

Application Form and Mandate for a Limited Company

Please complete this form in BLOCK CAPITALS and black ink and return it to: **Cater Allen Private Bank, 9 Nelson Street, Bradford, BD1 5AN** in the pre-paid envelope provided. If you need any help to complete this form please call us on **0800 092 3300**.

For CAPB completion only

Marketing Code

For Action by Professional Adviser only

Master Account Number

Account Number Allocated

Any information section not completed will be interpreted as though there is no information to input. Remember to Sign the Declaration in Part 8 before you return this form.

PART 1 CHOOSE WHICH ACCOUNT(S)

Please tick which Account(s) you wish to apply for. Indicate the amount to be deposited; whether a chequebook and/or paying-in book is required; and if you would like Internet Banking passwords to be issued to all Authorised Signatories.

Reserve Account (minimum £5,000 or equivalent per currency)	Chequebook	Paying-in Book	Internet Banking
<input type="checkbox"/> £ STERLING <input type="text" value="£"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> € EURO <input type="text" value="€"/>			
<input type="checkbox"/> \$ US DOLLAR <input type="text" value="\$"/>			

MONTHLY STATEMENTS PLEASE

Asset 30 Account (minimum £5,000)

£ STERLING

I would like Internet Banking access (All Accounts will appear within Internet Banking)

Cheques should be made payable to the Name that you wish your new Account to be in. No cash, postal orders or third party cheques accepted.

Please note that only fully transactional Sterling accounts, requiring a single signature to transact, have full Internet Banking functionality. All other accounts will have View Only access.

PART 2 YOU MUST COMPLETE THIS SECTION - ALL ACCOUNTS

Your Account Number with us (If existing Account Holder)

Name to be shown on new Account* (To appear on chequebook and/or paying-in book, where applicable, maximum 36 characters per line)

Contact Name Position

Name of Business/Trading Name/Registered Corporate Name

Nature/Purpose of the Business (Please tell us the main activities that it is involved in.)

Registered Office Address** (This information must match Companies House Records)

Principal Trading Address

Postcode Postcode

* The Account Name must reflect/include the Company Name/Trading Name

** For registered and correspondence addresses only UK and BFPO addresses are acceptable. C/O and PO Box addresses are not acceptable.

PART 2 (CONT'D)

YOU MUST COMPLETE THIS SECTION – ALL ACCOUNTS

Address for Correspondence*
(if different to Registered/Trading Address)

Postcode

Registered Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Business Telephone Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mobile Telephone Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email Address

--

The Country of Establishment/Incorporation if outside the UK

--

Standard Industry Classification (S.I.C.) code (if known)

--

Expected source of deposit/payment (Please tick all that apply):

Trading First Invoice Transfer from another account Other

If **Other**, please state

--

Please advise the Source of Wealth where Initial Deposit/Payment is over £10,000 (or equivalent in currency)

Initial share capital Trading Other

If **Other**, please state

--

What will this Account be used for?

Savings Current/Trading Other

If **Other**, please state

--

Anticipated Business Turnover

£	
---	--

 per annum

Anticipated Turnover through this Account

£	
---	--

 per month

* For registered and correspondence addresses only UK and BFPO addresses are acceptable. C/O and PO Box addresses are not acceptable.

PART 3

PROFESSIONAL ADVISER'S DETAILS

Have you been introduced by a Professional Adviser? Yes NoIf **NO**, go to PART 4. If **Yes**, please complete the details below.

Name of Company

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Address for Correspondence

Postcode

Telephone Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Contact Name

--

Email Address

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I/We certify that at a meeting on the Board of Directors passed a Resolution to open an Account with Cater Allen Private Bank and that Resolution has been duly recorded in the minute book.

