Personal Share Account Application

For use by private individuals based in Wales only. Corporate bodies should ask for the appropriate form.

Important: Before completing this form please read the specific conditions for each and every account you are opening and the 'General Terms and Conditions for the operation of Savings Accounts' leaflet. These provide important information about your account with the Society. In addition please read the form 'Proving Your Identity'.
Please complete this form using BLOCK CAPITALS and then read and sign the Declaration on the reverse.
If you require any assistance in completing this form, please call our savings department on 01792 739130.

SWANSEA BUILDING SOCIETY

www.swansea-bs.co.uk

For Society use only	Account Number										

Account information

I/We would like to open the following account(s)

☐ Personal Premier ☐ 90 Day Notice ☐ Regular Saver
☐ First Adult Saver ☐ Fixed Rate Bond

I would like to open the account with	£		Make cheques payable to the name of the account holder

Please indicate the number of signatures required for each withdrawal	

Account Holders

Where there are more than two Account Holders of the proposed account please request the 'Additional Account Holders' form.

First Applicant

Are you an existing customer? (Y/N)			
Title (Mr/Mrs/Etc.)			
Forename(s) in full			
Surname			
Current Address			
Postcode		Time at address	Y Y M M
Previous Address *Only complete if you have lived at current address for less than 3 years*			
		Postcode	
Date of Birth	D D / M M / Y Y Y Y		
Home Phone (+ Code)			
Work Phone (+ Code)			
Mobile Phone (+ Code)			
email Address			
Nationality			
Are you resident for tax purposes anywhere other than the UK? (Y/N)			
Are you a citizen only of the UK? (Y/N)			
Occupation			
Employer			
Reason for opening the account			
Source of opening deposit/future funds			
Expected frequency of account use			

Second Applicant

Are you an existing customer? (Y/N)			
Title (Mr/Mrs/Etc.)			
Forename(s) in full			
Surname			
Current Address			
Postcode		Time at address	Y Y M M
Previous Address *Only complete if you have lived at current address for less than 3 years*			
		Postcode	
Date of Birth	D D / M M / Y Y Y Y		
Home Phone (+ Code)			
Work Phone (+ Code)			
Mobile Phone (+ Code)			
email Address			
Nationality			
Are you resident for tax purposes anywhere other than the UK? (Y/N)			
Are you a citizen only of the UK? (Y/N)			
Occupation			
Employer			
Reason for opening the account			
Source of opening deposit/future funds			
Expected frequency of account use			

Statement Instructions and Product Services (only applicable to Personal Premier Accounts)

I/We require statement(s): (please tick just one)

☐ Monthly ☐ Quarterly ☐ Six monthly ☐ Annually

I/We require the following product service: (please tick just one)

☐ A passbook ☐ A chequebook *(only available for Personal Premier Accounts that have a minimum opening/operating balance of £5,000)*

Interest instructions

I/We request that the interest be: (please tick) ☐ Added to the account* ☐ Transferred to a bank account* *(enter details below)*

**** NB Interest on a 90 Day account must be paid into a separate account***

☐ Transferred to a Swansea Building Society account

SBS Account Number											

☐ Transfer to other Bank/non SBS Building Society account

Name of Bank			
Bank Sort Code	/ /	Account Number	
Name of Account Holder		Reference number (if applicable)	

Declaration

I declare and agree that:

(a) I confirm that I have read: (i) any marketing literature relating to the account I am opening and (ii) the 'General Terms and Conditions for the operation of Savings Accounts' and agree to be bound by them and the Rules of the Society (copies of which are available upon request) and any subsequent Terms and Conditions and Rules for the time being in force.

(b) The money being invested in this account belongs to the named applicant(s).

Your personal information

(c) For the purpose of data protection legislation, the Society is the organisation responsible for the processing of my personal information. I understand that I have various rights in relation to my personal information, including the right to request a copy of the details held about me by the Society and, where necessary, for inaccurate information about me to be corrected.

(d) I understand that my personal data may be processed for the purposes of: opening and administering my account, contacting me where necessary, fraud prevention and detection, legal and regulatory compliance, marketing and market research, statistical analysis and after closure of the account for statutory, regulatory, accounting, auditing or other lawful requirements. Further details of how the Society will handle my personal information can be found at: **www.swansea-bs.co.uk/privacy-information**

I understand that I can change my mind at any time and request NOT to receive any details about the Society's products and services by contacting the Society at 11/12 Cradock Street, Swansea SA1 3EW, 01792 739100 or by e-mailing **dpo@swansea-bs.co.uk**.

The Financial Services Compensation Scheme (FSCS)

☐ I/We confirm receipt of the information sheet relating to The Financial Services Compensation Scheme

(First Applicant) Signed		Date	D D / M M / Y Y Y Y
(Second Applicant) Signed		Date	D D / M M / Y Y Y Y

For Society use only

Account Title			
Chequebook Title (where appropriate)		Scanned	
Account Number		Date	D D / M M / Y Y Y Y
Customer Number(s)		Initials	