# **BUSINESS SAVINGS APPLICATION FORM**



BUILDING SOCIETY

For use by Limited Liability Partnerships (LLPs), Limited Companies, Public Sector Bodies, Charities, Solicitors, Churches and Credit Unions. (In this Application form, collectively known as 'Organisation/Business' or combination of either).

## This Business Savings Application Form is split into the following sections:

Section 1: Type of account to be opened

Section 2: Organisation/business details

Section 3: Contact details

Section 4: Organisation/business particulars

Section 5: Source of funds

Section 6a: Interest Instructions

Section 6b: Nominated Bank Account

Section 7: Personal details

Part A: Account signatories

Part B: Beneficial Owners

Part C: Names of Directors / Partners

Part D: Names of Senior Managers

Section 8: Self certification for the organisation/business

Section 9: Declarations

Section 10: Signatures

Please complete ALL relevant sections in the application form and write clearly in CAPITAL LETTERS.

What you will need to open an account:

## Limited Companies and Limited Liability Partnerships:

- A certified or true copy of the company's Certificate of Incorporation
- Certified or true copy of photographic identification for all account signatories and beneficial owners. A beneficial owner is any individual who owns or controls more than 25% of the shares or voting rights of the company, any individual who exercises control over the management of the company or any individual who exercises significant influence or control over the company. (please refer to the 'Proving Your Identity' leaflet).
- Names of all Directors and Senior Managers should be recorded in Part C and Part D
- Account signatories, beneficial owners and company directors must complete the Self Certification for Tax Residency Status under the relevant sections
- Account signatories and beneficial owners should read the declarations contained in Section 9 and sign Section 10
- All individuals recorded on the company's PSC Register should be recorded on the application form
- Please specify the number of signatures required to operate the account in Part A of Section 7

#### **Public Sector Bodies:**

- A letter detailing a list of authorised signatories and authorising one or more of those signatories to give instructions on the account
- Certified or true copy of photographic identification for all account holders (please refer to the 'Proving Your Identity' leaflet)
- Names of all Directors and Senior Managers should be recorded in Part C and Part D
- Account signatories must complete the Self Certification for Tax Residency Status under the relevant sections
- Account signatories should read the declarations contained in Section 9 and sign Section 10

#### Charities:

- An original or certified true copy of the Constitution
- HM Revenue & Customs correspondence confirming charity number (for charities only)
- Certified or true copy of photographic identification for all account signatories (please refer to the 'Proving Your Identity' leaflet)
- All sections are to be completed but you are only required to complete Part A of Section 7
- Please specify the number of signatures required to operate the account in Part A of Section 7
- Account signatories should read the declarations contained in Section 9 and sign Section 10

#### Solicitors:

- Certified or true copy of photographic identification for all account signatories (please refer to the 'Proving Your Identity' leaflet)
- Names of all Partners should be recorded in Part C and Part D of Section 7
- Please specify the number of signatures required to operate the account in Part A of Section 7
- Account signatories should read the declarations contained in Section 9 and sign Section 10

#### **Churches:**

- Certified or true copy of photographic identification for all account signatories (please refer to the 'Proving Your Identity' leaflet)
- All sections are to be completed but you are only required to complete Part A of Section 7
- Please specify the number of signatures required to operate the account in Part A of Section 7
- Account signatories should read the declarations contained in Section 9 and sign Section 10

#### **Credit Unions:**

- A letter detailing a list of authorised signatories and authorising one or more of those signatories to give instructions on the account
- Certified or true copy of photographic identification for all account signatories (please refer to the 'Proving Your Identity' leaflet)
- All sections are to be completed but you are only required to complete Part A of Section 7
- Please specify the number of signatures required to operate the account in Part A of Section 7
- Account signatories should read the declarations contained in Section 9 and sign Section 10

Ensure all key account parties including account signatories and beneficial owners have read the 'Use of your information' section in this application form and signed Section 10

1.	TYPE OF ACCOUNT TO BE OPENED				
	Please invest £ in the follo	wing	account		
2.	ORGANISATION/BUSINESS DETAILS  Name of organisation/business (company trading name)				
	Registered name (if different)				
	Nature/purpose of organisation/business [as registered]				
	Please use a tick box to indicate the legal stat	us of	organisation/business		
	Limited Company or Limited Liability Part	nersh	nip Credit Union	Public Sector Body	Solicitor
	Charity or Church		Other (please specify)		
	Company registration number (if applicable)				
	FCA/PRA registration number (if applicable) (6 digits, no letters)				
	Charity number (if applicable)				
	Other number (if applicable)				
	Country of registration				
	The law to which the business/organisation is subject to				

