

Savers Accounts - Application Form



- Chiltern Gold Notice Account
- Chiltern Gold Easy Access Account
- Chiltern Gold Tracker Account
- Junior Saver Account

All Account Applicants

Thank you for choosing a Buckinghamshire Building Society Account. In conjunction with this leaflet you will need to read and understand the appropriate account leaflet and the Society's leaflet "Essential Information for Investors" which contains the Society's Terms and Conditions, Identification requirements and other important information.

If you have not received either of these leaflets, please contact us on 0800 652 6725 and we will send them to you.

When applying for any of these Savers accounts, it is important that:

- 1) you sign BOTH sections (D) & (H).
- 2) you read and understand the "Assignment of Windfalls to Charity" (E) and the "Data Protection Act 1998" (F) overleaf.
- 3) you complete sections "A", "B", "D" and "H".
Only complete section "C" if you are the trustee for a Junior Saver Account applicant.
- 4) you send back the completed form along with relevant customer identification (if required) and your remittance to:
Buckinghamshire Building Society, FREEPOST,
High Street, Chalfont St Giles, Bucks HP8 4BR.

Any queries Freephone 0800 652 6725

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**BUCKINGHAMSHIRE
BUILDING SOCIETY**

Established in 1907 at Chalfont St. Giles

helping you to build a better future

www.bucksbuildingsociety.co.uk

For office use onlyAccount opened: In Person Post Cashier Book No. A/C No. **A Investment Details** please identify the account you wish to apply for and fill in all the relevant detailsI/We wish to invest the sum of £ in the following **Buckinghamshire Building Society** account in accordance with the published prospectus.I/We confirm that including this new investment **my/our** total holding in the Society does not exceed £250,000. Investments above this amount are by arrangement. Chiltern Gold Notice 7 Chiltern Gold Tracker Chiltern Gold Notice 90 Chiltern Gold Easy Access Junior Saver**B Applicant(s) Details** please complete this section in block capitals for all accounts. Trustees for Junior Saver accounts complete section 'C' with own details**Applicant 1**

Title (Mr/Mrs/Miss/Ms/Other):

Date of Birth:

Surname:

Forename(s) in full:

Permanent address:

Post Code:

Nationality:

Country of birth:

Occupation:

Contact Tel (daytime):

Email address:

Applicant 2

Title (Mr/Mrs/Miss/Ms/Other):

Date of Birth:

Surname:

Forename(s) in full:

Permanent address:

Post Code:

Nationality:

Country of birth:

Occupation:

Contact Tel (daytime):

Email address:

C Junior Saver Trustee Details please complete this section in block capitals if you are the trustee(s) for the Junior Saver named in section 'B'**Trustee 1**

Title (Mr/Mrs/Miss/Ms/Other):

Date of Birth:

Surname:

Forename(s) in full:

Permanent address:

Post Code:

Nationality:

Country of birth:

Occupation:

Contact Tel (daytime):

Email address:

Trustee 2

Title (Mr/Mrs/Miss/Ms/Other):

Date of Birth:

Surname:

Forename(s) in full:

Permanent address:

Post Code:

Nationality:

Country of birth:

Occupation:

Contact Tel (daytime):

Email address:

D Interest and Withdrawal Details PLEASE TICK THE APPROPRIATE BOXES AND SIGN BELOW

I/We require the interest to be:

 Credited annually/monthly to the account Credited annually/monthly to BBS account Sent annually/monthly to the following bank:

a/c no:

sort code:

payee account name:

Withdrawals to be permitted against:

 Any one signature Signatures of all account holders

Withdrawals to be authorised by: (for Junior Saver only)

 Junior Saver Alone Any ONE of the Trustees both Trustees**Applicant 1 / Trustee 1**

Signature

Date

Applicant 2 / Trustee 2

Signature

Date

PLEASE ALSO READ AND SIGN THE DECLARATIONS ON THE REVERSE OF THIS FORM

E Agreement to Assign Windfalls to Charity please read this section

Note: This Agreement does not apply to you if (i) you have held shares in the Society at all times since 26th April 2000 or (ii) you are a borrowing member of the Society or (iii) you are, in respect of the account for which you are now applying, in one of the other groups of people that the Society has decided should be exempt*. Where more than one of you is signing this form the above Note and, if applicable, the rest of this Agreement apply to each of you separately.

