

# Charity Giving Business Account(s) Application Form

Please use black or blue ink and write clearly in the spaces provided in BLOCK CAPITAL letters. Mark relevant boxes with a clear cross.

## 1. TELL US ABOUT YOUR BUSINESS

Business Name (If Sole Trader, your name here)



Limited Company (Private, Public  
& Limited by Guarantee)

Sole Trader

Partnership

Limited Liability Partnership

Company Number (if applicable)

Nature of Business / Partnership

Detailed Description of Activities

### Primary Contact

Title

Forename(s)

Surname

Position Held

Contact Number

Email Address

Business / Partnership Website Address



# Charity Giving Business Account(s) Application form (continued)

## 1. TELL US ABOUT YOUR BUSINESS (continued)

### 1A Business / Names and Addresses

Trading Name (if applicable)

Previous Business / Partnership Name (if applicable)

Registered Address

Correspondence Address (if different to Registered Address)

Postcode

Postcode

Trading Address (if different to Registered or Correspondent Address)

Projected Annual Balance Sheet Total:

<£2m

£2m - £10m

£10m - £15m

>£15m

Projected Annual Turnover/Income

Purpose of the Account (What will the account be used for)

Are you regulated by a Professional Body?

Yes (If YES, please provide details below)

No

Professional Body name:

Registration Number:



# Charity Giving Business Account(s) Application form (continued)

## 1. TELL US ABOUT YOUR BUSINESS (continued)

How long has the Business actively been trading?

### Transactions

Provide details of frequency and volume of average incoming transactions either per month, per quarter or annually

Frequency expected:  Monthly  Quarterly  Annually

Volume

£

Physical  
Cash in %

Volumes to increase in next 12 months?

Yes  No

Cash Turnover to increase in next 12 months?

Yes  No

Plans to grow business in next 12 months? If yes, please provide us with further details

### International Activity

Do you make or receive International Payments?

Yes – Please complete details below  No – Please go to Section 2

Countries of Trade/Geographical Markets

| Country of Trading | When                         |  |
|--------------------|------------------------------|--|
|                    | Now <input type="checkbox"/> | In next the 12 months <input type="checkbox"/> |
|                    | Now <input type="checkbox"/> | In next the 12 months <input type="checkbox"/> |
|                    | Now <input type="checkbox"/> | In next the 12 months <input type="checkbox"/> |
|                    | Now <input type="checkbox"/> | In next the 12 months <input type="checkbox"/> |
|                    | Now <input type="checkbox"/> | In next the 12 months <input type="checkbox"/> |

Overseas Payments

| Country of Trading | Frequency of transactions (e.g. monthly / quarterly / annually) | Will you be trading with:  | Currency | Average transaction amount | Expected payments        |                          |                          |
|--------------------|---|--|----------|----------------------------|--------------------------|--------------------------|--------------------------|
|                    |   |  |          |                            | Inward                   | Outward                  | Both                     |
|                    |   | Business <input type="checkbox"/> Individuals <input type="checkbox"/> |          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                    |   | Business <input type="checkbox"/> Individuals <input type="checkbox"/> |          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                    |   | Business <input type="checkbox"/> Individuals <input type="checkbox"/> |          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                    |   | Business <input type="checkbox"/> Individuals <input type="checkbox"/> |          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                    |   | Business <input type="checkbox"/> Individuals <input type="checkbox"/> |          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Key International Suppliers

| Supplier Name | Country |
|---------------|---------|
|               |         |
|               |         |
|               |         |
|               |         |

Overseas Offices/Outlets/Subsidiaries

| Type | How many Offices/Outlets | Country |
|------|--------------------------|---------|
|      |                          |         |
|      |                          |         |
|      |                          |         |
|      |                          |         |



# Charity Giving Business Account(s) Application form (continued)

## 2. WHO OWNS YOUR BUSINESS AND WHO RUNS IT? (Sole Traders - go to Section 3)

### Beneficial Owners and Company Officials

#### Parent Companies

A Parent Company is a company which holds more than 50% of the voting rights in your business

