

# Community Current Account application form

Please complete this form in BLOCK CAPITALS and black ink.

## Your information

For details of how we and others will use your information, please refer to our Privacy Notice available at [iombank.com/privacynotice](http://iombank.com/privacynotice) or ask your usual contact at the Bank.

When we use and share personal and financial information, we do so on the basis that we have a legitimate interest to prevent fraud and money laundering, to manage our risk and to protect our business and to comply with laws that apply to us (including verifying your identity and assessing the suitability of our products).

### 1. Organisation details

Organisation name	<input type="text"/>	
Trading name and aliases (if different)	<input type="text"/>	
Principal organisation Address line 1	<input type="text"/>	
Address line 2	<input type="text"/>	
Address line 3	<input type="text"/>	
Address line 4	<input type="text"/>	
Postcode	<input type="text"/>	<input type="text"/>
Registered address (if different to organisation address)		
Address line 1	<input type="text"/>	
Address line 2	<input type="text"/>	
Address line 3	<input type="text"/>	
Address line 4	<input type="text"/>	
Postcode	<input type="text"/>	<input type="text"/>
Address for correspondence (if different to organisation address)		
Address line 1	<input type="text"/>	
Address line 2	<input type="text"/>	
Address line 3	<input type="text"/>	
Address line 4	<input type="text"/>	
Postcode	<input type="text"/>	<input type="text"/>
Contact name for correspondence	<input type="text"/>	
Organisations telephone number	<input type="text"/>	extn <input type="text"/>
Organisations fax number	<input type="text"/>	
Organisations e-mail address	<input type="text"/>	

When did/will your organisation start trading?

Date of registration

Country of registration

Charity registration number (if applicable)

Are your organisation premises owned or leased?

Owned  Leased

Tax residency - please list below the countries in which the organisation is resident for tax purposes and provide the corresponding tax reference numbers or local equivalent.

Country

  

Tax reference number

  

Is the organisation tax resident in more than 2 countries?

Yes  No

If 'Yes', please provide the additional information to your usual contact at the Bank.

Please confirm if the organisation has tax arrears or legal proceedings outstanding or has ever been insolvent, bankrupt or had any court proceedings for debt?

Yes  No

Type of community organisation and activities

Number of members/officials

How many are full time?

How many are part time?

Actual/anticipated annual sales turnover/expenditure

£

Financial year-end date

## 2. Relationship Information

Please provide full answers to each of the questions below, do not leave text boxes blank. Your application may be delayed if you do not complete as requested.

### Business activity and ongoing source of funds

Please provide a detailed description of the nature/purpose of organisation. For example:

- Within which business sector do you trade?
- What Products and Services are offered?

Please provide details of the following activity expected through the account(s) on a monthly basis:

- % value of Cash and/or other credits e.g. Electronic, Direct Debit, Standing Order, Point of Sale, Cheque.
- Number of transactions
- Value of transactions

### Where the business is trading

Does the organisation deal outside the UK?

Yes  No

If "Yes", Please state in which country your main business/activity is located

Please state all countries where you hold material business assets

Please state the main countries from where you receive payments (eg; where your customers are based)

Please state the main countries to which you make payments (eg; where your suppliers are based)

Please confirm:

- Countries where assets are held
- Where goods and services are exported too
- Where goods and services are imported from

**Initial deposit**

Please provide details of the source of funds to be introduced into the account(s) and advise on;

- The amount of initial deposit
- How these funds were generated, together with details of source and location they will be remitted from

**Source of wealth**

Please provide details of where wealth originated i.e. savings from earnings\* (please state time period), sale of property\*, inheritance\* etc, how contribution to start up organisation has been generated.

\*The Bank may require you to supply evidence to support the information you have provided.

If you are not locally resident in the jurisdiction where the account is to be domiciled, please provide an explanation for the account.

**3. Personal details – please provide details of officials**

If there are more than three parties to the account please also complete the Community Current Account additional party form. Please ask a member of staff for a copy.

**Party one**

Are you an existing Isle of Man Bank personal account holder?

Yes  No

If yes, please provide Account number  Sort code

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Previous names (including maiden name or change by deed poll)

Are you known by any other name? Yes  No  If yes, please specify

Principal residential address line 1

Address line 2

Address line 3

Address line 4

Postcode

Date of entry to above address

If resident at above address less than 3 years please state previous address

Previous address line 1

Address line 2

Address line 3

Address line 4

Postcode

Date of entry to above address

If you have lived at any other addresses in the last 3 years, please advise a member of staff

Date of birth  Male  Female

Country of birth

Town of birth

Country of permanent residence

Government issued personal identification number of unique identifier (e.g. passport, driving licence etc.)

Nationality

Document type

ID number

Expiry date

Other nationalities/citizenships

UK National Insurance Number (or equivalent)

Do you have more than 2 nationalities/citizenships?

Yes  No

If 'Yes', please provide the additional information to your usual contact at the Bank.

Country  Tax reference number

Are you tax resident in more than 2 countries?

Yes  No

If 'Yes', please provide the additional information to your usual contact at the Bank.

Telephone number (home)

Telephone number (business)  extn

Mobile telephone number

Email address

Memorable word  (Please choose a memorable word of no more than 15 characters. This may be used to confirm certain transactions)

Position in organisation

How long have you been with the organisation

Years  Months

Have you ever been insolvent, bankrupt, sequestered, involved in any court proceedings for debt or made arrangements with their creditors?

Yes  No

If yes, please provide full details on an attached sheet.

**Declaration and signature(s)**

I confirm the personal details provided are complete and correct

Party one signature

Date \_\_\_\_\_

**Party two**

Are you an existing Isle of Man Bank personal account holder?

