

The way in which we will use your information is set-out in our privacy notice at <https://www.shawbrook.co.uk/privacy-notice/>. If you would like a paper copy of our privacy notice, please telephone our Data Protection Officer on 01277 751 110 or write to us at the address set-out below.

Section 1 – Donor (Please note, we will open the account in the name of the donor)

Title	Surname		
First name(s)	Nationality		
Place of Birth	Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Are you resident for tax purposes in only the UK? (Excludes Channel Islands, Isle of Man and other crown dependencies) Please note that Shawbrook provides savings accounts for individuals who are permanent UK residents and only liable to pay tax in the UK. Should you cease to be you must notify us immediately.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you an existing Shawbrook savings customer	<input type="checkbox"/> Yes <input type="checkbox"/> No	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"/>
Address	Time at home address	years	months
Postcode	If you are eligible under HMRC rules, we can register your account so that you receive your interest without tax taken off. Would you like us to do this?		
If less than 3 years or if the Donor is in residential care please give previous address (You must supply 3 years address history)		National Insurance 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"/>
Previous address	Employment status		
Time at previous address	Annual salary		
years	months	Employer name	
Postcode			

Section 2 – Court Appointed Applicant 1 Details

Court Appointed Applicant 2 Details

Title	Surname	Title	Surname
First name(s)		First name(s)	
Nationality	Place of Birth	Nationality	Place of Birth
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Are you a permanent UK resident and resident for tax purposes in only the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a permanent UK resident and resident for tax purposes in only the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Address	Postcode	Address	Postcode
Home telephone		Home telephone	
Daytime telephone		Daytime telephone	
Mobile telephone		Mobile telephone	
Email		Email	

Section 2 – Court Appointed Applicant 1 Details (Continued)			Court Appointed Applicant 2 Details (Continued)		
Time at home address	years	months	Time at home address	years	months
If less than 3 years, please give previous address (you must supply 3 years address history. Please use section 9 for further details if necessary)					
Previous Address			Previous Address		
Postcode			Postcode		
Time at home address	years	months	Time at home address	years	months
Please indicate which applicant address you would like any correspondence to be sent to: (if not completed all correspondence will be sent to applicant 1)			Applicant 1 <input type="checkbox"/> Applicant 2 <input type="checkbox"/> Applicant 3 <input type="checkbox"/> Applicant 4 <input type="checkbox"/>		
Are you an existing Shawbrook savings customer			Are you an existing Shawbrook savings customer		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Section 2 – Court Appointed Applicant 3 Details			Court Appointed Applicant 4 Details		
Title	Surname		Title	Surname	
First name(s)			First name(s)		
Nationality	Place of Birth		Nationality	Place of Birth	
Date of birth	D	D	Date of birth	D	D
Are you a permanent UK resident and resident for tax purposes in only the UK?			Are you a permanent UK resident and resident for tax purposes in only the UK?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Address			Address		
Postcode			Postcode		
Home telephone			Home telephone		
Daytime telephone			Daytime telephone		
Mobile telephone			Mobile telephone		
Email			Email		
Time at home address	years	months	Time at home address	years	months
If less than 3 years, please give previous address (you must supply 3 years address history. Please use section 9 for further details if necessary)					
Previous Address			Previous Address		
Postcode			Postcode		
Time at home address	years	months	Time at home address	years	months
Are you an existing Shawbrook savings customer			Are you an existing Shawbrook savings customer		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Section 3 – Court Appointed Legal Representative - Acting as Attorney

Company name

Court appointed representative

Address

Postcode

Law Society ID Number

Section 4 – New Account Information Security (Existing customers go straight to Section 5)

We have a commitment to providing a personal and secure service to all of our customers. In order to facilitate the handling of your telephone queries securely, we request that each account holder provides us with a Memorable Word below which will assist members of staff in verifying you or your representative's identity.

Donor

Surname of your favourite teacher at school?