Do you have a Parent Company?  Yes (Please provide us with a chart detailing the full group structure)

#### Beneficial Owner(s)

For a Limited Company (Private, Public & Limited by Guarantee); a Beneficial Owner is any individual/Business who/that:

- ultimately owns or controls (whether through direct or indirect ownership or control, including through bearer shareholdings) 25% or more of the shares or 25% or more of the voting rights in your business; or
- otherwise exercises control over the management of your business

For a Partnership (inc. Limited Partnership and Limited Liability Partnership)

a Beneficial Owner is any individual who:

- is ultimately entitled to or who controls (whether directly or indirectly) 25% or more of the capital or profits of the business or 25% or more of the voting rights in your business; or
- otherwise exercises control over the management of your business

In all instances, a Beneficial Owner must be identified using the Personal Record Form (regardless of whether or not they will be an account operator).

#### Company / Partnership Organisation Official(s)

For a Limited Company (Private, Public & Limited by Guarantee), Limited Liability Partnership please provide details of all Company Officials (Directors/Designated Members/Company Secretaries). Two of these Company Officials (if two or more exist) are required to be identified using the Personal Record Form (whether they will be an account operator or not) and are required to sign the Declaration page of this Account(s) Application Form.

\*Please note that if one of the Company Officials is a Company Secretary who plays no active role in the Company, there is no requirement for them to be identified and verified and they are not required to sign the Declaration page of this Account(s) Application Form.

This/these Official(s) is/are required to be identified using the Personal Record Form and is/are required to sign the Declaration page of this Account(s) Application Form.

Please use this table to provide details of Beneficial Owners and Company Officials only (as detailed above)

| Name of Individual/Organisation | % Shareholding (if Beneficial Owner) | Position in Business | Is this individual a UK Resident?                           |
|---------------------------------|--------------------------------------|----------------------|---|
|                                 |                                      |                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|                                 |                                      |                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|                                 |                                      |                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|                                 |                                      |                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|                                 |                                      |                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|                                 |                                      |                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |





# Charity Giving Business Account(s) Application form (continued)

## 3. PLEASE SELECT THE ACCOUNT(S) YOU WANT TO OPEN?

### Business Current Account(s)

Business / Partnership Current Account

### Loan Accounts

Business Loan Account

Your account will be opened using your trading name. If you require additional accounts with additional characters e.g. reserve / expenses, then please specify the number of additional accounts and any additional characters.

Please tell us how often you would like to receive a statement: (please tick a box)

Monthly     Quarterly     Annually

To opt out of paperless statements please tick here.

### Business Savings Accounts

If you wish to open a Savings Account, the information in this form regarding term, interest rates and interest payment arrangements shall be Additional Provisions (as defined in the Reliance Bank "Terms and Conditions" brochure).

2 Years Fixed Term Charity Giving Account

1 Year Fixed Term Charity Giving Account

6 Months Fixed Term Charity Giving Account

90 Day Notice Charity Giving Account

35 Day Notice Charity Giving Account

Instant Access Charity Giving Account

### HOW DID YOU HEAR ABOUT US

Email     Digital Advertising     Social Media     Press     Event     Recommendation

Recommended by:

Other (Please specify)

Initial Deposit Amount (refer to the accounts terms and conditions for the exact amount)

What is the source of the initial deposit?