I/We, (the 'Account Holder') being a Limited Company hereby apply to open an Account ('the Account') with Cater Allen Private Bank ('the Bank') on the published Terms and Conditions thereof ('the Conditions'), which we acknowledge having received and to which we agree to be bound and any subsequent amendments which the Bank may inform us of from time to time, and in accordance with the Mandate below. We hereby request and authorise the Bank:

- (a) To honour and comply with all cheques drawn on the Company's behalf and debit such cheques to the Account;
- (b) To honour and comply with all instructions for withdrawal from the Account;
- (c) To collect for credit to the Account, all instruments endorsed on behalf of the Account Holder as named above.

PROVIDED that such cheques, instructions or endorsements are signed by our Authorised Signatories as detailed below (please complete and tick appropriate boxes):

Total number of Authorised Signatories to be held on this account

Please process transactions on the account on the instructions of:

- any one signature
- any two signatures
- more than two signatures, please specify how many

The Signatories appearing in Part 7 will be honoured whether the Account is in credit or debit.

Provided further that the Bank be furnished with a list giving the full names and specimen signature and documentary proof of name and home address of each of the persons referred to overleaf, certified, where applicable, by the Chairman and Secretary and that the Bank receives notice in writing of any change there may be or any further such list, in each case and the Bank may be assured that any Resolutions have not been amended or revoked until it receives notice in writing thereof.

The Company/Account Holder agrees:

- To authorise the Bank to make enquiries and to take up references as it considers appropriate in connection with this application form and this authorisation is to remain effective until the Bank receives our written notification to the contrary.
- That any indebtedness or liability incurred to the Bank under this authority shall, in the absence of any express written agreement by the Bank to us, be due and payable on demand.
- To supply to the Bank, as and when necessary, lists of current Directors and, if applicable, other officials authorised to sign, with specimen signatures in accordance with the current Mandate to operate the above Account.
- That upon any Directors ceasing to be associated with us by death or otherwise, the Bank may, in the absence of written notice to the contrary from us treat the surviving continuing Directors for the time being as having full power to carry on the business of the Company and to deal with its assets as freely as if there had been no change in the Company.
- To authorise the Bank to send copies of all statements issued in respect of the Account and to disclose details of that Account to our Professional Advisor as named in Part 3, or their successors in title. It is acknowledged that my Professional Adviser may receive commission from the Bank in respect of the Account.
- That the Bank is hereby authorised to comply with all withdrawal instructions given by facsimile, letter, telephone or online, providing that such instructions are signed in accordance with the current Mandate to operate the above Account. The Bank may act upon such instructions immediately and without further enquiry unless it has cause to be suspicious as to the nature and content of the request.
- Understands that the Bank accepts no liability whatsoever in respect of any losses which it may suffer as a result of any fraud or negligent misuse of the banking services including telephone banking unless such loss occurs as a result of fraud or negligence on the part of the Bank or its employees or agents.

The above authority shall remain in force until the Bank receives written notice of its revocation, notwithstanding any change in our constitution (or name), and shall apply notwithstanding any change by death, bankruptcy, retirement or otherwise of the Directors.

Changes to Signatories

The Bank will not accept changes in Authorised Signatories unless detailed on our appropriate Renewal Mandate form.

Closure of Account

The Bank will not accept notification of closure of this Account unless it is authorised by the correct signatories as detailed on the valid Mandate that is in existence at that point in time.

Explanatory Note: If this application is made in joint names "I" in the statement below should be read as "we" where appropriate. This statement relates to the information I have given in this application and to any other information which I provide to you (Cater Allen Private Bank) or which you hold on me. I confirm that I am entitled to disclose information about any parties named on the application form.

Whether or not I become a customer, all the information I give to you Cater Allen Private Bank or you hold on me including transactional data, may be shared with and used by the group of companies to which Cater Allen Private Bank belongs (the Santander group), your associated companies, service providers or agents who may be located in other countries. I understand that you will ensure that my information is only used in accordance with your instructions and your own strict internal confidentiality policies. If you transfer my information to another country, you will also ensure that it is given the same levels of protection as required under the UK Data Protection Act.

I agree that my information may be used in this way for administration purposes and to:

- Provide and run the Account or service I have applied for and develop and improve your products and services.
- Invite me to take part in market research surveys. **If I would prefer not to be included in market research I can tick this box.**

I am a Customer dealing directly with Cater Allen Private Bank

I agree that Cater Allen Private Bank may identify and advise me by post, telephone, or electronic media of products or services which you think may interest me. **If I would prefer not to receive up to date information on other products and services from Cater Allen Private Bank, I can tick the following boxes:**

Please do not contact me **by telephone** **by post** **by e-mail**

Unless I have indicated otherwise, by continuing with this application, I consent to you contacting me via any of the channels above.

I understand that I may receive details of products and services from other Abbey group companies, if I have agreed to receive marketing from them directly.

I have been introduced to Cater Allen Private Bank via an Intermediary

I understand that Cater Allen Private Bank will not use my information for marketing purposes. However, I understand that I may receive details of products and services from other Abbey group companies if I have agreed to receive marketing from them directly.

For all Cater Allen Private Bank Customers

Before you can open my Account, you will check my details with Fraud Prevention Agencies, and may make searches at Credit Reference Agencies who will supply you with information including information from the Electoral Register, for the purposes of verifying my identity. Scoring methods may be used to verify my identity. **A record of this process will be kept that may be used to help other companies to verify my identity.** If I give you false or inaccurate information and fraud is identified, details will be sent to Fraud Prevention Agencies. Law enforcement agencies may access and use this information.

You and other organisations may search and use the records held by Credit Reference and Fraud Prevention Agencies about me and my Financial Associates or Partner/Spouse and others in my household, to prevent crime, fraud and money laundering and for example:

- to check details provided on applications for credit and credit related or other facilities
- to verify my identity if I or my Financial Associate applies for other facilities
- to help make decisions about credit and credit related services, insurance proposals and claims, and all types of facilities for me, my Financial Associate or Partner/Spouse and other members of my household
- to check the operation of credit and credit related Accounts and to manage Accounts and facilities, including tracing debtors and recovering debt
- to help make decisions about job applicants and employees
- to undertake statistical analysis and system testing.

You and other organisations may search and use from other countries the information recorded at Fraud Prevention Agencies. Further information on the Credit Reference Agencies and Fraud Prevention Agencies you use is available by telephoning your Agents on 0800 092 3300.

You may also give essential information about my Account and cards (if any) to others if necessary to run my Account and for regulatory purposes.

Information about me will be kept after my account is closed. I understand I have the right to see certain records you hold about me on payment of a fee* and that an information sheet (Subject Access Info sheet) explaining my rights is available by calling 0800 092 3300.

*Please see Banking Tariff for details.

Reserve Account Applications Only:

I understand that when you assess this application, and any future increase in my credit and/or overdraft limit (this does not apply to those under 18), you will use the information for credit assessment, which may include credit scoring. You may make any enquiries relating to me and my business that you consider necessary (e.g. from another financial institution) and search the files of Credit Reference Agencies at my business and home address, which will keep a record of each search. This could impact on my ability to obtain credit elsewhere within a short period of time. Details about this application (whether or not it proceeds) may be recorded at the Credit Reference Agencies. An association between joint applicants or between myself and any other person will be created at the Credit Reference Agency. This will link our financial records, each of which will be taken into account in all future applications by either or both of us. If an association already exists then my applications will be assessed with reference to these associated records. This situation will continue until one of us successfully files a disassociation at the Credit Reference Agency.

Details about me, my business and the conduct of this Account may also be passed to Credit Reference Agencies. When appropriate, the Credit Reference and/or Fraud Prevention Agencies will also record details of my agreement with you, the payments I make under it and any default or failure to keep to its terms and any deliberate non-payment following a change of address without notice.