A memorable date (NOT
your date of birth/birth
date of any children)

First name of your favourite historical character?

Power of Attorney

Surname of your favourite teacher at school?

A memorable date (NOT
your date of birth/birth
date of any children)

First name of your favourite historical character?

Section 5 - Your Banking Requirements

(Please ensure you have read the key product information document before completing this section)

Which Savings Account do you wish to open?

(Please quote the product name as it appears on the top of the Key Product Information leaflet)

Product name

Amount that you wish to invest £

Your deposit can be made by either of the following methods:

- 1) **Forward a cheque to us along with your completed application form.** - Cheques are to be made payable to the account holder(s) drawn from the nominated bank account. Please note, interest will only be applied to the account on the third working day following receipt of the cheque.
- 2) **Electronic payments.** - can be made by BACS/CHAPS/Internet transfer directly to your account once you have received these details in your welcome letter.

Cheque deposits must be drawn on your nominated account.

How do you want your interest paid?

Please note, if none or both boxes are ticked, interest will be added to your Shawbrook account

- Add to Donor's Shawbrook Bank Account
- Send to another bank account (please give details)

Bank name

Account name

Sort code

Account number

Section 6 - Identification

Before we can open an account for you, we are required by law to verify the identity of the Donor and Attorney(s)*. We are also required to maintain up to date identification for all of our customers. This means we may require additional identification from time to time, even for customers who have held accounts with the Bank for some time.

*** In addition to a certified copy of the Power of Attorney document, we require at least one form of identification from List A and one (different) document from List B for both the Donor and Attorney(s).**

Donor Identification

List A

- A valid driving licence
- A valid passport
- A Firearms Certificate
- A National identity card
- A letter or document showing entitlement to state or local authority benefits - **dated within the last 12 months**
- A letter or document showing entitlement to a state Pension - **dated within the last 12 months**
- A letter or document showing entitlement to an educational or other form of grant - **dated within the last 12 months**
- A letter or document from HMRC showing notification of your tax code - **dated within the last 12 months**

List B

- A letter or statement from a Residential Care Home*
- A current council tax demand letter or statement, showing the name and address
- A utility statement or bill (mobile phone bills will not be accepted), showing name and address - **dated within the last 3 months**
- A Bank or building society statement showing name and address
- A credit card statement showing name and address

*** Please note, if the Donor resides in a residential care home we will be unable to open an account without a valid letter of confirmation or statement from the residential care home on headed note paper.**

Attorney(s) Identification

List A

Copy of Power of Attorney (please note this must be certified as a true copy of the original)

- A valid driving licence
- A valid passport
- A Firearms Certificate
- A National identity card
- A letter or document showing entitlement to state or local authority benefits - **dated within the last 12 months**
- A letter or document showing entitlement to a state or company pension scheme - **dated within the last 12 months**
- A letter or document showing entitlement to an educational or other form of grant - **dated within the last 12 months**
- A letter or document from HMRC showing notification of your tax code - **dated within the last 12 months**

List B

- A current council tax demand letter or statement, showing the name and address
- HMRC tax notification letter Coding or Demand - **dated within the last 12 months**
- A utility statement or bill (mobile phone bills will not be accepted), showing name and address - **dated within the last 3 months**
- A Bank or building society statement showing name and address
- A credit card statement showing name and address

Section 7 - Signing Rules for Your Account

Please tell us how you require transactions to be authorised on your account. (please tick and name as appropriate)

One Court Appointed Signatory as mentioned in Section 2	<input type="checkbox"/>	Court Appointed Legal Representative as mentioned in Section 3	<input type="checkbox"/>
All Court Appointed Signatories as mentioned in Section 2	<input type="checkbox"/>	Any other combination of signatures (please name below)	<input type="checkbox"/>

Section 8 - Mandate

Please ensure you have read the relevant Mandate below and the Savings Account Terms & Conditions, before signing your application.

