Application Form for Younger Savers

Share account only - deposit accounts prohibited by statute

Important: All fields are mandatory and incomplete application forms may be returned and result in accounts not being opened. Before completing this form please ensure you have received the General Savings Terms and Conditions. The Rules of the Society are available on request. They provide important information about your account with the Society. Please complete this form and the read and sign the agreement to assign and the declarations overleaf. If you require any assistance in completing this form, please contact Furness Direct on 0800 834 312 or your local branch.

For more information or details of our interest rates talk to us on 0800 781 4311 or visit furnessbs.co.uk



Account Information Type of account Opening Amount: Cash £ Cheques* £ Total f *Cheques should be made payable to the account holder only from my/our Furness I authorise you to transfer £ Account Number Note: If the account is to be operated by a parent, legal guardian or other relative on behalf of the young saver, please complete the operator details. Please note that the Young Saver is the account holder and at all times remains the sole owner and beneficiary of all the monies held in the account. See account terms and conditions. **Account Holder (Young Person)** Title Surname First name and middle name Date of Birth (dd/mm/yyyy) Address - Please enter your full permanent address below. Please note that we are unable to accept c/o addresses and PO Box Numbers. Postcode F-mail address How long have you lived at this address? vears. Tel No. Day Evenina Do you have a National If yes you must enter it here Yes No Insurance Number? Occupation Nationality Town of birth Country of birth Operator Details (Parent, legal guardian or other person) This address will be used as the correspondence address unless you notify us otherwise. Title First name and middle name Date of Birth (dd/mm/yyyy) Surname Address - Please enter your full permanent address below. Please note that we are unable to accept c/o addresses and PO Box Numbers. **Postcode** How long have you lived at this address? E-mail address vears. Tel No. Day Evenina Occupation Nationality Country of birth Town of birth Previous Address - If you have lived at your current address for less than 6 months, please provide full details of your previous address Postcode Preferred Contact Method Email Telephone Post From 6 April 2016 all building societies and banks stopped deducting tax from the interest paid on your savings. Please refer to HMRC for further details. Self certification tax declaration (PLEASE READ BEFORE COMPLETING THIS FORM) The UK government has signed, and will be signing, a number of inter-governmental agreements to share tax information, where applicable, with the tax authorities in other countries. The requirement to collect certain information about each customer's tax arrangement is part of UK legislation and as a financial institution we are legally obliged to collect it. We are asking for your tax residency and tax ID numbers (where applicable) and will record this on our records now, but will only disclose this information to the relevant tax authorities if and when we are required to under UK law. To find the list of countries that have signed information sharing agreements, please go to the OECD automatic exchange information portal $http://www.oecd.org/tax/automatic-exchange/international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-international-framework-for-the-crs/\ and\ http://www.oecd.org/tax/automaticexchange/crs-implementation-and-internation-a$ assistance/crs-by-jurisdiction/#d.en.345489 Your tax residence generally is the country in which you live for more than half the year, but rules differ. Further details are available here: www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency/#d.en.347760

As a financial institution, we, Furness Building Society, are not allowed to give tax advice. If you have any questions on how to complete this form we recommend that you speak to your tax authority (for example, HMRC in the UK) or your tax or legal adviser.

Individual Tax Residency Self-declaration Form								
Part 1 - Aco	unt holder information - Young Person							
Title 9	Surname	First name and middle name	•	Date of Birt	h (dd/mm/yyyy)			
Address - If different from information opposite								
			Postcode					
Part 2 - Country of tax residence 1. Is the account holder (Young Person) a citizen and tax resident of the UK only?								
	ase sign at the end of this form. If NO			Young Person	Yes	No		
2 1-11		5 1 / 1		V B	Yes (go			
	ount holder (Young Person) a citizen o	,		Young Person	to Q3	No		
5. If you ans	swered yes to Q2, please provide your							
	Country tax residency	Tax idendification numbe	r	Please state why TIN not provided				
	ount holder (Young Person) tax reside	,			Yes	No		
	FES , please go to question 5. If NO , pl							
5. Please list the countries other than the UK and US of which you are tax resident, if any, together with associated tax identification number (Young Person).								
	Country tax residency	Tax idendification numbe	r	Please state w	hy TIN not provide	ed		
Part 3 - Dec	claration							
	d that the information I have supplied				ı my relationship v	vith		
Furness Building Society setting out how Furness Building Society may use and share the information I have supplied.								
I acknowledge that the information contained in this form and information regarding reportable account(s) may be provided to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which I may be tax								
resident pursuant to intergovernmental agreements to exchange financial account information.								
I certify that I am the account holder (or am authorised to sign for the account holder) of all the account(s) to which this form relates.								
I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.								
I undertake to advise Furness Building Society within 30 days of any change in circumstances which affects my tax residency status identified in Part 1 of this form or causes the information contained herein to become incorrect, and to provide Furness Building Society with a suitably updated								
self-certifico	ation and declaration within 30 days	of such change in circumstances.						
Signature		Print name		Date				
If you are not the account holder, please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.								
Capacity								

Agreement to Assign

IF YOU HAD A SHARE ACCOUNT WITH THE SOCIETY ON 30TH SEPTEMBER 1999 AND HAVE KEPT THAT SHARE ACCOUNT EVER SINCE THAT DATE, THE WORDING IN PARAGRAPHS 1 TO 3 BELOW DOES NOT APPLY TO YOU. PLEASE LIST YOUR SHARE ACCOUNT NUMBER(S)

