

Trust Account Application Form

Before signing this form, you should check that all of the information is recorded accurately and read the Declarations. For important information about the new account with the Society, please refer to the Savings Terms and Conditions, Privacy Notice, the relevant savings account leaflet and the Rules of the Society. If you have any questions, please ask the Customer Services Advisor dealing with your application or contact the Customer Services Team on 01384 231414.



Section 1 Account Holder (Trust Details)

Trust Name:

Purpose of the Trust:

Registered Address:	Building Number/Name	Correspondence Address: (If different from the Registered Address)	Building Number/Name
	Street		Street
	District		District
	Town		Town
	County		County
Postcode	Date Effective From	Postcode	Date Effective From

Email Address:

Telephone No:

Country of Establishment:

Name of Trustees: (please name all trustees)

Name of Settlers: (if any)

Name of any beneficiaries: (if any)

Name & address of any Protector or Controller:	Building Number/Name	Name & address of any Protector or Controller:	Building Number/Name
	Street		Street
	District		District
	Town		Town
	County		County
Postcode	Date Effective From	Postcode	Date Effective From

Section 2 Personal Details

To enable the account to be opened, the Society requires at least two people to operate the account. We are authorised to invest for the above Trust:

Account Operator 1

Account Operator 2

Title:

First Name(s):

Surname:

Title:

First Name(s):

Surname:

Date of Birth:

Date of Birth:

Marital Status:

Marital Status:

National Insurance No:

National Insurance No:

Occupation:

Occupation:

Employment Status:

Employment Status:

Nationality:

Nationality:

Country of Birth:

Country of Birth:

Current Address:

Building Number/Name
Street
District
Town

Current Address:

Building Number/Name
Street
District
Town

County	
Postcode	Date moved in

County	
Postcode	Date moved in

Previous Address:
(full address history for
the last 3 years must be
Provided)

Building Number/Name	
Street	
District	
Town	
County	
Postcode	Date moved in

Previous Address:
(full address history for
the last 3 years must be
Provided)

Building Number/Name	
Street	
District	
Town	
County	
Postcode	Date moved in

Email Address:
Home Tel No:
Mobile Tel No:
Work Tel No (Optional):

Email Address:
Home Tel No:
Mobile Tel No:
Work Tel No (Optional):

Account Operator 3

Account Operator 4

Title:
First Name(s):
Surname:

Title:
First Name(s):
Surname:

Date of Birth:

D	D	M	M	Y	Y	Y	Y
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Date of Birth:

D	D	M	M	Y	Y	Y	Y
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Marital Status:

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Marital Status:

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National Insurance No:

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National Insurance No:

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Occupation:

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Occupation:

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Employment Status:

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Employment Status:

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Nationality:

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Nationality:

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Country of Birth:

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Country of Birth:

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Current Address:

Building Number/Name	
Street	
District	
Town	
County	
Postcode	Date moved in

Current Address:

Building Number/Name	
Street	
District	
Town	
County	
Postcode	Date moved in

Previous Address:
(full address history for
the last 3 years must be
Provided)

Building Number/Name	
Street	
District	
Town	
County	
Postcode	Date moved in

Previous Address:
(full address history for
the last 3 years must be
Provided)

Building Number/Name	
Street	
District	
Town	
County	
Postcode	Date moved in

Email Address:
Home Tel No:
Mobile Tel No:
Work Tel No (Optional):

Email Address:
Home Tel No:
Mobile Tel No:
Work Tel No (Optional):

Where did you find out about us?:

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Section 3 Savings Details

Which product would you like to open?:

Source of opening deposit	Select all that apply
Salary	
Transfer from DBS Account	
Current Savings/Investment held elsewhere	
Pension (State)	
Pension (Private)	
House Sale	
Inheritance	
Family gift/loan	
Other (please specify)	

How will you continue to fund the account?	Select all that apply
Salary	
Transfer from DBS Account	
Current Savings/Investment held elsewhere	
Pension (State)	
Pension (Private)	
House Sale	
Inheritance	
Family gift/Loan	
Other (please specify)	

What is your savings goal?	Select all that apply
House	
Retirement	
Holiday	
Car	
Wedding	
Emergency	
Other (please specify)	

How often will you use your account?	Select one
Weekly	
Monthly	
Annually	
Rarely	
No further deposits	

What is the most likely anticipated turnover of this account in a typical year?	Select all that apply
Less than £20,000	
£20,000 to £50,000	
£50,000 to £100,000	
More than £100,000	

Section 4 Tax Residency

Account Operator 1:

Are you a US citizen? Yes No

Are you a resident for tax purposes in any country or territory other than the United Kingdom? Yes No

If you have ticked 'Yes' to either of the last 2 questions please provide the following in the boxes below – without these you will not be able to open an account.