- I/We authorise the Bank to act on any instructions concerning the account in accordance with the authorities set out in this application.
- I/We acknowledge that I/We must notify the Bank of any changes to the signatories or otherwise relevant to the operation of the account.
- I/We confirm that this Mandate shall remain in force and the Bank may act upon it until I/We notify the Bank that it is to end or be changed.

Section 9 - Declaration

I/We have read and agree to be bound by the Savings Account conditions as set out in the Key Product Information, Terms & Conditions and this application.

I/We apply for the accounts and services as indicated on this form.

I/We request that you open a Shawbrook Savings Account in the name of the Donor, as indicated in Section 1 of this form.

I/We agree to notify Shawbrook Bank Limited in writing of any changes to the signatory/signatories to the account and understand that any new signatory/signatories will need to be identified before acceptance by the Bank.

I/We authorise Shawbrook Bank Limited to conduct electronic searches in order to verify the identity of the Donor and Attorney(s) and acknowledge/ understand that a record of this search will be kept.

I/We acknowledge that an account cannot be opened until Shawbrook Bank Limited is in receipt of all satisfactory identification.

I/We understand that interest is paid net of tax unless the Donor is entitled to receive interest gross.

I/We declare that the information provided in this form is true and accurate.

I/We have received and have read the Financial Services Compensation Scheme Information Sheet and Exclusions List.

I/We have read the Privacy Notice referred to at the beginning of this application from.

Print name	Print name
Signature (section 1)	Signature (section 2)
Date	Date

Print name	Print name
Signature (section 2)	Signature (section 3)
Date	Date

Checklists

Donor	Attorney checklist
Have you completed section 1 fully? <input type="checkbox"/>	Have you completed section 2-9 fully? <input type="checkbox"/>
Have you completed section 4-9 fully? <input type="checkbox"/>	Have you enclosed a certified copy of the Power of Attorney document and one form of identification from both List A and List B? <input type="checkbox"/>
Have you enclosed a certified copy of the Power of Attorney document and one form of identification from both List A and List B? <input type="checkbox"/>	



Protected



**Shawbrook
Bank**

Financial Services Compensation Scheme Information Sheet

Basic Information about the protection of your eligible deposits

Eligible deposits in Shawbrook Bank Limited are protected by:	The Financial Services Compensation Scheme ("FSCS"). ¹
Limit of protection:	£85,000 per depositor per bank / building society / credit union
If you have more eligible deposits at the same bank / building society / credit union:	All your eligible deposits at the same bank / building society / credit union are "aggregated" and the total is subject to the limit of £85,000. ²
If you have a joint account with other person(s):	The limit of £85,000 applies to each depositor separately. ³
Reimbursement period in case of bank, building society or credit union's failure:	15 working days. ⁴
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 Shawbrook Bank Limited for enquiries relating to your account:	Shawbrook Bank Limited Lutea House, Warley Hill Business Park, The Drive, Great Warley, Brentwood, Essex, CM13 3BE Tel: 0345 266 6611 Email: savings@shawbrook.co.uk
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

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, building society or credit union 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, building society or credit union is unable to meet its financial obligations, depositors are repaid by a Deposit Guarantee Scheme. This repayment covers at maximum £85,000 per bank, building society or credit union. This means that all eligible deposits at the same bank, building society or credit union 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.

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.



Protected



Shawbrook Bank

Financial Services Compensation Scheme Information Sheet

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 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.

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 <http://www.fscs.org.uk>.

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.

Financial Services Compensation Scheme Exclusions List

A deposit is excluded from protection if:

- (1) 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, building society or credit union.
- (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 ⁵
- public authority, other than a small local authority

For further information about exclusions, refer to the FSCS website at www.FSCS.org.uk.

⁵ Deposits by personal pension schemes, stakeholder pension schemes and occupational pension schemes of micro, small and medium sized enterprises are not excluded.