

Savings Application Form

| FOR SOCIETY USE | Date opened | Source | Account Number | Cust No(s) |
|-----------------|-------------|--------|----------------|------------|
| | | | | |

THIS FORM CAN BE COMPLETED ONLINE OR HANDWRITTEN. ALL FORMS MUST BE PRINTED AND REQUIRE A HANDWRITTEN SIGNATURE.

Completed forms should be handed into one of our Relationship Centres or sent to us at Scottish Building Society, SBS House, 193 Dalry Road, Edinburgh, EH11 2EF. Please use BLOCK LETTERS throughout. Complete ALL sections where appropriate. Fields marked with * must be completed.

This form is for individual or joint savings accounts, including Bonds. It should not be used for ISAs or Deposit Accounts.

I/We wish to save in a (type of account)

Source of funds (e.g. salary, savings, investments) Purpose (what are you saving for?) Expected frequency of deposits (e.g. weekly, monthly, one-off)

APPLICANT 1

Title*

Forename(s)*

Surname*

Address*

Postcode*

Number of years at current address* If less than two years, please provide details below of previous addresses in the last two years:

Email Address

Contact Phone No* (Please see MARKETING PREFERENCES)

Alternative Phone No

Date of Birth*

NI Number*

Occupation*

Nationality*

Place of Birth*

APPLICANT 2

Title*

Forename(s)*

Surname*

Address*

Postcode*

Number of years at current address* If less than two years, please provide details below of previous addresses in the last two years:

Email Address

Contact Phone No* (Please see MARKETING PREFERENCES)

Alternative Phone No

Date of Birth*

NI Number*

Occupation*

Nationality*

Place of Birth*

Are you resident for tax purposes only in the UK and a citizen only of the UK? Yes No
If No please complete a separate Tax Residency Self Certification Form

Are you an existing member of Scottish Building Society? Yes No

Preferred contact method: (Please see MARKETING PREFERENCES) Post Email Phone

Are you resident for tax purposes only in the UK and a citizen only of the UK? Yes No
If No please complete a separate Tax Residency Self Certification Form

Are you an existing member of Scottish Building Society? Yes No

Preferred contact method: (Please see MARKETING PREFERENCES) Post Email Phone

IF MORE THAN TWO APPLICANTS, PLEASE COMPLETE AN ADDITIONAL FORM WITH RELEVANT DETAILS

ADDRESS FOR CORRESPONDENCE

(if different from Applicant 1 above)

INTEREST INSTRUCTIONS*

Tick one option only

- Interest to be added to the account
- Interest to be transferred to Scottish Building Society account number:

- Interest to be paid to bank account:

Name of Bank

Account Name

Sort Code

Account No

JOINT ACCOUNTS ONLY

We confirm that authorisation for withdrawals, closures and any account amendments may be signed by:

- ANY ONE SIGNATORY ALL SIGNATORIES
- ANY SIGNATORIES (please specify number)

DECLARATIONS

- 1) I/We understand that the operation of this account will be governed by the terms and conditions for the specific product chosen and by the Savings Terms and Conditions. I/We understand that it is my/our responsibility to read these carefully and to ask for clarification if there is anything in them that I/we do not understand.
- 2) I/We agree to be bound by the Rules of Scottish Building Society and the Assignment of Windfall Benefits detailed in the Savings Accounts Terms and Conditions.
- 3) I/We declare that this account is not held by me/us as a simple trustee for a body corporate or for persons who include a body corporate.
- 4) For joint accounts, I/we understand (a) that the account holder whose details are recorded as 'Applicant 1' is the first-named account holder who will exercise voting rights in respect of this account and (b) that in the event of the death of one of the account holders, the account will pass into the name(s) of the surviving account holder(s) who may continue to operate the account.

USE OF PERSONAL INFORMATION

- 5) I/We understand that by signing this application form I/we confirm that I/we have read **in full** the Customer Privacy Notice of the Society that has been provided to me/us along with this application form.
- 6) I/We acknowledge and understand that in order to process my/our application, the Society will perform identity checks on me/us with one or more Credit Reference Agencies (CRAs) and/or Fraud Prevention Agencies (FPAs) who will supply information, including information from the Electoral Register, for the purpose of verifying my/our identity/identities and my/our address(es). The CRAs and FPAs will record details of the search whether or not this application proceeds. Information may be used for debt tracing and the prevention of money laundering as well as (in the case of the Society) for the management of my/our account. Further checks of this type may be carried out periodically at CRAs and FPAs to manage my/our account and throughout the course of my/our relationship with the Society.

MARKETING PREFERENCES

We (the Society) will **only** use the contact information you supply in this application to notify you of important changes to your account (for example, when we change our Terms & Conditions or the interest rate changes). This is usually done by post, so that you have a paper copy to file and refer to. If you register your accounts with our online service – SBS Online – we may also send you important notices by email.

We may from time to time provide you with updates on new products, services and special offers. Please tick the boxes below to tell us how you would prefer to be contacted. Please note, if you leave these boxes blank you will not receive these updates.

- By Post By Phone* By Email

You can contact us to change your marketing preferences at any time. We value your privacy and will always handle your personal data in accordance with our Privacy Policy which can be viewed online at: www.scottishbs.co.uk/data-privacy-policy

*We will use your Main Contact number.

FINANCIAL SERVICES COMPENSATION SCHEME

- 7) I/We confirm that I/we have read the Financial Services Compensation Scheme Information Sheet. (Copies of this, and our Privacy Notice, are available at all our Relationship Centres and online at www.scottishbs.co.uk)

SIGNATURE(S)

DATE

ALL APPLICANTS MUST SIGN

DATE

You will need to provide two separate forms of ID with your application to verify your name and address. Examples of acceptable ID are a valid UK or EU passport (signed), a valid UK photo card driving licence (full or provisional), recent bank statement or utility bill. Hand in your form along with your ID at your nearest Scottish Building Society Relationship Centre. Alternatively, you can post your completed form and ID to us at:

Scottish Building Society, SBS House, 193 Dalry Road, EDINBURGH EH11 2EF

We recommend using a recorded mail service if you send original ID documents to us. Photocopied ID must be certified.

| FOR SOCIETY USE | Name and address verified by (initials/date) | Source of funds | Checked by (initials/date) |
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