

1 YEAR FIXED RATE CASH ISA - ISSUE 6 ACCOUNT APPLICATION FORM

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

I apply to subscribe to a **1 Year Fixed Rate Cash ISA - Issue 6** for the tax year

Initial Investment £

2 Personal Details – please use BLOCK CAPITALS

Title:	Forenames (in full):	Surname:
Permanent Residential Address:		
Post Code:		Nationality:
Date of Birth:	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	National Insurance Number:
Contact Tel - Day:	Evening:	Mobile:
Email Address:	Occupation:	Are you an existing customer? Yes <input type="checkbox"/> No <input type="checkbox"/>

3 Receiver, Guardian and Attorney Details

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 agencies, or online at www.monbs.com.

4 Interest Instructions

I require interest to be: Added to the Account
 OR
 Paid direct to Monmouthshire Building Society Account No:
 OR
 Paid direct to the following Bank Account:

Name of Account: Bank Name:
 Bank Address: Post Code:
 Bank Sort Code: - - Bank Account Number:

5 Additional Services for our Customers aged 18 and over (optional)

Monmouthshire Building Society Group offers a range of additional services. If you would like to receive further information on the services listed, please indicate below:

- Do you have savings accounts/bonds with other financial institutions? Yes No
 - Would you like further information on any of the following accounts – please tick if Yes:
 ISAs Bonds Childrens Regular Savings Easy Access Notice Accounts
- What is the date your current mortgage deal/rental agreement expires?
 - Would you like us to contact you at this time to discuss our range of mortgage products? Yes No
- What month is your home insurance due for renewal?
 - Can we contact you at your next renewal date to offer you an alternative quote? Yes No
- How many dependants do you have?
 - Have you a Will in place? Yes No
 - Would you like to be contacted by one of the Society's panel of solicitors to discuss
 Reviewing/making a will? Yes No Probate service? Yes No Lasting power of attorney Service? Yes No
 Matrimonial & Family Law Service? Yes No Conveyancing Service? Yes No
- Would you like information regarding Golden Charter Funeral Plans available via the Society? Yes No

6 Customer Declaration: Please read, complete and sign

Important Information – it is essential that you read and understand the terms within this declaration before signing below

- I confirm that I have received the following:

General Terms & Conditions for Savings Accounts Leaflet	Yes <input type="checkbox"/>	No <input type="checkbox"/>	(If you have ticked 'No' to any of these, we will send it to you on receipt of this application)
Interest Rate Leaflet	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Savings Services Tariff Leaflet	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
- I accept that the Society may decline my application.
- I consent and acknowledge that the Society will carry out an electronic check to verify my identity.
- I declare that the account will not be held by me as a trustee for a corporate body, or for persons who include a corporate body.
- I agree to the specific terms and conditions applying to the account, and the General Terms & Conditions for Savings Accounts, and to be bound by the Rules of the Society, a copy of which is available on request.
- I authorise the Society to operate the account according to the instructions indicated in this application form.

I DECLARE THAT:

- All subscriptions made, and to be made, belong to me.
- I am 16 years of age or over.
- I have not subscribed, and will not subscribe, more than the overall subscription limit in total to a Cash ISA, a Stocks and Shares ISA and a Innovative Finance ISA in the same tax year.
- I have not subscribed, and will not subscribe, to another Cash ISA in the same tax year that I subscribe to this Cash ISA, and;
- I am resident in the United Kingdom for tax purposes or, if not so resident, either perform duties which, by virtue of Section 28 of Income Tax (Earnings & Pensions) Act 2003 (Crown employees serving overseas), are treated as being performed in the United Kingdom, or I am married to, or in a civil partnership with, a person who performs such duties. I will inform Monmouthshire Building Society if I cease to be so resident or to perform such duties or be married to, or in a civil partnership with, a person who performs such duties.

I AUTHORISE MONMOUTHSHIRE BUILDING SOCIETY:

- To hold my cash subscription, ISA investments, interest, dividends and other rights or proceeds in respect of those investments and any other cash.
- To make on my behalf any claims to relief from tax in respect of ISA investments.

Agreement to Assign Windfalls to Charity

- I have read the section titled 'Charitable Assignment' in the information section of your General Terms & Conditions for Savings Accounts Leaflet and I agree that unless I fall within the exemptions contained in that section, I will transfer to Monmouthshire Building Society's Charitable Foundation (or any other charities nominated by the Society, but to no other person) my rights to any windfall conversion benefits to which I may become entitled. I acknowledge that my agreement cannot be withdrawn or varied.
- I authorise Monmouthshire Building Society to pass any relevant information about me or my account to the Charitable Foundation and also to transfer any windfall conversion benefit to the Charitable Foundation without notice to me.

Use of your Personal Information

- We need to collect information about you in order to open and administer your savings account. The legal basis on which we process your data will be either that the processing is necessary for us to provide you with the financial product you are seeking; necessary to comply with our legal obligations; in our legitimate business interests in relation to such purposes or with your consent.
- If you make a joint application with your spouse, partner, family member or another party, we will also need to collect personal information about that person. If you make a joint application on behalf of the joint applicant, you agree to show them our Summary Privacy Notice and that you have all necessary consents to enable you to provide us with their information.
- The information we collect is used to verify your identity, administer your accounts, provide you with our services and to communicate with you about other products or services of ours that we think may be of interest to you.
- When using your information we may also share information with anyone you appoint to administer or operate your account; regulatory and government bodies; auditors; any individuals/organisations that we use to provide services to us; and any other person or organisation if the law, public duty or our legitimate interests require us to do so.
- We undertake checks about you with Fraud Prevention Agencies ('FPAs') for the purposes of preventing fraud and money laundering, and to verify your identity. If false or inaccurate information and fraud is suspected then we will record this and share the information with FPAs.
- In making your application you acknowledge that you have received and read the summary of our full Privacy Notice contained in our "Important Information About Your Personal Data" leaflet. Our full Privacy Notices are available from all our offices and on our website at www.monbs.com/privacy.

Keeping you Informed about other Products & Services

The Society would like to provide you with information on our products and services unless you opt out of receiving this information. Please note the Society will continue to provide you with regulatory and service communications even if you have opted out.

I do not wish to receive information on products and services by the following channels:

Mail Telephone Electronic means

I agree to the ISA terms and conditions applying to the account and to be bound by the rules of the Society, a copy of which is available on request. I declare that this application form has been completed to the best of my knowledge and belief.

Signature _____ Date _____

For Office Use Only	Date Opened	Security Number	Branch Agent	ID Checked by	Data Check	
A/C No.		Applicant Number				
CHEQUE DETAILS						
Drawer's Name	BankName	Bank Address	Sort Code	Account number	Cheque Number	Amount