Country	Tax Identification Number (if you do not enter a TIN, we will write to you asking for this information before we can accept your application)
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>

Account Operator 3:

Are you a US citizen? Yes No

Are you a resident for tax purposes in any country or territory other than the United Kingdom? Yes No

If you have ticked 'Yes' to either of the last 2 questions please provide the following in the boxes below – without these you will not be able to open an account.

Account Operator 2:

Are you a US citizen? Yes No

Are you a resident for tax purposes in any country or territory other than the United Kingdom? Yes No

If you have ticked 'Yes' to either of the last 2 questions please provide the following in the boxes below – without these you will not be able to open an account.

Country	Tax Identification Number (if you do not enter a TIN, we will write to you asking for this information before we can accept your application)
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>

Account Operator 4:

Are you a US citizen? Yes No

Are you a resident for tax purposes in any country or territory other than the United Kingdom? Yes No

If you have ticked 'Yes' to either of the last 2 questions please provide the following in the boxes below – without these you will not be able to open an account.

Country	Tax Identification Number (if you do not enter a TIN, we will write to you asking for this information before we can accept your application)	Country	Tax Identification Number (if you do not enter a TIN, we will write to you asking for this information before we can accept your application)
1. <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	1. <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
2. <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	2. <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
3. <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	3. <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Section 5 Nominated Account Details for Withdrawals

The nominated account details must be in the name of this account.

Bank Name:	<input style="width: 100%;" type="text"/>	Account Name:	<input style="width: 100%;" type="text"/>
Sort Code:	<input style="width: 100%;" type="text"/>	Account Number:	<input style="width: 100%;" type="text"/>
Reference (if applicable):	<input style="width: 100%;" type="text"/>		

If no other bank account(s) held, please tick here

Section 6 Interest and Withdrawal Instructions

Payment of Interest:

Transfer interest annually to my Dudley Building Society account no:

Transfer the interest to my nominated bank account / Building Society with another provider

Add interest annually to account (please check Terms and Conditions of product to confirm this is acceptable)

Number of authorised signatories required to transact/operate account:

Section 7 Data Protection

The Society takes its responsibilities for data management very seriously and we have thoroughly detailed our approach to how we collect and use information on the 'Privacy' page on our website. This explains how we collect and manage personal information and what we do with it. Please visit dudleybuildingsociety.co.uk/privacy for more information. Alternatively, you can request copies of our privacy statements over the telephone on 01384 231414 or in any of our branches.

By signing this application form, you are confirming that you have acknowledged the Society's Privacy Notices and the guidance that is contained within them.

We would love to keep you informed about the products and services that are available to you as a member of Dudley Building Society. In order to receive communications, please confirm your preferences by selecting the following:

Account Operator 1: Email Post Phone Account Operator 2: Email Post Phone

Account Operator 3: Email Post Phone Account Operator 4: Email Post Phone

Section 8 Declaration

1. I/We confirm that I/We have read the product specific terms and conditions relating to the account I am/we are opening and that I/we have received the Savings Terms and Conditions and agree to be bound by them and the Rules of the Society (copies of which are available on request).
2. I/ We declare that all statements made in this application are, to the best of my knowledge and belief, correct and complete.
3. I/We confirm that I am/we are aware that the type of account I am/we are opening is a share account. This means you may be eligible to vote at our Annual General Meeting in accordance with the Society's Rules.
4. I/We acknowledge receipt of the Financial Services Compensation Scheme Information Sheet which I/we received prior to opening this account.
5. I/We declare that any share(s) acquired by me under this account will not be held by me as a bare trustee (or, in Scotland as a simple trustee) for a body corporate, or for persons who include a body corporate.
6. The personal information we have collected from you will be shared with fraud prevention agencies who will use it to prevent fraud and money-laundering and to verify your identity. If fraud is detected, you could be refused certain services, finance, or employment. Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found by writing to us at 7 Harbour Buildings, The Waterfront, Brierley Hill, West Midlands, DY5 1LN.

Signature of Account Operator 1	<input style="width: 100%;" type="text"/>	Date:	<table border="1" style="width: 100%; text-align: center;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				
Signature of Account Operator 2	<input style="width: 100%;" type="text"/>	Date:	<table border="1" style="width: 100%; text-align: center;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				
Signature of Account Operator 3	<input style="width: 100%;" type="text"/>	Date:	<table border="1" style="width: 100%; text-align: center;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				
Signature of Account Operator 4	<input style="width: 100%;" type="text"/>	Date:	<table border="1" style="width: 100%; text-align: center;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				

Section 9 Office Use Only

Staff Number:

Date:

Checked by:

Existing Member: Yes / No