Existing Savings     Maturing Investment     Other (Please specify)



## Important information and customer declaration

### Marketing purposes

If you would like us to send you information on other products and services that may be of interest to you. Please tick the boxes below to tell us the ways you would like to hear from us:

Post  Telephone  Email

You can withdraw your marketing preferences at anytime and update us on how you would like to keep in touch. If you would like to change the way we contact you, please contact us by:

Email on [customer.experience@reliancebankltd.com](mailto:customer.experience@reliancebankltd.com)

Phone us on 020 7398 5400

Or write to us at Reliance Bank Limited

Faith House

23 – 24 Lovat Lane

London

EC3R 8EB

### UK General Data Protection Regulation

We will process your personal information in accordance with the UK GDPR and it will be treated as private and confidential now and in the future. The only exceptions to this will be when the law requires us to disclose information, with your consent or where disclosure is necessary. To fulfil our regulatory obligations any identification documents will be copied and saved on the Bank systems whilst you remain a customer with us.

For more information on how we handle and protect your data, please review our Privacy Notice available at: [www.reliancebankltd.com/privacy-policy](http://www.reliancebankltd.com/privacy-policy)

If you have any queries or require further assistance relating to any other data protection matters, please contact our data protection officer on [dpo@reliancebankltd.com](mailto:dpo@reliancebankltd.com) or 020 7398 5400.



Registered Office: Reliance Bank Limited, Faith House, 23-24 Lovat Lane, London EC3R 8EB

Tel: 0207 398 5400 · Website: [www.reliancebankltd.com](http://www.reliancebankltd.com)

Reliance Bank Limited is authorised by the Prudential Regulation Authority and regulated by the Prudential Regulation Authority and the Financial Conduct Authority.

# Charity Giving Business Account(s) Application form (continued)

## 4. IMPORTANT INFORMATION

### Authorities, Representations and Warranties

It should be noted that the use and acceptable operation of Reliance Bank Accounts are stipulated by the Reliance Bank Business Terms and Conditions and the relevant 'Summary Box' fact sheet.

Please refer to the Reliance Bank Business Terms and Conditions for a full description of the eligibility criteria applicable to each type of Account and product factsheet for key features (including but not limited to charges and interest).

Please read and confirm the following:

1. By signing this form the Sole Trader, Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership, ('You') request Reliance Bank to open the specific type of Business applied for, for the term selected (if applicable).

2. By signing this form 'You' agree and, where applicable, represent that:

I) the account(s) and related services, if this application is accepted, will be directed and mandated by the Reliance Bank Business Terms and Conditions and the relevant product factsheet, both of which may undergo periodic review and amendments as necessary.

II) business has all necessary (and legal where applicable) authority to enter into the agreement of Reliance Bank Business Terms and Conditions upon this account application.

III) all information set out in this form is true, accurate and complete and further you undertake to indemnify Reliance Bank against any loss, charge or expense that Reliance Bank may suffer or sustain and to absolve Reliance Bank of all liability for loss or damage which the applicant business may sustain as a result of Reliance Bank acting in reliance on this application and where applicable, 'You' represent and warrant in favour of Reliance Bank that this application does not, and the accounts and related services if offered will not, contravene the terms of the business's constitutional documents or the terms of any agreement to which the business / charity is a party.

3. By signing this form 'You' acknowledge receipt of the Financial Services Compensation Scheme Information Sheet.

The signature(s) below constitute(s) (as may be relevant):

I) application on behalf of the Sole Trader, Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership) or, Limited Liability Partnership, for a Business Account(s) and/or Business Savings Account(s) in accordance with the provisions of Section 3;

II) as well as the Mandate to Reliance Bank

4. I/we have read and agreed to the Charity Giving Instant Access Personal Savings Account and / or 35/90 day Notice Business or Fixed Term Deposit Account(s) Terms and Conditions (T&C's) and Reliance Bank Business Terms and Conditions.

5. I/we acknowledge receipt of the FSCS information Sheet and Exclusions List Bank in relation to the Sole Trader, Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership's use and operation of its account(s) with Reliance Bank

## 6. SIGNATURES

Sole Trader (Please circle)

Director / Company Secretary / Member / Partner  
(Please circle)

Director / Company Secretary / Member / Partner  
(Please circle)

on behalf of the Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership.

on behalf of the Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership.