The Credit Reference Agencies and/or Fraud Prevention Agencies may share my information with other organisations when credit decisions are being made, for the purposes described in the section "For all Cater Allen Private Bank customers" above.

PART 7**AUTHORISED SIGNATORIES**

Anyone who wishes to be able to transact on this account needs to be identified as an Authorised Signatory below. If you are not identified as an Authorised Signatory then we will not accept your signature as authorisation to carry out a transaction, e.g. on a letter, on a cheque, on a faxed request, etc.

The following Authorised Signatories wish to operate this Account (“The Account”) with Cater Allen Private Bank (“The Bank”). By signing this Application Form we agree that:

- We have read and understand the Data Protection Statement, and agree that you can use our information as stated in the Statement.
- We have received and accept the Terms and Conditions of this Account and agree to also be bound by any subsequent amendments advised to us by the Bank from time to time.
- Our Personal Information contained in Part 4 of this Application is true and correct.

Full Name	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>
Full Name	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>
Full Name	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>
Full Name	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>

PART 8**DECLARATION**

This Declaration should be signed by:

- **2 Directors; or**
- **1 Director and the Company Secretary; or**
- **In the event of the Company having only a Sole Director and no Company Secretary then the Sole Director must sign. This Sole Director must sign in the presence of a witness who attests the signature.**

By signing this Application Form we agree that:

- We have read and understand the Data Protection Statement, and agree that you can use our information as stated in the Statement.
- We have received and accept the Terms and Conditions of this Account and agree to also be bound by any subsequent amendments advised to us by the Bank from time to time.
- We confirm the validity of the Authorised Signatories in Part 7.
- The information contained in this Application is true and correct.
- Cater Allen Private Bank is duly authorised to operate the Account(s).

Full Name	<input type="text"/>	Position	<input type="text" value="DIRECTOR"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>
Full Name	<input type="text"/>	Position	<input type="text" value="DIRECTOR/SECRETARY*"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>

* delete as appropriate

Please turn to next page for Witness section.

PART 8 (CONT'D)

DECLARATION

To be completed only by a Witness who is attesting the signature of a Sole Director of a Private Limited Company.

Name	<input type="text"/>	Occupation	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text" value="/ /"/>
Address - Home or Business	<input type="text"/>		
	<input type="text"/>		
	<input type="text" value="Postcode"/>		

We do not require any Personal Identification Documentation for you.

PART 9

DOCUMENTATION REQUIREMENTS

Documentation required for Verification of the Limited Company

No documentary evidence is required, however if the Directors' or Secretary's details have recently changed copies of Forms 288a/b/c should be supplied as appropriate.

The Witness is not required to supply any Personal Identity Documentation.

Documentation required for Verification of Personal Identity

If you do not have a Professional Advisor please supply documentation as per the accompanying Customer Identification Requirements Sheet for each Director/Chairperson/25%+ Shareholder/Principal Controller/Beneficial Owner/Authorised Signatory. Please note: You must not send to us originals of the following valuable documents: Passport; Driving Licence; EEA member state ID card; Northern Ireland Voters Card. This is due to the dangers of postal interception and fraud and is for your own protection.

Professional Advisers, who are FSA regulated, may supply a CVIC (Confirmation of Verification of Identity Certificate) for each Director/Chairperson/25%+ Shareholder/Principal Controller/Beneficial Owner/Authorised Signatory provided that it is fully completed and of sufficient quality.

In addition, in order to speed up the opening of your new Account, please can each person named on this application provide a £1.00 personal cheque made payable to the new Account.

Cater Allen Private Bank is able to provide literature in alternative formats. The formats available are: Large Print (as recommended by RNIB), Braille, Audio Tape and PC Disk. If you would like to register to receive correspondence in an alternative format please contact us on 0800 092 3300. For the hard of hearing and/or speech impaired please use the Tynetalk service via 18001 0800 092 3300.

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