1. I agree with the Society that I will assign to the **selected charity** my right to receive any **windfall benefits**. I authorise the Society and any **successor** to pass any **windfall benefits** direct to the **selected charity** (or to any other charity which the **selected charity** may nominate) without giving any notice to me. I understand that the **selected charity** will have the benefit of this Agreement, and that neither it nor the Society will release me from it or vary its terms, even if the Society decides at some stage in the future that new shareholding members generally will not be

required to enter into similar agreements. I authorise the Society to give the **selected charity** any information about me and any account that I have with the Society (either now or in the future) but only if the **selected charity** reasonably needs it for any purpose arising out of this Agreement. I understand that if the Society no longer exists following a merger with another building society, this Agreement will still apply between me and the other society.

2. In this Agreement:
- (a) **“selected charity”** means the Charities Aid Foundation or, if it ceases to be registered as a charity, any other registered charity selected by it;
- (b) **“windfall benefits”** means any benefits which I may become entitled to as a shareholding member of the Society under the terms of any future transfer of the Society’s business to a **successor** (i.e. on a conversion or takeover). The expression **“windfall benefits”** does not include (i) the right to have savings in a share account with the Society replaced by savings in a deposit account with the **successor** or (ii) if I am in one of the groups of people that the Society

has decided may keep some or all benefits*, those benefits which the Society has decided I may keep or (iii) any benefits conferred under the terms of any future transfer of the Society’s business to a **successor** which is publicly announced more than three years after the Society has published a notice in the press publicising a decision by the Society either (a) that it will no longer require new shareholding members to enter into agreements to assign benefits to charity or (b) that new shareholding members’ agreements will only require them to assign benefits to charity if an event relating to a transfer of the Society’s business to a **successor** occurs during a fixed term specified in their agreements; and

- (c) **“successor”** means any company or other corporate body to which the Society transfers its business under Section 97 of the Building Societies Act 1986 (or under any provision which amends or replaces it).
 *Details of these groups and (where applicable) the benefits that may be kept are available from the Society. The number and composition of the groups may be changed from time to time but no change will apply retrospectively.

F Data Protection Act 1998 please read this section

The data we will hold is to enable us to administer your account and for marketing purposes. It will not be released to a third party. From time to time the Society contacts its members to provide details of new or third party products and services which it is offering

If you do not wish to receive such information please tick box We will remind you of your right not to receive marketing information every 3 years. You have a right to receive a copy of the information we hold about you if you apply to us in writing. A fee will be payable.

G Tax

	1st Applicant	2nd Applicant	Beneficiary
Are you a taxpayer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, have you completed a HM Revenue and Customs registration form (R85)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

H Customer Declaration PLEASE READ THIS SECTION AND SIGN

Declaration for ALL Saver accounts in this leaflet

- (i) I/We agree to be bound by the conditions of issue of this account, and the Rules of the Society.
- (ii) I/We hereby declare that I am/we are not a bare trustee (or in Scotland, a simple trustee) for a body corporate, or for persons who include a body corporate.
- (iii) I/We declare that I/we have received and read the Society’s “Essential Information for Investors” leaflet.
- (iv) I/We understand that you are required by law to check the identity and address details of all new account holders. A list of appropriate evidence of identity is contained in the Essential Information for Investors leaflet.

Do you have any existing Buckinghamshire Building Society accounts?

1st Applicant	Yes <input type="checkbox"/>	No <input type="checkbox"/>	2nd Applicant	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide relevant account numbers	<input type="text"/>	<input type="text"/>	If yes, please provide relevant account numbers	<input type="text"/>	<input type="text"/>

Declaration for Chiltern Gold Easy Access, Chiltern Gold Notice and Chiltern Gold Tracker accounts only

- (v) I/We hereby declare that this amount is being invested in the Buckinghamshire Building Society by me/us as sole/joint beneficial owner(s).

Declaration for Junior Saver account only

- (vi) I/We hereby declare that this amount is being invested in the Buckinghamshire Building Society by:
- me as sole beneficial owner me/us as trustee(s) for the child.

IMPORTANT – Where there is more than one investor, this form must be signed by each of the joint investors. Please read the Agreement to Assign Windfalls to Charity (section E) and the Customer Declaration (section H) before signing.

Applicant 1 / Trustee 1

_____/_____/_____
 Signature Date

Applicant 2 / Trustee 2

_____/_____/_____
 Signature Date

PLEASE ALSO READ AND SIGN THE DECLARATIONS ON THE REVERSE OF THIS FORM