- 1. By applying to open a share account on or after 1st October 1999, I agree with the Society and the Charities Aid Foundation ("the CAF") that I will assign to the CAF (or to any charity(ies) nominated by it, or by the Society under the provisions of a deed dated 17th September 1999 between the Society and the CAF, in which case references to the CAF shall include references to any other charity(ies) but to no other person) the rights to any relevant conversion benefits (defined below). This obligation will not apply to me if I fall within any class of persons which, as at today's date, the Society wishes to be excluded from such obligation. This agreement is irrevocable and authorises the Society to transfer to the CAF any such benefits without further notice to me. I understand that neither the Society nor the CAF will release me from this agreement or vary its terms and (except as set out in paragraph 2 below) I will continue to be bound by the above condition even if the Society decides at some time in the future (and announces any such decision by press release (a 'termination notice")) that it is no longer in the best interests of the Society to continue with the above assignment condition generals in respect of new members.
- 2 (a) "Relevant conversion benefits" means any benefits to which I might become entitled as a shareholding member of the Society under the terms of any future transfer of the Society's business to a company (i.e. on a conversion or takeover) which is completed at any time within the 5 years immediate following the date on which my share account is opened. "Relevant conversion benefits" does not include (a) the statutory right to have shares in the Society (including any balances on share accounts) converted into deposits with the company on a conversion or takeover; (b) a right conferred under the terms of a transfer which is publicly announced by the Society more than 3 years after the Society has issued a termination notice.
- (b) If the Society merges with any other society, after the date of such merger the "Society" includes such other society.
- 3. I authorise the Society to pass to the CAF such information relating to me and my accounts with the Society as the CAF may reasonable require in order to administer this agreement to assign and the relevant conversion benefits and for no other purpose. I consent to both the Society and the CAF holding and processing such information for such purposes. A list of the classes of persons which the Society currently wishes to be excluded from the obligation to assign (this list may change from time to time but not with retrospective effect) is available on request from the Society's Secretary at its principal office.

Standard Customer Agreement

This is our standard customer agreement upon which we intend to rely. For your own benefit and protection you should read these terms carefully before signing them. If you do not understand any point please ask for further information

- (a) I confirm that I have read the product terms and conditions relating to the account I am opening and that I have received the General Savings Terms and Conditions and agree to be bound by them and the Rules of the Society (copies of which are available on request) and any subsequent terms and conditions and Rules for the time being in force.
- (b) I confirm that I am aware that the type of account I am opening is a share account and that all subscriptions made and to be made, belong to me.
 - Any share(s) acquired by me under this account will not be held by me as a bare trustee (or, in Scotland, as a simple trustee) for a body corporate,
 - or for persons who include a body corporate.
- (c) I declare that any share(s) acquired by me under this account will not be held by me as a bare trustee (or, in Scotland as a simple trustee) for a body corporate, or for persons who include a body corporate.
- (d) I agree to be bound by the conditions relating to the Agreement to Assign as described above.
- (e) I agree that this account (including all the provisions in this form) and all dealings on it will be subject to English law. If any provision is for any reason unenforceable, this will not affect the enforceability of any other provision.
- (f) I declare that I am a permanent UK resident.

FOR OFFICE USE ONLY

INTERVIEWER

ACCOUNT NUMBER

(g) I consent to the Society using electronic means to verify my identity if required.

Marketing Choices						
The Society, or members of the Society's group of companies, requires your permission to contact you for the purposes of marketing its products and services which we think may be of interest. A list of these companies is available on request. We also require your permission to pass on details to third parties who may contact you about marketing services or products to you.						
If you would like us to keep you up to date with our products, services and promotions, please let us know by ticking one of the boxes below. You'll need to give us individual permission for each type of communication. If you want to change your permissions please let us know.						
I consent to Furness Building Society contacting me for marketing purposes in the following ways:						
By post		Young Person 🗌 Responsible Adult 🗌				
By email		Young Person 🗌 Responsible Adult 🗌				
By SMS (text message)		Young Person 🗌 Responsible Adult 🗌				
By phone		Young Person 🗌 Responsible Adult 🗌				
I consent to Furness Building Society:						
	n (in this form and about my account/s) for marketing purposes with a the Furness Building Society group.	Young Person Responsible Adult				
	n (in this form and about my account/s) for marketing purposes with the Society has a business relationship with.	Young Person Responsible Adult				
Privacy and Your Personal Information I confirm that I have received a copy of 'Key Facts about your personal information and what we do Young Person Responsible Adult Responsible Adult						
with it' which tells me how Furness Building Society processes my information and what my rights are.						
Further information about how your privacy and personal data is processed is available on request or by visiting www.furnessbs.co.uk/privacy-page						
Financial Services Compensation Scheme						
I confirm that I have received a copy of the Financial Services Compensation Scheme Information Sheet Young Person 🗌 Responsible Adult 🗌						
Please make sure you have read and understood all of the declarations above before signing below: Note: The responsible adult takes responisbility (where the young person is under the age of 13) for understanding the terms and conditions and the 'Key Facts about your personal information and what we do with it'						
Young Person (If old						
enough to sign):	Date					
Responsible Adult:	Date					

YOUNG PERSON CUSTOMER NUMBER

DATE OPENED

AUDITED BY

INPUT BY

RESPONSIBLE ADULT CUSTOMER NUMBER

DATE AUDITED

DATA CHECKED BY INPUTTER?

YES/NO