Yes  No

If yes, please provide Account number  Sort code

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

Previous names (including maiden name or change by deed poll)

Are you known by any other name? Yes  No  If yes, please specify

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Address line 4

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If you have lived at any other addresses in the last 3 years, please advise a member of staff

Date of birth  Male  Female

Country of birth

Town of birth

Country of permanent residence

Government issued personal identification number of unique identifier (e.g. passport, driving licence etc.)

Nationality

Document type

ID number

Expiry date

Other nationalities/  
citizenships

UK National Insurance  
Number (or equivalent)

Do you have more than 2 nationalities/citizenships?

Yes  No

If 'Yes', please provide the additional information to your usual contact at the Bank.

Country

Tax reference number

Are you tax resident in more than 2 countries?

Yes  No

If 'Yes', please provide the additional information to your usual contact at the Bank.

Telephone number  
(home)

Telephone number  
(business)  extn

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This may be used to confirm certain transactions)

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Yes  No

If yes, please provide full details on an attached sheet.

**Declaration and signature(s)**

I confirm the personal details provided are complete and correct

Party two signature

Date

**Party three**

Are you an existing Isle of Man Bank personal account holder?

Yes  No

If yes, please provide Account number  Sort code

Title Mr  Mrs  Miss  Ms  Other  If other, please specify

Surname

First name(s)

Middle name(s)

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Country of birth

Town of birth

Country of permanent residence

Government issued personal identification number of unique identifier (e.g. passport, driving licence etc.)

Nationality

Document type

ID number

Expiry date

Other nationalities/citizenships

UK National Insurance Number (or equivalent)

Do you have more than 2 nationalities/citizenships?  
Yes  No

If 'Yes', please provide the additional information to your usual contact at the Bank.





**(c) With other Third Parties**

The information provided in this application may be used for compliance with legal and regulatory screening requirements, including confirming your eligibility to hold a UK bank account and sanctions screening.

We may be required to disclose certain information to regulators, tax authorities, government bodies and similar organisations around the world, including the name, address, tax number, account number(s), total gross amount of interest paid or credited to the account and the balance or value of the account(s) of our customers.

**Marketing information**

Isle of Man Bank would like to keep you informed about products, services and offers that we believe may be of interest to you. If you would prefer not to receive this information by any or all of the methods below, please place a cross in the relevant boxes (if you leave these boxes blank we will assume that you are happy to be contacted by these methods):

Letter  Phone  Email  Text

Isle of Man Bank will not share your information with third parties for their own marketing purposes without your permission.

**Communications about your account**

Notwithstanding your marketing choices above, we will contact you with information relevant to the operation and maintenance of your account by a variety of means including online banking, mobile banking, email, text message, post and/or telephone.

**Confirming your agreement**

By making this application the Community organisation confirms that you have read and understood how we may use your information in the way described in this form (including the 'Keeping you informed' section) and in the associated Privacy Notice at iombank.com/privacynotice and warrants that each individual for whom personal details are provided agrees to the use of their personal information in the same way.

Excerpt from minutes of meeting of the members/Committee of

Full name of organisation   
held at   
on

The following documents were considered

Non Personal terms   
Business Account Charges

It was resolved that the Community organisation requests and authorises Isle of Man Bank to open bank account(s) as requested and the Community organisation agrees it will be bound by the Non Personal Terms applying to its accounts with Isle of Man Bank as advised from time to time.

It was agreed that the completed application form be signed on behalf of the organisation by the person(s) named in Section A and delivered to the Bank. I/We certify that the above is a true excerpt from the recorded minutes of the organisation

On behalf of (The Community Organisation)

Name (in full)

Authorised signature

Date \_\_\_\_\_

Position held \_\_\_\_\_



The Royal Bank of Scotland International Limited trading as Isle of Man Bank (Isle of Man Bank). Registered Office: Royal Bank House, 71 Bath Street, St Helier, Jersey JE4 8PJ. Tel. 01534 282850. Regulated by the Jersey Financial Services Commission.

Isle of Man business address: 2 Athol Street, Douglas, Isle of Man, IM99 1AN. Tel. 01624 637000. Licensed by the Isle of Man Financial Services Authority in respect of Deposit Taking, Investment Business and registered as a General Insurance Intermediary.

Isle of Man Bank is a member of the Isle of Man Depositors' Compensation Scheme (DCS) as set out in the Depositors' Compensation Scheme Regulations 2010. To understand your eligibility under the scheme you may wish to visit <https://www.iomfsa.im/consumer-material/isle-of-man-depositors-compensation-scheme-dcs/>

Isle of Man Bank is a member of NatWest Group. NatWest Group plc - Registered in Scotland No 45551. Registered office: 36 St Andrew Square, Edinburgh EH2 2YB. The latest report and accounts are available at [www.investors.natwestgroup.com](http://www.investors.natwestgroup.com). Isle of Man Bank places funds with other parts of NatWest Group and thus its financial standing is linked to the Group. Depositors may wish to form their own view on the financial standing of Isle of Man Bank and the Group based on publicly available information. The latest report and accounts are available at [www.iombank.com/financial-results](http://www.iombank.com/financial-results).

As at 31 December 2019, The Royal Bank of Scotland International Limited's paid-up capital and reserves exceeded £1,581.2 million. UK resident depositors may be subject to declaration and taxation of resulting income.

If you are not satisfied with any of our products or services, we have a complaints procedure that you can use. A leaflet, giving details of the procedure, is available from your branch upon request.

Calls may be recorded.