3.	CONTACT DETAILS									
	Organisation/business trading address (No PO Box or c/o addresses) (This is the address that we will send all correspondence to unless you tell us otherwise)	Postcode								
	Previous address (Only complete if the business has been at the current address for less than 3 years. Please list all the previous addresses for the last 3 years. Please attach an additional sheet if required)	Postcode								
	Correspondence address (Please complete only if different from organisation/business trading address shown above)	Postcode								
	Registered address (Please complete only if different from organisation/business trading address shown above)	Postcode								
	Telephone no.	Fax no.								
	Email address	Website								
,		website								
4.	ORGANISATION/BUSINESS PARTICULARS	0								
	How many Directors/Partners/Owners/Trustees are there?									
	How many employees does the business have?									
	How much do you expect to pay into the account on an annual basis?									
How do you expect to make future payments into the account?  (eg cash, cheque, electronic transfers or debit card)										
	What is the total asset size of the business?									
	What was the business turnover last year?									
<b>5.</b>	SOURCE OF FUNDS									
	If you are opening the account with £10,000 or more	please use a tick	box to indicate the source of the money							
	Shareholder funds Sale of asset		Trading income							
	☐ Bank finance ☐ Directors' loan		Other (please specify)							
6a.	INTEREST INSTRUCTIONS									
	Please use a tick box to indicate how you wish the in									
		bank/building so	,							
	Bank/Building society name	,	Account name							
	A/c no.	Payment	ref.							
6b.	NOMINATED BANK ACCOUNT Please provide details of your nominated bank acco	unt. This will be	the account used if you require a withdrawal,							
	as per the account Terms & Conditions.  NB. You must provide a recent bank statement (dated)	l in last 3 months	to verify this account.							
	Bank/building society name		Account name							
	A/c no. Sort code		Payment ref.							

## 7. PERSONAL DETAILS

In this section we require the personal details of all account signatories and beneficial owners. Names of all Senior Managers and Directors should also be recorded in Sections 7C and 7D.

## A. Account signatories

The following officer(s) is/are authorised to sign for withdrawals from the account and that the signature(s) of any \*one/two/three/all of these shall be full and sufficient discharge for all monies withdrawn (\*delete where inapplicable) If the funds invested are for a SIPP or a SASS is the member trustee also required to sign? Yes No

Signatory 1				Signatory 2	2							
Title Mr M	Irs Miss	Ms	Other	Title M	Mr	Mrs		Miss	Ms		Other [	
Forename(s)				Forename(s)								
Surname				Surname								
Date of birth				Date of birth								
Nationality Position held within organisation				Nationality Position held w organisation	rithin							
Permanent home address (inc postcode)				Permanent hon address (inc pos								
		Postco	ode:						P	ostcod	de:	
Previous address if moved within past 3 years				Previous addressif moved within years								
		Postco	ode:						P	ostcod	de:	
Daytime tel no.				Daytime tel no.								
Mobile no.				Mobile no.								
Email Security identifier e.g. mother's maiden name <b>Signature</b>				Email Security identif e.g. mother's mai Signature	ier iden nam	ne _						
Self certification for tax re Are you a citizen and tax re If NO, you will be required	esident of the UK			 Self certification Are you a citize If NO, you will b	n and ta	ax resi	dent o	f the U	K only?	Yes elf cer		No n form
Senior Public Figure				Senior Public Figure								
Are you currently or have y	ou ever been a se	nior public f	igure?	Are you currently or have you ever been a senior public figure?								
Yes No				Yes No No								
*Senior public figure – occu position in the government i subsidiary government orga	in any department,	agency,		*Senior public fi position in the g subsidiary gover	overnm	ent in	any de <sub>l</sub>	partmei	nt, agency	',		
If <b>'YES</b> ' please state your p	osition and dates	in		If <b>'YES</b> ' please	e state	your	positi	on and	l dates in	1		
position				position								
From	From To											
Please name any senior puhave connections with and				Please name ar have connection								
Relationship				Relationship								

