## **Application Form**

### Designated Client Account

# 处 Santander

**BUSINESS BANKING** 

#### Please fill in the form using BLOCK CAPITALS and black ink. Tick any boxes which apply.

Santander is able to provide literature in alternative formats. The formats available are: large print, Braille, audio tape and PC disk. If you would like to register to receive correspondence in an alternative format please give us a call and ask for a 'Preferred Communication Request' form. 1 Business details **Business** name Address Existing account number Postcode Sort code 2 Account details Account type Payment of interest Interest will be paid net of income tax. If you want to receive Client Business Reserve Account 2 interest gross on the account, and you think you're eligible, Client Business Bank Account please read the declaration in section 4 and tick the box Do you need a cheque book? How often would you like interest to be paid? Yes No Monthly Account name (e.g. client a/c for Mr J Smith) Annually (only available for Client Business Reserve Account 2) maximum 40 characters Details of the account on which the cheque/electronic transfer is drawn are: Sort code Account number Please open this account with: (i) The enclosed cheque (payable Amount to transfer £ to the business name or client £ name) for (ii) An electronic payment of £ (to be initiated by the business) 3 Designated client details Title Other names known by or commonly used (not nicknames). (Please include title, first name and surname) Mr Mrs Ms Miss Other Address (address of firm is acceptable) First name Middle name(s) Postcode Surname Nationality Previous surname (if applicable) Second nationality (if dual nationality) Date of birth Country of residence DM

#### 4 Declaration

For use by businesses which are:

- 1. A credit or financial institution which is an authorised person, or
- 2. Auditors, insolvency practitioners, external accountants, tax advisers or independent legal professionals, and
- 3. Are supervised by one of the following bodies:
  - a) Financial Services Authority
  - b) Association of Chartered Certified Accountants
  - c) Council for Licensed Conveyancers
  - d) Faculty of Advocates
  - e) General Council of the Bar
  - f) General Council of the Bar of Northern Ireland
  - g) Institute of Chartered Accountants in England and Wales
  - h) Institute of Chartered Accountants in Ireland

We will operate the new account according to the instructions and declarations in the original application with the account number shown in section 1 overleaf, which is subject to the relevant Terms and Conditions from time to time in force.

In all cases where we have asked for interest to be paid gross, we are eligible under Inland Revenue regulations and the account(s) is/are not a relevant deposit as defined in Section 481 of the Income and Corporation Taxes Act 1988.

#### To be completed by all authorised signatories

- i) Institute of Chartered Accountants of Scotland
- j) Law Society
- k) Law Society of Scotland
- I) Law Society of Northern Ireland
- We consent to Santander UK plc at their discretion, relying on any due diligence measures carried out by us on any beneficial owners/clients associated with this application. Tick to confirm
- We agree to provide any information on any beneficial owners/ clients that we have obtained, when applying the due diligence measures, to Santander UK plc, on demand, up to a period of six years following closure of this account and/or your relationship with Santander. Tick to confirm
- We confirm that the due diligence measures carried out by us on any beneficial owners/clients associated with this application meet the requirements of the latest money laundering regulations. Tick to confirm

The points below apply to all business types.

- We confirm the validity of the Account operators.
- The information contained in this Application is true and correct.
- Santander UK plc is duly authorised by the organisation to operate the Account(s).

Full name	Full name
Signature	Signature
Position Date D D M M Y Y Y	Position Date D D M M Y Y Y Y
Full name	Full name
Signature	Signature
Position Date	Position Date
5 Identification	
Where you do not consent to us placing reliance on you to carry out the required due diligence on your client or you are not one of the business types listed in section 4, please provide the identification detailed below on the designated client. Please supply an unaltered black and white copy from each of the two lists below. Please tick to indicate which ONE from the list you	List B Bank statement (not internet printed) that is less than three months old. Credit card statement (not internet printed) that is less than three months old.
have provided. List A Valid passport	Utility bill (not mobile phone, satellite/cable TV or internet printed bills) that is less than three months old.
Valid UK photocard driving licence	

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Santander UK plc advises on mortgages, a limited range of life assurance, pension and collective investment scheme products and acts as an insurance intermediary for general insurance

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