

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

THIS FORM CAN BE COMPLETED ONLINE BY TYPING YOUR DETAILS IN THE RELEVANT FIELDS, OR HANDWRITTEN. COMPLETED FORMS MUST BE PRINTED AND REQUIRE A HANDWRITTEN SIGNATURE. PLEASE NOTE OUR ID REQUIREMENTS AT THE BOTTOM OF THE FORM.

Completed forms and ID can be scanned and emailed to us at members@scotbs.co.uk or sent to Scottish Building Society, SBS House, 193 Dalry Road, EDINBURGH EH11 2EF. You can also hand in your form along with your ID at your nearest Scottish Building Society Relationship Centre.

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	£ <input type="text"/>	in a <input type="text"/>	(type of account)
Source of funds (e.g. inheritance, sale of property, shares, redundancy, pension lump sum)	<input type="text"/>	Purpose (what are you saving for?)	<input type="text"/>
			Expected frequency of deposits (e.g. weekly, monthly, one-off)

APPLICANT 1

Title*	<input type="text"/>
Forename(s)*	<input type="text"/>
Surname*	<input type="text"/>
Address*	<input type="text"/>
Postcode*	<input type="text"/>
Number of years at current address*	<input type="text"/> If less than two years, please provide details below of previous addresses in the last two years: <input type="text"/>

Number of years at previous address*	<input type="text"/>
Email Address	<input type="text"/>
Contact Phone No* (Please see MARKETING PREFERENCES)	<input type="text"/>
Alternative Phone No	<input type="text"/>
Date of Birth*	<input type="text"/>
Country of Residence	<input type="text"/>
Occupation*	<input type="text"/>
Nationality*	<input type="text"/>
Place of Birth*	<input type="text"/>

Are you a citizen only of the UK?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you tax resident only in the UK? (If No, please complete a separate Tax Residency Self Certification Form)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you an existing member of Scottish Building Society? (Please see MARKETING PREFERENCES)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Preferred contact method:	<input type="checkbox"/> Post	<input type="checkbox"/> Email	<input type="checkbox"/> Phone

APPLICANT 2

Title*	<input type="text"/>
Forename(s)*	<input type="text"/>
Surname*	<input type="text"/>
Address*	<input type="text"/>
Postcode*	<input type="text"/>
Number of years at current address*	<input type="text"/> If less than two years, please provide details below of previous addresses in the last two years: <input type="text"/>

Number of years at previous address*	<input type="text"/>
Email Address	<input type="text"/>
Contact Phone No* (Please see HOW WE COMMUNICATE WITH YOU)	<input type="text"/>
Alternative Phone No	<input type="text"/>
Date of Birth*	<input type="text"/>
Country of Residence	<input type="text"/>
Occupation*	<input type="text"/>
Nationality*	<input type="text"/>
Place of Birth*	<input type="text"/>

Are you a citizen only of the UK?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you tax resident only in the UK? (If No, please complete a separate Tax Residency Self Certification Form)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you an existing member of Scottish Building Society? (Please see MARKETING PREFERENCES)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Preferred contact method:	<input type="checkbox"/> Post	<input type="checkbox"/> Email	<input type="checkbox"/> Phone

ADDRESS FOR CORRESPONDENCE

(if different from Applicant 1 above)

INTEREST INSTRUCTIONS*

Tick one option only

Interest to be added to this account

Interest to be transferred to a different Scottish Building Account (provide the account number below, the account must be in your name):

Interest to be paid to your nominated UK bank account

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.
- 5) I/we understand that the nominated bank account given on this form will apply across all the savings accounts I/we hold with Scottish Building Society in my/our name. (For example, if you have several sole savings accounts, the nominated bank account given on this form will apply across all your sole accounts. If you are opening a joint savings account, the nominated bank account given on this form will apply to all savings accounts held with Scottish Building Society in those joint names.)

USE OF PERSONAL INFORMATION

- 6) 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.
- 7) 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.

HOW WE COMMUNICATE WITH YOU

We will only use the contact details you provide us to contact you about your account or your membership. We may need to notify you of important information relating to your account, for example where we need to inform you of changes to your interest rates or to the terms and conditions. These will be sent to you via email or by post.

Keeping you informed

We would also like to tell you about new products & services that we think might benefit you. These include updates to our member benefits, products or services or our member-only events or promotions.

Please tell us how you would like to receive this information:

Email (please enter your email address in the APPLICANT'S DETAILS section overleaf)

Post

Sometimes we might phone you, for example to invite you to an event. Please let us know if you are happy to be contacted via phone: Yes No
We will use your Main Contact number.

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

FINANCIAL SERVICES COMPENSATION SCHEME

- 8) 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)



ALL APPLICANTS MUST SIGN



DATE

DATE

WE NEED PROOF OF IDENTIFICATION TO OPEN YOUR ACCOUNT

You can find out what to send us and how to certify your copies (if required) by visiting www.scottishbs.co.uk/help-and-support/proving-your-identity. For postal applications we need a photocopy of your passport or driving licence, please do not send in originals. We use an electronic verification system to verify the documents and/or information you provide. If we can't confirm your identity in full, we'll contact you and ask you for some additional documents – we'll explain what we need if we contact you. Please add your passport and/or driving licence numbers below:

Passport number

Driving licence number

You have 3 options for sending your completed application form and ID to us:

1. Email your scanned application form and ID to us at: members@scotbs.co.uk
2. Post your application form and ID to us at: Scottish Building Society, SBS House, 193 Dalry Road, EDINBURGH EH11 2EF
3. If you apply face-to-face in any of our Relationship Centres, you'll need to provide two separate forms of ID when you visit us.

For postal applications, your first deposit to the account must be made by cheque and must be issued from a UK Bank or Building Society Account in your name.

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