

**APPLICATION FORM TO OPEN AN ACCOUNT FOR A
CHARITY / LIMITED COMPANY / APPROVED PENSION SCHEME**

Please use block capitals and black ink only. Delete items marked *as appropriate

We wish to invest £ _____ in a _____ Account (Please specify)

NAME OF ORGANISATION

Name

Registered Address

Postcode

Registration No Telephone No

1st OFFICER OR AUTHORISED SIGNATORY'S DETAILS

Title Forenames Surname Date of Birth

Address
 Postcode

Office Held Home Tel No Existing Customer: Yes / No

2nd OFFICER OR AUTHORISED SIGNATORY'S DETAILS

Title Forenames Surname Date of Birth

Address
 Postcode

Office Held Home Tel No Existing Customer: Yes / No

3rd OFFICER OR AUTHORISED SIGNATORY'S DETAILS

Title Forenames Surname Date of Birth

Address
 Postcode

Office Held Home Tel No Existing Customer: Yes / No

4th OFFICER OR AUTHORISED SIGNATORY'S DETAILS

Title Forenames Surname Date of Birth

Address
 Postcode

Office Held Home Tel No Existing Customer: Yes / No

All correspondence for this account will be sent to the registered address given.
If you wish it to be sent to a different address, please complete the section below.

Name

Address
 Postcode

Continued overleaf...

Please state account numbers of any other accounts held with the Society by authorised officers

Name	<input type="text"/>	Account No	<input type="text"/>
Name	<input type="text"/>	Account No	<input type="text"/>
Name	<input type="text"/>	Account No	<input type="text"/>

Interest Instructions (Interest can only be transferred to an account in the same name)

<input type="checkbox"/> Credit to this account	<input type="checkbox"/> Credit to Bank Account No	<input type="text"/>
<input type="checkbox"/> Credit to HEBS Account No	Sort Code	<input type="text" value="- -"/>

DECLARATION

It was decided at a properly constituted meeting held on to deposit funds with the Hanley Economic Building Society (**copy of minutes attached**).

All withdrawals and amendments to this account must be signed by:

<input type="checkbox"/> *Any authorised signature	<input type="checkbox"/> Any two authorised signatories
<input type="checkbox"/> Other instruction _____	

*I/We will notify you immediately of any change of Officers. *I/We agree to be bound by the 'Terms and Conditions of Issue' of this account.

SIGNATURE(S)

	SIGNED	PRINT NAME	DATE	NO MAIL
1 st	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>
2 nd	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>
3 rd	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>
4 th	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>

From time to time you will be advised of the Society's other products and services, if you do not wish to receive these, please tick the 'No Mail'

For Society Use Only

Holding Code					
Diary Text					
Account Type	<input type="text"/>	BSC Indicators	<input type="checkbox"/>	Checked by	<input type="text"/>
Customer No 1	<input type="text"/>			Date	<input type="text"/>
Customer No 2	<input type="text"/>	Corp / Non Corp		Branch / Agency	<input type="text"/>
Customer No 3	<input type="text"/>				
Customer No 4	<input type="text"/>				

ALL APPLICATIONS TO BE REFERRED TO SAVINGS SPECIALIST

Limited Company (ALL THESE ITEMS REQUIRED)

Original or Certified Copy of 'Certificate of Incorporation' or 'Certificate of Trade'	Attached <input type="checkbox"/>
Resolution of the Board of Directors to open the account and confer authority on those who will operate it	<input type="checkbox"/>
A search of the files at Companies House	<input type="checkbox"/>

Accounts opened by cheque

Account No	<input type="text"/>	Name of Account	<input type="text"/>
Bank Name	<input type="text"/>	Bank Sort Code	<input type="text"/>
Branch Assistant No	_____	Branch or Agency	_____
Cashiers Signature	_____	Date	_____



www.thehanley.co.uk

Registered Office: Granville House Festival Park Hanley Stoke-on-Trent ST1 5TB
Tel: (01782) 255000 Fax: (01782) 873161
Visit our website at www.thehanley.co.uk

FINANCIAL SERVICES COMPENSATION SCHEME

IMPORTANT DOCUMENT – PLEASE READ AND COMPLETE THE ATTACHED FORM

THIS FORM MUST ACCOMPANY YOUR APPLICATION FORM TO OPEN AN ACCOUNT FOR AN ORGANISATION

Money saved with building societies and banks in the UK is protected by the Financial Services Compensation Scheme (FSCS) up to £85,000 from 1 January 2011 for certain groups of savers. New regulations from the Financial Services Authority (FSA) require us to hold current details as to the eligibility, or not, of all of our customers.

To ensure that the information we hold is accurate please **complete and return** the enclosed questionnaire with your application form to open an account for a non individual. Please note that we are unable to open your account without this form.

If your organisation falls under the excluded categories list we need to know the type of your organisation for example limited company, large partnership, etc, please therefore tick the appropriate box which describes your organisation.

If you are unsure, details of the types of organisation that are eligible under the FSCS can be found on the FSA website at www.fsahandbook.info/FSA/handbook/COMP/4/2 or on the FSCS website at www.fscs.org.uk. Alternatively, you can call the FSCS on 0800 678 1100 to enquire.



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**FINANCIAL SERVICES COMPENSATION SCHEME
STATUS DECLARATION**

ACCOUNT NAME	ACCOUNT NO	
I/We confirm that the above account is eligible for cover under the Financial Services Compensation Scheme (FSCS) as we do not fall into any of the excluded categories listed below.		<input type="checkbox"/>
OR		
I/we are not eligible for cover under the Financial Services Compensation Scheme (FSCS) as we fall into one of the categories listed below as indicated.		<input type="checkbox"/>
EXCLUDED CATEGORIES		
<ul style="list-style-type: none"> • A large company <i>Defined by the Companies act 2006 as having an annual turnover of £6.5m or more, balance sheet assets of £3.26m or more, and have over 50 employees</i> 		<input type="checkbox"/>
<ul style="list-style-type: none"> • A large partnership <i>Defined as having net assets of £1.4m or more</i> 		<input type="checkbox"/>
<ul style="list-style-type: none"> • A large mutual association 		<input type="checkbox"/>
<ul style="list-style-type: none"> • A local, provincial or municipal authority 		<input type="checkbox"/>
<ul style="list-style-type: none"> • A credit institution 		<input type="checkbox"/>
<ul style="list-style-type: none"> • A pension or retirement fund other than a small self administered scheme 		<input type="checkbox"/>
<ul style="list-style-type: none"> • A government or central administrative authority 		<input type="checkbox"/>

Signed of behalf of

Name

.....
Sign *Print*

Capacity

.....

Date

.....

For Office Use Only:	
Customer Number:
FSCS Excluded:	YES/NO
If YES set hold code	
Hold Code:
Set by: Branch: Date: