

Savings application form (Solicitor deposit)

This form is to apply for a Solicitor client account.

Newbury Building Society requires a fully completed form before opening your account.

Please use BLOCK CAPITALS.



Newbury
Building Society

SOCIETY USE ONLY:

Account number

Product type

Opening balance £

Personal cheque

Date

Main holder

Name (max 45 characters)

Address

Postcode

Daytime contact number

Guidance - Solicitor client accounts

Client name 'client of' firm name e.g. Mr John Smith client of Jones Smith LLP

Firm's registered address

Client details

Title

Forename(s)

Surname

Current home address

Postcode

Evening tel

Mobile tel

Daytime tel

Email

Date of birth

Country and town of birth

Nationality/Citizenship

Occupation

Marital status

Are you currently, or have you ever been party to a Newbury Building Society account?

Yes No

If you know your account number, enter it here

Do they have a National Insurance number? Yes No

If yes, please detail

Countries resident for tax purposes

Do they have a Tax Identification number for another country?

Yes No

If yes, country and number

Title

Forename(s)

Surname

Current home address

Postcode

Evening tel

Mobile tel

Daytime tel

Email

Date of birth

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Yes No

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Signatory 1

Title _____

Forename(s) _____

Surname _____

Current home address _____

Postcode _____

Evening tel _____

Mobile tel _____

Daytime tel _____

Email _____

Date of birth _____

Country and town of birth _____

Nationality/Citizenship _____

Occupation _____

Marital status _____

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If you know your account number, enter it here _____

Do they have a National Insurance number? Yes No

If yes, please detail

Countries resident for tax purposes _____

Do they have a Tax Identification number for another country? Yes No

If yes, country and number _____

I declare that:

- I have verified the identity of the client, in accordance with current JMLSG Guidance Notes.
- I have received the Society's Savings terms and conditions and Product Conditions relating to Solicitor Deposit account. I have made these available to the client.

Signatory 2

Title _____

Forename(s) _____

Surname _____

Current home address _____

Postcode _____

Evening tel _____

Mobile tel _____

Daytime tel _____

Email _____

Date of birth _____

Country and town of birth _____

Nationality/Citizenship _____

Occupation _____

Marital status _____

Are you currently, or have you ever been party to a Newbury Building Society account? Yes No

If you know your account number, enter it here _____

Do they have a National Insurance number? Yes No

If yes, please detail

Countries resident for tax purposes _____

Do they have a Tax Identification number for another country? Yes No

If yes, country and number _____

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The Financial Services Compensation Scheme (FSCS)

I/we acknowledge receipt of the FSCS Information Sheet.

Signatory 1	<input style="width: 95%;" type="text"/>	Signed	<input style="width: 95%;" type="text"/>
Signatory 2	<input style="width: 95%;" type="text"/>	Signed	<input style="width: 95%;" type="text"/>

Consent to receive marketing communications (only applicable to those aged 18+)

From time to time Newbury Building Society would like to send you details of our products and services that may be of interest to you. We will always treat your personal details in accordance with our privacy notice and will never share them with other companies without your explicit consent or other legal grounds for processing.

Signatory 1

Please let us know if you would like us to contact you or not by selecting one of the options below:

- Yes please, I'd like to hear about the Society's products and services.
- No thanks, I don't want to hear about the Society's products and services.

If you've said yes, please confirm how you would prefer us to contact you (tick all that apply):

- By email By Post

If you wish to stop receiving marketing communications from us, you will be able to do so at any time by:

- emailing marketing@newbury.co.uk;
- visiting our marketing preferences page through the links available in our emails and website footer;
- calling us on 01635 555700;

Signatory 2

Please let us know if you would like us to contact you or not by selecting one of the options below:

- Yes please, I'd like to hear about the Society's products and services.
- No thanks, I don't want to hear about the Society's products and services.

If you've said yes, please confirm how you would prefer us to contact you (tick all that apply):

- By email By Post

- visiting any of the Society's branches;
- post to Newbury Building Society, 17 Bartholomew Street, Newbury, RG14 5LY;
- following the unsubscribe link contained in our email communications.