Print Name

Print Name

Signature

Signature

Date

Date





# Business Account(s) Application Mandate

The Business Account Mandate Form should be completed when appointing new or removing existing Signatories for Business accounts.

Please use black or blue ink and write clearly in the spaces provided in BLOCK CAPITAL letters. Mark relevant boxes with a clear cross.

## 7. MANDATE

Please complete the account specific mandate/s below on how individuals linked to the account can access each account. Completion of this Mandate authorises Reliance Bank to accept all instructions given, or acts performed, in accordance with our Terms and Conditions and/or this Mandate on behalf of the Business Customer by account signatories.

### Definition

#### Account Signatory

An Account Signatory is an Account Operator who can have full access on an Account in accordance with the instructions set out in this Mandate.



# Business Account(s) Application Mandate (continued)

## 7. MANDATE (continued)

|           |                |  |
|-----------|----------------|--|
| Account 1 | Account number |  |
|-----------|----------------|--|

### Signing Rules

- One to Sign     
  Two to Sign     
  Specific Mandate Instruction (include the specific amount limit in the box below which will apply to all linked accounts)

| Name | Position | Signature | Digital Access Banking                                      | Debit Card Required   |
|------|----------|-----------|---|---|
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |



# Business Account(s) Application Mandate (continued)

## 7. MANDATE (continued)

|           |                |  |
|-----------|----------------|--|
| Account 2 | Account number |  |
|-----------|----------------|--|

### Signing Rules

- One to Sign     
  Two to Sign     
  Specific Mandate Instruction (include the specific amount limit in the box below which will apply to all linked accounts)

| Name | Position | Signature | Digital Access Banking                                      | Debit Card Required   |
|------|----------|-----------|---|---|
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|      |          |           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |



## Business Account(s) Application Mandate (continued)

### 8. AUTHORITIES, REPRESENTATIONS AND WARRANTIES

Please read and confirm the following:

By signing this application form we acknowledge that we have read and understood Reliance Bank's Business Terms and Conditions, the 'Banking with Reliance Bank' information sheet, and, where appropriate, Reliance Bank's Corporate Visa Debit Card Terms and Conditions.

We authorise Reliance Bank Limited to make any enquiries which are considered appropriate whilst processing this application, and we confirm that the information given is accurate and true to the best of our knowledge. The personal information we have collected from you will be shared with credit reference agencies and they will give us information about you, such as about your financial history. We do this to assess creditworthiness and product suitability, check your identity and we also share your information with fraud prevention agencies who will use it to prevent fraud and money laundering and to verify your identity. If fraud is detected, you could be refused certain services, finance, or employment. Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found in our Privacy Policy, which can be found on the footer of our Reliance Bank Ltd website, or by writing to our head office at Reliance Bank, Faith House, 23-24 Lovat Lane, London, EC3R 8EB.

We certify that the above is a true excerpt from the recorded minutes of a meeting of this company, and that the specimen signatures are correct in providing the email address you agree that it may be used by us to contact you concerning matters relating to your account with us.

### 9. DECLARATION AND SIGNATURES

I/We confirm that the names, residential addresses, dates of birth, official positions, and specimen signatures of the account signatories, as set out in Section 3 and their respective Business Individual Identification & Verification forms (which shall form part of this Mandate), are true and correct.

I/We confirm that the Mandate has been completed, signed and dated under the authority properly conferred by any constitutional documents and (if applicable) by a duly constituted and quorate meeting of; for example, the Board of Directors or Officers of the Association; and that such authority has not been amended or revoked and otherwise remains in full force and effect as at the date indicated below next to my/our signature.

Sole Trader (Please circle)

#### Existing Account Signatory

on behalf of the Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership.

Print Name

Signature

Date

#### Existing Account Signatory

on behalf of the Limited Company (Private, Public & Limited by Guarantee), Partnership (inc. Limited Partnership), Limited Liability Partnership.

Print Name

Signature

Date

