

SAVER PLUS ACCOUNT APPLICATION FORM

1 Account Opening Details – Note: Please make cheques payable to the applicant(s) name

I/we apply to open a **SAVER PLUS ACCOUNT** and enclose £ being the initial investment and the same amount to be deposited monthly thereafter.

2 Personal Details – please use BLOCK CAPITALS

Applicant 1

Title: Forenames (in full): Surname:
Permanent Residential Address:
Post Code: Nationality:
Date of Birth: Email address:
Contact Tel - Day: Evening: Mobile:
Occupation: Are you an existing customer? Yes No

Applicant 2

Title: Forenames (in full): Surname:
Permanent Residential Address: - tick this box if address is same as Applicant 1
Post Code: Nationality:
Date of Birth: Email address:
Contact Tel - Day: Evening: Mobile:
Occupation: Are you an existing customer? Yes No

3 Trustee, Executor, Administrator and Attorney Details – please use BLOCK CAPITALS if you are operating the account on behalf of the above applicant(s)

If you are operating the account on behalf of the above applicant(s), please tick here. In addition to this form, which you **MUST** continue to complete and sign, you are also required to complete an **Official Signatory Form**, a copy of which is available from any of our branches or agents, or online at www.monbs.com.

Trustee 1 – Title: Forenames (in full): Surname:
Trustee 2 – Title: Forenames (in full): Surname:

4 Interest Instructions

I/we require interest to be:

(A) Paid with deduction of tax as I am a taxpayer OR Paid without deduction of tax, as I am a non-taxpayer (please complete and return form R85)

(B) Added to the Account (Annual Interest option only)

OR

Paid direct to Monmouthshire Building Society Account No:

OR

Paid direct to the following Bank Account:

(Please note that ISA accounts have maximum annual subscription limits)

Name of Account Holder(s): Bank Name:

Bank Address: Post Code:

Bank Sort Code: Bank Account Number:

If the interest is being paid to another person (beneficiary), you must also complete the following

Title: Forenames (in full): Surname: Date of Birth:
Permanent Residential Address of Beneficiary:
Post Code: Nationality:
Contact Tel - Day: Evening: Mobile:

5 Account Operation & Withdrawal Instructions for Joint Accounts

I/we authorise the Society to permit the following signatories to operate the account: Any one signature Any two signatures* All signatures required* *Please note – if you require more than one signature to operate the account, you will not be able to register to operate the account online using our 'My Accounts' service.

6 Operating your Account – please use BLOCK CAPITALS

You can operate your account in any of our Branches or Agencies using your account passbook. We also offer the facility to manage your account online and/or discuss your account by telephone (although you will not be able to request withdrawals or make changes in this way). Our online 'My Accounts' service allows you to view your savings accounts, authorise withdrawals, transfer funds between accounts and correspond with us using our secure messaging facility.

If you would like to use either or both of these services, and have not previously registered, please enter a password and memorable word/phrase (each of which should be between 8 and 15 characters) in the boxes below:

Password: Memorable Word/Phrase: Please also indicate which service(s) you require: Telephone Online

It is very important you keep a record of the information supplied in this section to enable you to use these service(s). Please note - if you require more than one signature to operate the account, you will not be able to register for online access.

7 Annual General Meeting (AGM) Voting Pack

You can now elect to receive your AGM Voting Pack electronically, which will help us to reduce our paper usage and postage costs.

Please tick **ONE** box only:

YES - I wish to receive my AGM Voting Pack electronically and I have supplied my email address above.

NO - I wish to receive a paper based AGM Voting Pack.