AGM communication preferences

If you are a qualifying member, the Society has a statutory duty to give you notice of its Annual General Meeting. Please indicate below how you would prefer to receive this notice:

Signatory 1 By email By post

Signatory 2 By email By post

You can change your preference or contact details at any time by contacting us using any of the methods in the 'Consent to receive marketing communications' section above. If you have already advised us that you wish to receive the notice by email, we will continue to send it by this method unless you advise us otherwise.

Signatory 3

Title

Forename(s)

Surname

Current home address

Postcode

Evening tel

Mobile tel

Daytime tel

Email

Date of birth

Country and town of birth

Nationality/Citizenship

Occupation

Marital status

Are you currently, or have you ever been party to a Newbury Building Society account? Yes No

If you know your account number, enter it here

Do they have a National Insurance number? Yes No

If yes, please detail

Countries resident for tax purposes

Do they have a Tax Identification number for another country? Yes No

If yes, country and number

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Signatory 4

Title

Forename(s)

Surname

Current home address

Postcode

Evening tel

Mobile tel

Daytime tel

Email

Date of birth

Country and town of birth

Nationality/Citizenship

Occupation

Marital status

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If you know your account number, enter it here

Do they have a National Insurance number? Yes No

If yes, please detail

Countries resident for tax purposes

Do they have a Tax Identification number for another country? Yes No

If yes, country and number

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Signatory 4 By email By post

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Payment of interest - I/we wish the interest to be:

<input type="checkbox"/> Added to the account	Account no.	<input type="text"/>
<input type="checkbox"/> Transferred to an existing Newbury Building Society account	Account no.	<input type="text"/>
<input type="checkbox"/> Paid into another UK Bank or Building Society account	Account no.	<input type="text"/>
Name of Bank/Building Society <input type="text"/>	Sort code	<input type="text"/>
Account holder name <input type="text"/>	Reference	<input type="text"/>

Withdrawal instructions All signatories to sign Any 2 to sign Either to sign

Declaration - ALL ACCOUNT HOLDERS MUST SIGN

I (each of us if more than one is applying) declare that:

- I understand that the Society will rely upon the Savings terms and conditions the Product Conditions and the information contained on this form. I will ask for clarification on any point I do not understand before signing this form.
- The information supplied on this form is true and correct to the best of my knowledge and belief.

We comply with the General Data Protection Regulation (GDPR) and any other

applicable data protection legislation. Our Privacy Notice sets out the basis on which any personal data we collect from you, or that you provide to us, will be treated.

By signing this declaration, you are confirming that you have received a copy of our Privacy Notice. The notice may be updated from time to time. If we are going to use your personal data for any new purposes, we will bring any changes to the Privacy Notice to your attention.

The latest version is available via our website at www.newbury.co.uk/privacy-notice/, in any of our branches or by calling us on 01635 555700.

Signatory 1	<input type="text"/>	PRINT NAME	Signed	<input type="text"/>	SIGNATURE	Date	<input type="text"/>
Signatory 2	<input type="text"/>	PRINT NAME	Signed	<input type="text"/>	SIGNATURE	Date	<input type="text"/>
Signatory 3	<input type="text"/>	PRINT NAME	Signed	<input type="text"/>	SIGNATURE	Date	<input type="text"/>
Signatory 4	<input type="text"/>	PRINT NAME	Signed	<input type="text"/>	SIGNATURE	Date	<input type="text"/>

SOCIETY USE ONLY:**Main holder****Client details**

Group 1

Group 1

Group 1

Group 2

Group 2

Group 2

EID result

EID result

Signatory 1**Signatory 2****Signatory 3****Signatory 4**

Customer number

Customer number

Customer number

Customer number

Group 1

Group 1

Group 1

Group 1

Group 2

Group 2

Group 2

Group 2

EID result

EID result

EID result

EID result

Branch

Opened by

Checked by

Date