Signatory 3								Signatory	4										
Title Mr M	⁄lrs	Miss	Ms	C	ther			Title	Mr		Mrs	5	Miss		Ms	Othe	r		
Forename(s)								Forename(s)											
Surname								Surname											
Date of birth								Date of birth											
Nationality								Nationality											
Position held within organisation								Position held organisation	with	nin									
Permanent home address (inc postcode)								Permanent ho address (inc po											
			Pos	stcode	e:										Posto	ode:			
Previous address if moved within past 3 years								Previous addr if moved withi years											
			Pos	stcode	e:										Posto	ode:			
Daytime tel no.								Daytime tel no	0.										
Mobile no.								Mobile no.											
Email								Email											
Security identifier e.g. mother's maiden name								Security ident e.g. mother's m			ie _								
Signature								Signature			L								
Self certification for tax re Are you a citizen and tax re If NO, you will be required	esident o	f the UK		Yes [ f certi		No [	rm	Self certificat Are you a citiz If NO, you will	zen a	and ta	x res	ident	of the	UK on		es	No tion f	orm	
Senior Public Figure								Senior Public	Fig	ure									
Are you currently or have	you ever	been a se	nior publ	ic figu	ıre?			Are you curre	ntly	or ha	ve yo	u eve	r been a	a seni	or public	figure?			
Yes No								Yes	No										
*Senior public figure - occu				nior				*Senior public								ir			
position in the government subsidiary government orga								position in the subsidiary gov											
If <b>'YES</b> ' please state your p								If <b>'YES</b> ' please			-								
position								position											
From		То						From					То						
Please name any senior p	ublic figu	re you are	related	to or				Please name	any	senio	r pub	lic fiç	gure you	ı are r	elated to	or			
have connections with and	d state th	e nature c	f the rela	ationsl	hip			have connecti	ions	with	and s	tate t	he natu	re of	the relati	onship			
Relationship								Relationship											

## B. Beneficial Owners

A beneficial owner is described as an individual who owns or controls more than 25% of the shares or voting rights of the company, any individual who exercises control over the management of the company or any individual who exercises significant influence or control over the company.

Beneficial owner 1		Beneficial owner 2									
Title Mr Mr	rs Miss Ms Other	Title Mr Mr	rs Miss Ms Other								
Forename(s)		Forename(s)									
Surname		Surname									
Date of birth		Date of birth									
Nationality		Nationality									
Position held within organisation		Position held within organisation									
Permanent home address (inc postcode)		Permanent home address (inc postcode)									
	Postcode:		Postcode:								
Previous address if moved within past 3 years		Previous address if moved within past 3 years									
	Postcode:		Postcode:								
Daytime tel no.		Daytime tel no.									
Mobile no.		Mobile no.									
Email		Email									
Self certification for tax re Are you a citizen and tax re If NO, you will be required t	, – –	Self certification for tax residency status  Are you a citizen and tax resident of the UK only? Yes No If NO, you will be required to complete a separate self certification form									
Senior Public Figure		Senior Public Figure									
Yes No		Are you currently or have you ever been a senior public figure?  Yes No *Senior public figure – occupying or have occupied a senior position in the government in any department, agency, subsidiary government organisation or political party.									
If <b>'YES</b> ' please state your po	osition and dates in	If 'YES' please state your position and dates in									
position		position									
From	То	From To									
	ablic figure you are related to or state the nature of the relationship		blic figure you are related to or state the nature of the relationship								
Relationship		Relationship									

Beneficial owner 3		Beneficial owner 4								
Title Mr Mr	rs Miss Ms Other	Title Mr Mrs	Miss Ms Other							
Forename(s)		Forename(s)								
Surname		Surname								
Date of birth		Date of birth								
Nationality		Nationality								
Position held within organisation		Position held within organisation								
Permanent home address (inc postcode)		Permanent home address (inc postcode)	Permanent home							
	Postcode:		Postcode:							
Previous address if moved within past 3 years		Previous address if moved within past 3 years	_							
D .:	Postcode:		Postcode:							
Daytime tel no.		Daytime tel no.								
Mobile no.		Mobile no.								
Email		Email								
Self certification for tax re Are you a citizen and tax re If NO, you will be required to		Are you a citizen and tax res	Self certification for tax residency status  Are you a citizen and tax resident of the UK only? Yes No If NO, you will be required to complete a separate self certification form							
Senior Public Figure		Senior Public Figure								
Are you currently or have y	ou ever been a senior public figure?	Are you currently or have yo	u ever been a senior public figure?							
Yes No		Yes No No								
*Senior public figure – occuposition in the government is subsidiary government orga		*Senior public figure – occupying or have occupied a senior position in the government in any department, agency, subsidiary government organisation or political party.								
If <b>'YES</b> ' please state your p	osition and dates in	If <b>'YES</b> ' please state your pos	sition and dates in							
position		position								
From	То	From	То							
	ıblic figure you are related to or state the nature of the relationship	Please name any senior public figure you are related to or have connections with and state the nature of the relationship								
Relationship		Relationship								
C. Directors/	<b>Partners</b> ors fall under the definition of a benefi	1	· · · · · · · · · · · · · · · · · · ·							
		_	n and tax resident of the UK only? to complete a separate self certification form.							
Full name		Yes	No							
D. Senior Mai	nagement		1							
Full name		Position in Company	V							
		- I I I I I I I I I I I I I I I I I I I	,							

