

Trust Account application form

A. Account(s) this Authority applies to:

Please tick and indicate account(s) as appropriate (REFER TO SECTION N FOR DEPOSIT SUMMARY)

Premier Cheque

Suffix

IRD Number

Term Investment

Suffix

1	5	3	9																
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B. Trust Details

Title

Physical Address

Contact phone

Postcode

Contact fax

C/O Postal address

Contact mobile

Postcode

Cheque book required? Yes No

RWT Rate 10.50% 17.50% 30% Other

ID Password

Email

Would you like to receive emails? Yes No

(BY PROVIDING YOUR EMAIL ADDRESS YOU ARE AGREEING TO RECEIVE ELECTRONIC INFORMATION AND UPDATES FROM TSB BANK. IF YOU DO NOT WANT TO RECEIVE THIS INFORMATION, PLEASE TICK 'NO' IN THE BOX ABOVE)

C. Trustee Details

Title

Date of Birth

First name(s) in full

Home phone

Surname

Work phone

Email

Mobile phone

Would you like to receive emails? Yes No

D. Trustee Details

Title

Date of Birth

First name(s) in full

Home phone

Surname

Work phone

Email

Mobile phone

Would you like to receive emails? Yes No

E. Trustee Details

Title

Date of Birth

First name(s) in full

Home phone

Surname

Work phone

Email

Mobile phone

Would you like to receive emails? Yes No

F. Trustee Details

Title

Date of Birth

First name(s) in full

Home phone

Surname

Work phone

Email

Mobile phone

Would you like to receive emails? Yes No

G. Trustee Details

Title

Date of Birth

First name(s) in full

Home phone

Surname

Work phone

Email

Mobile phone

Would you like to receive emails? Yes No

H. Term Investment Only:

Term (DAYS/MONTHS/YEARS)

Nominated Account No. (FOR INTEREST TO BE PAID INTO)

Rate (%P.A.)

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I. Personal Information Rights Statement

Pursuant to the provisions of the Privacy Act 1993, the Bank hereby makes the Account Holder aware of the following points in respect of information about the Account Holder which the Account Holder is now providing or which the Bank or its authorised agents or its mortgage insurer or credit card repayment insurer may now or at any time in the future hold.

1. The Bank may obtain credit references or make enquiries within its normal procedures in connection with any account application or upon request (or review) of finance facilities provided to the Account Holder by the Bank.
2. The Bank may require to use the information obtained for use by other departments or divisions of the Bank including (but not by way of limitation) Marketing, TSB Realty, Lending, Visa, Foreign Exchange and marketing/underwriting companies engaged by the Bank or in association with the Bank for product promotions by Direct Mail, Telemarketing, and other Direct Marketing activities.
3. The Bank may wish to seek the Account Holder's views on the services and products it offers. To this end, the Bank may provide appropriate information to reputable market research organisations.
4. Should it become necessary, information may be passed on to debt collection agencies or the information used by the Bank for the purposes of debt collection.
5. The Bank will ensure that information about the Account Holder is held securely and will not, except for the above purposes or as authorised by the Account Holder or when required or authorised by law, disclose the information to any other person.
6. The Privacy Act 1993 gives the Account Holder the right to see and correct information about the Account Holder held by the Bank.
7. The Bank may contact the insurers of any property over which the Bank may hold security in order to obtain details of insurance cover in respect of such property.

J. Applicant(s)/Signatory(s) Statements

I/We:

- certify that the information contained in this application is true, correct and complete in every respect and is supplied by me/us with the intent that it may be relied upon by the Bank in opening the account for me/us, and no information has been withheld which may affect the Bank's decision to proceed with this application.
- certify that I am not/neither of us are, and no signatory to this account is, an undischarged bankrupt or liable under any proceedings pursuant to the Insolvency Act 2006 and its amendments, and agree to advise the Bank if this situation changes.
- agree to, and acknowledge receipt of a copy of, the Account Conditions including the Personal Information Rights Statement which I/we confirm has been read and understood.
- authorise the Bank to obtain from my/our employer(s), referee(s) or from any other source such information as it may require concerning this application and I/we acknowledge that this form and any information obtained shall be and remain the property of the Bank.
- authorise the Bank in its sole discretion to make the enquiries referred to in the Personal Information Rights Statement, and utilise the information supplied or held for the purposes in the Personal Information Rights Statement. (Note: If the Account Holder does not agree to the disclosure of personal information as contained in paragraphs 2 and 3 in the Personal Information Rights Statement, please advise the Bank).
- agree and acknowledge that my/our personal information may be disclosed to a Credit Reporting Agency, and that my/our information may be available to other registered subscribers with that agency.
- agree to keep the Bank advised of any changes to the Account Holder's name and address.
- **have been provided with, understand and accept TSB Bank's Personal Banking Terms and Conditions.**

K. Confirmation of Capacity and Authorisations

Trusts

I/We confirm that:

- I am/we are all the validly appointed trustees of the Trust, and
- in accordance with the terms of the Trust:
 - I am/we are authorised to complete this account application as trustees of the Trust, and
 - the signatories set out on this form, the Account Reference Card and/or Electronic Signature Card are authorised to operate the accounts opened pursuant to this application.

L. Signatures and identification:

Trustee

Signature _____

Date / / _____

Method of, and serial number of identification (TWO REQUIRED - ONE MUST BE PHOTO ID)

1. _____ 2. _____

Trustee

Signature _____

Date / / _____

Method of, and serial number of identification (TWO REQUIRED - ONE MUST BE PHOTO ID)

1. _____ 2. _____

Trustee

Signature _____

Date / / _____

Method of, and serial number of identification (TWO REQUIRED - ONE MUST BE PHOTO ID)

1. _____ 2. _____

