO			
I / WE, BEING THE REGIS ACCOUNT, AUTHORISE ACCOUNT HOLDER, DE	THE SOCIETY	Y TO ADD T	THE ADDITIONAL	٥.	If you have answered YES COUNTRY OF TAX RESIDENCY	•	NTIFICATI	ON PLE		E WHY		
FIRST NAMED ACCOUNT HOLDER:					IAXRESIDENCI	TYOIVIDEI	.		NOTTRO	VIDED		
SECOND NAMED ACCOUNT HOLDER:				4	. ARE YOU TAX RESIDE OTHER THAN THE UK		OUNTRY		YES	NO		
THIRD NAMED ACCOUNT HOLDER:				5.	5. If you have answered YES to Q4, please list the countries other than the UK and US of which you are tax resident, if any, together with associated Tax Identification Number or functional equivalent:							
ADDITIONAL A	CCOUN	T HOLI	DER		COUNTRY OF TAX RESIDENCY		NTIFICATI		ASE STAT NOT PRO			
TITLE:	MR/MRS/I	MISS / MS										
SURNAME:												
FORENAMES:												
PERMANENT HOME ADDRESS:				N	IOMINATED A	CCOU	NT FO	R WIT	'HDRA	WALS		
POSTCODE:				A	CCOUNT NAME:							
LENGTH OF TIME AT ADDRESS:	YEARS	MONTHS		А	CCOUNT NUMBER:							
HOME PHONE:*				B	ANK NAME:							
MOBILE PHONE:*				S	ORT CODE:		_		_			
EMAIL ADDRESS:*				В	RANCH:							
DATE OF BIRTH:	DD	ММ	YYYY		EFERENCE IF PPLICABLE:							
MARITAL STATUS:					Please note that we will requi pove, such as a paying-in slip							
OCCUPATION:					ode and account number, or				3,			
NATIONAL INSURANCE NUMBER:				(F	WE HAVE ENCLOSED Please note that if evidence is ithdrawal payments will be d	s not provide						
(If you do not know your Natio Coding, or Tax Return. Otherv					, ,	, ,						
* If we have a home or mobile pl in touch regarding your applicat could include letting you know a	tion or with impor	tant informatio	on about your account. Th	is								
IF YOU ARE AN EXISTING	CUSTOMER	PLEASE STA	TE YOUR ACCOUNT	No:								

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USING YOUR PERSONAL INFORMATION

- 1. Personal information which you supply to us may be used in a number of ways, for example:
 - to open and manage the account for which you are applying
 - for fraud prevention
 - 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.
- 3. We may share your information with, and obtain information about you from, credit reference agencies to check your identity. This will not affect your credit score.
- 4. 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 providers
 - if required to do so by law
 - with your consent
- 5. We may use your information to tell you about other products and services we think may be of interest to you.
- We may monitor or record any communications you have with us in the interests of staff training, customer service and security.
- 7. 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.

TAX RESIDENCY

agreements to share tax information, where applicable, with the tax authorities in other countries. The requirement to collect certain information about each customer's tax arrangement is part of UK legislation and as a financial institution we are legally obliged to collect it. We are asking for your tax residency and tax ID numbers (where applicable) and will record this on our records now, but will only disclose this information to the relevant tax authorities if and when we are required to under UK law. You can find out more, including a list of countries that have signed agreements to

automatically exchange information, along with details about the information being requested, on the OECD automatic exchange of information portal at www.oecd.org

Your tax residence generally is the country in which you live for more than half the year, but rules differ. Further details are available at www.oecd.org

A Taxpayer Identification Number ('TIN') is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an entity and used to identify the individual or entity for the purposes of administering the tax laws of such jurisdiction. Some jurisdictions do not issue a TIN. However, these jurisdictions often utilise some other high integrity number with an equivalent level of identification (a "functional equivalent"). Examples of that type of number include, for individuals, a social security / insurance number, citizen / personal identification / service code / number, and resident registration number.

As a financial institution the Family Building Society is not allowed to give tax advice. If you have any questions on how to complete the Tax Residency section of this form we recommend that you speak to your tax authority (for example, HMRC in the UK) or your tax or legal adviser.

DECLARATIONS

GENERAL

I hereby declare that:

- The sum invested does not belong to a company or other corporate body and will not be held by me as trustee(s) for a company or corporate body.
- I have received the following:
 - Product Features leaflet
 - General Conditions for our Savings Accounts booklet
 - Financial Services Compensation Scheme (FSCS) Information Sheet
 - The leaflet on "How We Use Personal Information"
- I agree to notify the Society of any changes to my personal details as set out overleaf.
- The information supplied on this form is true and correct to the best of my knowledge and belief.
- I acknowledge that the information supplied on this form and information regarding myself and any reportable account may be provided to the tax authorities of thencountry in which the account is maintained and exchanged with tax authorities of another country or countries in which I may be tax resident pursuant to intergovernmental agreements to exchange financial account information.
- I undertake to advise the Society within 30 days of any change in circumstances which affects my tax residency status or causes the information contained in this form to become incorrect, and to provide the Society with a suitably updated selfcertification and declaration within 30 days of such change in circumstances.
- **JOINT SAVERS (NOT TRUSTS OR ESTATES)**

We authorise the Society to permit any of us to operate the account and to give good discharge to the Society on behalf of all of us and agree that upon death the amount vests in the survivor.

We accept that the funds invested are deemed to be owned in equal shares for the purposes of taxation.

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 3.2.1 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 / us 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.

- 3.2.1 "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 / our 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.
- 3.2.2 If the Society merges with any other society, after the date of such merger the "Society" includes such other society.
- 3.3 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.

MARKETING

We would like to tell you about our products, services, and events and those of our
carefully selected partners (a list of which is available on request). We will always
treat your personal details with the utmost care and will never share them with other
companies for marketing purposes. If you give consent this will last as long as you have a
relationship with us. If you agree to us communicating with you for marketing purposes,
please tick the relevant boxes below to confirm how we may contact you.

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Υοι	ı ca	an	uns	ubs	crib	e fror	n mar	keting	at any	time b	y writi	ng to:	Fami	ly B	uilding	Socie	ety

Additional Account Holder: Post Email Phone Text

 $Ebbisham\ House, 30\ Church\ Street,\ Epsom,\ Surrey\ KT17\ 4NL.$

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.

ADDITIONAL ACCOUNT HOLDER SIGNED: DATE: DD MM YY	YYY
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If you need this application form in an alternative format please call our Family Service 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.

Family Building Society is a trading name of National Counties Building Society.