## 8. SELF CERTIFICATION FOR THE ORGANISATION/BUSINESS This section must be completed before the account can be opened 1. In relation to opening this account, is the organisation/business: a registered UK pension fund Yes No a financial institution (including a professionally managed trust) (if so, please provide your GIIN1 in the box below) Yes (Provide GIIN) No GIIN No: a registered UK charity<sup>2</sup> with trustees (or directors in the case of a charitable company) who are tax resident only in the UK and/or the US If you answered yes to any of the above you do not need to fill out the rest of this section. Please proceed to section 9. In relation to opening this account is the organisation/business: $\gamma_{es}$ (go to Q2) actively trading non-financial institution No non-trading investment body<sup>3</sup> $\gamma_{es}$ (go to Q2) Πo No (please specify and then go to Q2) other Yes 2. Is the organisation/business resident for tax purposes only in the UK4? Yes (go to Q5) No (go to Q3) 3. Please state if the organisation/business is resident for tax purposes in the US? Yes (go to Q5) No (go to Q4) 4. Please state if the organisation/business is resident for tax purposes in any country apart from the UK and US? Yes (go to Q5) No (go to Q6) 5. If the organisation/business is a non-trading investment body, such as a non-professionally managed trust or an investment company, are all of the controlling persons<sup>5</sup> of the organisation/business resident for tax purposes only in the UK? Yes (stop) No (go to Q6) 6. For each Director, Beneficial Owner and Officers authorised to make withdrawals, please record the person's

You must inform Progressive Building Society of any changes in your circumstances, such as moving outside the UK, that may affect this declaration.

details and the country or countries in which they are tax resident, together with any tax reference number(s)/tax identification number(s) using a separate self certification form which can be obtained from your local branch.

## Information

The UK government has, and will be signing, a number of inter-governmental agreements to share tax information, where applicable, with the tax authorities in other jurisdictions. The requirement to collect certain information about each customer's tax arrangement is part of UK legislation and as a financial services company 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.

If you have any questions on how to complete this section we recommend that you speak to your tax or legal adviser.

I/ We undertake to inform Progressive Building Society of any change in circumstances that may affect this declaration.

- <sup>1</sup> If you do not have a GIIN yet, please notify us when you have been issued one. GIINs are required from 1 January 2015.
- 2 If your charity is not a UK one, or the trustees are tax resident in a country other than the UK, the remainder of this form must be completed.
- Includes a non-professionally managed trust.
- <sup>4</sup> Tax residency rules for organisations/businesses vary from country to country, and can be quite complicated. For instance, companies will often be tax resident in the country where they are incorporated and may also be resident in any other countries in which they conduct business, while trusts may need to consider where their trustees are resident. If there is doubt about where an entity is tax resident, professional advice may be required.
- <sup>5</sup> Controlling persons for a trust this includes settlor, trustee, protector (if any) beneficiary or class of beneficiaries. For any other entity, it includes a shareholder and any other natural person exercising ultimate control over the investment.

# **DECLARATIONS** I acknowledge that the information contained in this form and information regarding reportable account(s) may be reported 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 I may be tax resident pursuant to intergovernmental agreements to exchange financial account information with the country/ies in which this account(s) is/are maintained. I certify that I am authorised to sign for \* in respect of all the account(s) to which this form relates. I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete. I undertake to advise Progressive Building Society within 30 days of any change in circumstances which affects the tax residency status of the account holder identified in Part 1 of section 8 of this form or causes the information contained herein to become incorrect including any changes to the information on controlling persons identified earlier, and to provide Progressive Building Society with a suitably updated self-certification and declaration within 30 days of such change in circumstances. Signature: Print name: Date: Please indicate the capacity in which you are signing the form (for example "authorised officer"). If signing under a power of attorney please also attach a certified copy of the power of attorney. Capacity: I understand that the information I have supplied is covered by the full provisions of the terms and conditions relationship with Progressive Building Society setting out governing \* how Progressive Building Society may use and share the information I have supplied. The Building Societies Act permits investment by Corporate Bodies in 'Deposit Accounts' only. All new accounts will be opened as deposit accounts and existing accounts may be re-classified on the same terms and conditions with existing rights unaffected. \*Insert organisation/business name

## Marketing

9.

The Society would like to send you information about products and services which we feel may be of interest to you by post, telephone, email and SMS. This may be through a third party acting on it's behalf. If you agree to being contacted in this way please tick the relevant boxes:

Post Telephone Email SMS

You can withdraw this consent at any time by contacting your branch.

### Use of your information

You will be required to prove your identity as the account signatory or beneficial owner when opening a new account. The Society will undertake a search with a credit reference agency or a data reference agency for this purpose. They will supply us with information, including information from the Electoral Register, for the purpose of verifying your identity. A record of the search will be retained. The search will not be seen or used by lenders to assess your ability to obtain credit. This information may also be used for the prevention of money laundering.

If the Society cannot check your identity from the information you provide then we will require you to provide two items of documentation as proof of your identity. Further information on the agency searches and a list of acceptable documents for identification purposes can be found in the leaflet 'Proving Your Identity' which may be accessed at **theprogressive.com**.

The Society will rely on the following legal basis for processing your personal data . The processing is necessary for:

- the performance of a contract with you or to take steps to enter into a contract;
- compliance with a legal obligation;
- the purposes of legitimate interests pursued by us or a third party.

#### **Account Declarations**

By signing this application form on behalf of the organisation/business you are confirming that you:

- have received the Summary Box which includes the terms and conditions of the account;
- have received the Business Savings General Terms and Conditions;
- have read the section 'Use of your information' and you agree to your information being used in this way;
- have reviewed and agree to the use and disclosure of information as outlined under the Data Protection legislation section of the Savings Service Agreement;
- have received a copy of the Financial Services Compensation Scheme information sheet;
- agree to the use of your personal information to enable the Society to provide payment services, such as electronic payments, to and from the account. You may withdraw your consent by closing the account.

This is the standard customer agreement upon which the Society intends to rely. For your own benefit and protection carefully read this information before signing this application form as these documents form the basis of the relationship between you and Progressive Building Society. If any of the points are unclear please ask for further information.

A copy of the Society's Summary Financial Statement may be accessed at **theprogressive.com**.

#### 10. SIGNATURES

(account signatories and beneficial owners must sign)

Name	Position (beneficial owner etc)	Signature	Date

## **FOR BRANCH USE ONLY**

Account no.		Date opened		
	Customer no.	ID produced		eID result
Organisation/Business				
Signatory 1				
Signatory 2			$\perp$	
Signatory 3				
Signatory 4				
Beneficial owner 1			$\rightarrow$	
Beneficial owner 2			_	
Beneficial owner 3 Beneficial owner 4			+	
Beneficial owner 4				
Limited Companie	s, LLPs		Ple	ase Tick
Certificate of Incor	poration			
Verification of iden	tity for all accour	nt holders and Beneficial Owners		
Directors' details				
Senior Manageme	nt details			
Tax residency decl Beneficial Owners	aration complet	e for for all account holders and		
Account si	gnatories			
Beneficial	owners			
Directors				
Companies House	check			
Public Sector Bod	iaa		DIc	ase Tick
Confirmed as Publ			1 10	use rick
Verification of iden		 es		
Tax declaration co				
Charitian			DIC	ase Tick
Charities Original or certifie	d true conv of th	no Constitution	Fle	ase rick
HM Revenue corre	. ,		+	
Verification of iden			+	
Tax declaration co			+	
	·	ties Commission website		
Solicitors			Ple	ase Tick
Verification of iden				
Tax declaration co		<del>-</del>		
Legal existence co	nfirmed - Law S	Society of NI website		
Churches			Ple	ase Tick
Confirmation of ex	istence with app	propriate head quarters		
Verification of iden	tity of signatorie	es	$\perp$	_
Tax declaration co	mplete for accou	unt signatories		
Credit Unions			Ple	ase Tick
Letter detailing au	thorised signato	ories		
Verification of iden	tity of signatorie	es		
Tax declaration co	mplete for accou	unt signatories		
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Cashiers initials [

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HEAD OFFICE —
Progressive House, 33/37 Wellington Place, Belfast BT1 6HH. Tel: (028) 9024 4926 Fax: (028) 9033 0431
Progressive Building Society is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Financial Services Register Number 161841. All calls may be recorded and/or monitored. The Society is a member of the Building Societies Association. The Society has an internal complaints procedure. Complaints that cannot be resolved may be referred to the Financial Ombudsman Service, Exchange Tower, London E14 9SR (tel: 0800 023 4567 or 0300 123 9123) email: complaint.info@financial-ombudsman.org.uk. The Society is a subscriber to the Financial Services Compensation Scheme. Further details are available on request from the Society or by visiting our website: theprogressive.com or the Financial Services Compensation Scheme website: fscs.org.uk.  Unless otherwise stated, the law of Northern Ireland will apply and all communications and documentation in relation to this contract will be in English. You submit to the non-exclusive jurisdiction of the Northern Irish Courts.