

GENERAL SAVINGS ACCOUNT APPLICATION FORM

Please complete all sections in BLOCK CAPITALS.
Please circle preferred options that are in BOLD TYPE.
Please TICK the boxes provided where applicable.

I/We enclose £ To open the following account type:

Source of funds for opening deposit:

FIRST NAMED ACCOUNT HOLDER DETAILS

SECOND NAMED ACCOUNT HOLDER DETAILS

Cust No. (BBS use only)

Title (MR/MRS/MS/MISS)

Surname(s)

Forename(s)

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Occupation

Email address

Permanent residential address

Postcode

Telephone Home

Business

Mobile

Previous address (if less than 3 years at current address)

Postcode

Cust No. (BBS use only)

Title (MR/MRS/MS/MISS)

Surname(s)

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Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Occupation

Email address

Permanent residential address

Postcode

Telephone Home

Business

Mobile

Previous address (if less than 3 years at current address)

Postcode

Account number:

Account name:

INTEREST INSTRUCTIONS

Add to account **ANNUALLY / MONTHLY*** Pay to other Bank or Building Society Account **ANNUALLY / MONTHLY***

Transfer to Beverley Building Society Account No. **ANNUALLY / MONTHLY*** Sort Code:

Account Number:

Account Name:

* The monthly interest option is available at a reduced rate. Please ask for more details.

WITHDRAWAL INSTRUCTIONS

The account holder/s agree that all or part of the money in this account may be withdrawn on the authority of: (Please tick one option)

Only one signature **OR** Any one signature **OR** All signatures jointly **OR** Any ____ (enter number) signatures

AGREEMENT TO ASSIGN

IF YOU HAD A SHARE ACCOUNT WITH THE SOCIETY ON 30 NOVEMBER 2000 AND HAVE KEPT A SHARE ACCOUNT EVER SINCE THAT DATE, OR IF YOU HAVE A MORTGAGE WITH THE SOCIETY AT TODAY'S DATE, THE WORDING IN PARAGRAPHS 1 - 3 BELOW DOES NOT APPLY TO YOU. HOWEVER, IT MUST NOT BE DELETED. PLEASE LIST YOUR SHARE/MORTGAGE ACCOUNT NUMBER(S)

1. By applying to open a share account on or after 1 December 2000, I/we agree with the Society and the Charities Aid Foundation ("the CAF") that I/we will assign to the CAF (or to any charity(ies) nominated by it or by the Society under the provisions of a deed dated 30 November 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 below). This obligation will not apply to me/us if I/we 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/us.

I/we understand that neither the Society nor the CAF will release me/us from this agreement or vary its terms and I/we will continue to be bound by the above condition even if the Society decides at some time in the future (and announces any such decision by press release or otherwise) 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.

2. (a) "Relevant conversion benefits" means any benefits to which I/we 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 takeover) 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 as set out in the list available from the Society's Secretary). "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 takeover.

(b) If the Society merges with any other society, after the date of such merger the "Society" includes such other society,

3. A list of the classes of persons which the Society currently wishes to be excluded from the obligation 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 Secretary at its principal office.

DATA PROTECTION

Beverley Building Society is committed to protecting your privacy and keeping your personal information secure. When you register an enquiry, or complete an application form you are authorising the Society to collect your personal information to process and operate your account(s). The Society does not share your data with any other organisation for marketing or promotional purposes. Our Privacy Notice is available on our website or you can ask us to send you a copy. <https://beverleybs.co.uk/privacy-notice>

Customer Needs and Preferences - We recognise that our customers might have different needs, this could be due to health, life events, resilience, or capability if you require any support operating your account with us, please indicate here.....

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THE ACCOUNT HOLDER/S DECLARE THAT:

- They are aware that the type of account they are opening is a share account and they understand that only the first named account holder will be initially recorded in the Society's Records as the Representative Joint Shareholder for the account. Subject to the Rules of the Society, only the Representative Joint Shareholder will have voting rights.
- Any share(s) acquired by the account holder/s under this account will not be held by the account holder/s as a bare trustee for a body corporate, or for persons who include a body corporate.
- They agree to be bound by the conditions relating to the Agreement to Assign as described above.
- They confirm they have read the section entitled Data Protection above. By signing this form, they consent to the uses and disclosures of information listed.
- They are resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or they are married to, or in a civil partnership with, a person who performs such duties. The account holder/s will inform Beverley Building Society within 30 days if they cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.
- They confirm receipt of the FSCS information sheet.
- They have UK Citizenship.

Please note we are unable to open accounts for non-UK tax residents or non-UK citizens.

When you open an account with us, under regulations for prevention and detection of financial crime, we need to verify your name and address. We may use an electronic verification system to do this. Alternatively, we may ask you to provide physical forms of identification. Please refer to the separate sheet entitled 'Verifying Your Identity' for further details.

For your own benefit and protection, you should read our Savings Accounts marketing literature, General Savings Terms and Conditions, the Rules of the Society, any subsequent Terms and Conditions and Rules for the time being in force and the declarations and authorities above carefully before signing, as these form our standard client agreement upon which we intend to rely. Copies of these documents can be found on our website (www.beverleybs.co.uk) or are available upon request. If you do not understand any point please ask for further information.

I/we declare that this application has been completed to the best of my/our knowledge and belief.

FIRST NAMED ACCOUNT HOLDER DETAILS

Signature:

Printed:

Date:

If you are **NOT** signing this form as an account holder, please indicate below the capacity in which you are signing:

Parent/Guardian Power of Attorney * Deputy

Other (.....) *

SECOND NAMED ACCOUNT HOLDER DETAILS

Signature:

Printed:

Date:

If you are **NOT** signing this form as an account holder, please indicate below the capacity in which you are signing:

Parent/Guardian Power of Attorney * Deputy

Other (.....) *

* If you are signing this form in the capacity of a Power of Attorney or any other third party, please **ALSO** fill in our separate form entitled 'Third Party Registration Form'

For Office Use Only

Cust No: Date opened: <input type="checkbox"/> Existing BBS member <input type="checkbox"/> Tick if face to face <input type="checkbox"/> Electronic verification PASS <input type="checkbox"/> Electronic verification REFER Diary No:	Cust No: Date opened: <input type="checkbox"/> Existing BBS member <input type="checkbox"/> Tick if face to face <input type="checkbox"/> Electronic verification PASS <input type="checkbox"/> Electronic verification REFER Diary No:
Customer(s) informed of: <input type="checkbox"/> Any changes to FSCS scheme <input type="checkbox"/> Any changes to interest rate <input type="checkbox"/> Other (.....)	
Input by: Process date:	Checked by: Date: