

APPLICATION FORM AND MANDATE FOR LIMITED COMPANIES INTRODUCED BY ACCOUNTANTS



For action by Accountant only

£ Sterling Master Account number

£ Sterling Account number allocated

€ Euro Master Account number

€ Euro Account number allocated

\$ US Dollar Master Account number

\$ US Dollar Account number allocated

Please complete this form in BLOCK CAPITALS and black ink and return it in the pre-paid envelope provided to: **Cater Allen Private Bank, 9 Nelson Street, Bradford, BD1 5AN**. If you need any help completing this form, please call us on **0800 092 3300**.

1 Which account(s) are you applying for?

Applicant to complete

Public Limited Company Private Limited Company
(not including listed PLCs)

Hereafter known as the 'organisation'.

Please tick which account(s) you wish to apply for. Indicate the amount to be deposited; and if a cheque, paying-in book and/or Visa Deferred Debit card are required; and if you would like an internet banking password for each applicant.

Reserve Account ¹	Chequebook	Over the counter Paying-in Book	Postal deposit Paying-in Book	Debit Card ³
<input type="checkbox"/> £ Sterling <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> € Euro <input type="text"/>				<input type="checkbox"/>
<input type="checkbox"/> \$ US Dollar <input type="text"/>				<input type="checkbox"/>
Asset 30 Account ¹ (minimum £5,000)		Over the counter Paying-in Book	Postal deposit Paying-in Book	
<input type="checkbox"/> £ Sterling <input type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	

2 Visa Business Deferred-Debit Card (Reserve account only)

Applicant to complete

As Visa Cards operate on a single signature, they are only available where the Account Mandate allows for all transactions to be signed by any one of the Authorised Signatures. Please note: maximum of two cardholders allowed per account, and both must be a signatory on the account (please refer to the Authorised Signatories section).

First cardholder

Name of individual cardholder

Reserve Account

£ Sterling € Euro \$ US Dollar

Second cardholder

Name of individual cardholder

Reserve Account

£ Sterling € Euro \$ US Dollar

(For notes, please refer to page 10.)

3 Please tell us the details of your organisation

Applicant to complete

We can only consider your application if all fields within this section are completed.

If your organisation already holds an account with us, please tell us your account number.

Name to be shown on new account

This name must reflect or include the organisation name or trading name.

This is the name that will appear on chequebooks and paying-in books where applicable. There is room for a maximum of 22 characters per line.

Contact name

Position in organisation

Name of organisation, as well as trading name and/or registered corporate name if these are different.

Nature/purpose of the organisation (please list the main activities that the organisation is involved in).

A brief description of the organisation's activities.

Who do you provide services to, or do business with (e.g. general public, UK companies, overseas companies etc)?

In which country(ies) are your customers or the companies/individuals you undertake business with based?

In which country is your organisation established/registered (if not the UK)?

Registered office address (this information must match Companies House records).

Principal trading address (if different to registered address).

Postcode

Address for correspondence (if different to registered/trading address).

Postcode

Registered number

Business telephone number (if applicable)

Mobile (if applicable)

Business fax (if applicable)

Email (optional information)

Standard Industry Classification (S.I.C.) code if known.

Where do you expect deposits/payments to come from (please tick all that apply):

Trading Salary generated from business
 Transfer from other accounts in your name Other

If 'Other', please state

Please confirm the source of wealth (please tick all that apply). Please note that in some circumstances we may be required to revert to you for corroboration of this information.

Trading Other

If 'Other', please state

What will this account be used for?

Savings Current/Trading
 Other

If 'Other', please state

Anticipated overall business turnover

£ per annum

Anticipated activity through this account

£ per annum

4 Your personal details

Applicant to complete

In order to ensure that the Bank's information is always up to date, and to comply with Anti-Money Laundering Regulations, we are required to identify and verify all applicants for accounts, as well as certain other parties to the relationship. In some circumstances we may not be able to process this request without this information.

If this application form does not provide you with enough space for the personal details of all required parties, please photocopy the 'further applicant' section of the form or visit our website to download the "Additional Applicant Form" (www.caterallen.co.uk/business-banking) then complete for each additional person and attach all relevant pages to this application.

Required Parties: Directors, Company Secretaries, Authorised Signatories, Major Shareholders (25% or more).

Please note: 25%+ Shareholders who are not Authorised Signatories on this Account must also sign the acceptance section at the end of this application form.

First applicant

If you are an existing Cater Allen Client, please provide your Cater Allen account number

Which of the following are you? Please tick the appropriate box(es).

Director Company Secretary

Authorised Signatory 25%+ Shareholder

If you are a 25%+ Shareholder then please tell us what % you hold: %

Mr Mrs Ms Miss

Other If 'Other' please state

Forename(s)

Middle name(s)

Surname

Any other name you have been, or are, known by

Date of birth

Nationality

Do you have dual nationality?

Yes No

If 'Yes' please specify which country

Current home address (permanent residential address)*

Postcode

Country of residence

How long have you been at your current home address?

Years Months

Telephone (day)

Telephone (eve)

Mobile

Email (optional information)

Previous home address if less than three years at address shown within 'Current home address' field. (If more than one address in the last three years, please provide details of all other addresses on a separate sheet.)

Postcode

How long did you live at this address?

Years Months

Internet Banking Access for Customer³

Please do not tick the following box if you already have Cater Allen Internet Banking Access.

I would like Internet Banking access (all accounts will appear within Internet Banking):

* This is the address to where your Personal Access Code (PAC) and Internet Banking Password (IBP) will be posted. **C/O and PO Box addresses are not acceptable**

4 Your personal details (continued)

Applicant to complete

Further applicant

If you are an existing Cater Allen Client, please provide your Cater Allen account number

Which of the following are you? Please tick the appropriate box(es).

Director Company Secretary

Authorised Signatory 25%+ Shareholder

If you are a 25%+ Shareholder then please tell us what % you hold: %

Mr Mrs Ms Miss

Other If 'Other' please state

Forename(s)

Middle name(s)

Surname

Any other name you have been, or are, known by

Date of birth

Nationality

Do you have dual nationality?

Yes No

If 'Yes' please specify which country

Current home address (permanent residential address)*

Postcode

Country of residence

How long have you been at your current home address?

Years Months

Telephone (day)

Telephone (eve)

Mobile

Email (optional information)

Previous home address if less than three years at address shown within 'Current home address' field. (If more than one address in the last three years, please provide details of all other addresses on a separate sheet.)

Postcode

How long did you live at this address?

Years Months

Internet Banking Access for Customer³

Please do not tick the following box if you already have Cater Allen Internet Banking Access.

I would like Internet Banking access (all accounts will appear within Internet Banking):

* This is the address to where your Personal Access Code (PAC) and Internet Banking Password (IBP) will be posted. **C/O and PO Box addresses are not acceptable**

5 Details about your Accountant

Applicant to complete

Were you introduced to Cater Allen by an Accountant?

Yes No

If 'Yes', please complete the details below.

Name of Accountant

Address of Accountant

Postcode

Telephone

Contact name

Email (optional information)

6 Asset 30 Account Income Facility

Applicant to complete

Complete this section if you are applying for an Asset 30 Account and wish for the interest to be swept into another account as monthly income.

Sort code

 - -

Account number

Account name

Name of Bank or Building Society

Branch address

Postcode

7 About the interest

Applicant to complete

Please tick the following box to confirm as to whether your Account is eligible for gross interest. In the event that your account is eligible, please include your registered company number in the box provided.

Registered company number

8 Data Protection Statement

Applicant to complete

Providing you with information

I confirm that I am entitled to disclose information about any parties named on the application form. If this application is made in joint names "I" in the statement below should be read as "we" where appropriate.

Using my personal information

Whether or not I become a customer, you may use all the information I give to you Cater Allen Private Bank, or you hold on me, including transactional data, to provide and run the account or service I have applied for. This includes information about the conduct (including details of transactions) of any account or policy that I have with you, a group company or an associated company. You may also use my information to help you develop and improve your products and services. You will keep information about me after my account is closed.

Sharing my personal information

You may share my information for the purposes described in this statement with the group of companies to which you belong (the Santander group) and your associated companies, and with service providers or agents. These companies may be based in other countries. I understand that you will make sure that my information is only used in line with your instructions and your own strict policies on confidentiality. If you transfer my information to another country, you will also make sure that you give it the same levels of protection as needed under the UK Data Protection Act. You may also give essential information about my account and cards (if any) to others if needed to run my account and for regulatory purposes.

My marketing preferences

- You may invite me to take part in market research surveys. If I don't want to be included in market research, I can tick this box:

If I have been introduced to you via an Accountant I understand that you will not use my information for marketing purposes (although I may still receive details of products and services from other Santander group companies if I have agreed with them to receive such information).

If I am a customer dealing directly with Cater Allen Private Bank you may identify and let me know by post, telephone or electronic media (including email and SMS) of products or services, which you think may interest me. (If I am aged over 18, when deciding whether to provide me with details of a credit product you may search the files of credit reference agencies who will not make a record of this search available to other lenders who search my file.)

If I don't want information on other products and services I can tick the following boxes. Please do not contact me:

by telephone by post by e-mail
by SMS (when available)

Unless I have said otherwise, by continuing with this application I agree to you contacting me using any of the methods shown above.

I understand that I may receive details of products and services from other Santander group companies if I have agreed with them to receive such information.

Credit reference agencies – Reserve Account applications

I understand that when you assess this application, and any future increase in my credit or overdraft limit (this does not apply to those under 18), you will use the information for credit assessment, which may include credit scoring. You may make any enquiries relating to me and my business that you consider necessary (for example, from another financial institution) and search the files of credit reference agencies at my business and home address, which will keep a record of each search. This could affect my ability to get credit elsewhere within a short period of time. Details about this application (whether or not it goes ahead) will be recorded at the credit reference agency. A financial link between joint applicants or between myself and any other person will be created at the credit reference agency. This will link our financial records, where each will be taken into account in all future applications by either or both of us. If I already have a financial association you will assess my application on this basis. This situation will continue until one of us successfully files for a 'disassociation' at the credit reference agency. You will also pass details about me, my business and how I run my account (if my application is successful) to credit reference agencies. When appropriate the credit reference agencies and/or fraud prevention agencies will also record details of my agreement with you, the payments I make under it and any default or failure to keep to its terms and any deliberate non-payment following a change of address without notice.

Verifying my identity and fraud checks

Before you can open this account or set up my policy, in order to prevent or detect fraud you will check and share the information provided in this application or at any stage with fraud prevention agencies, and may make searches at credit reference agencies who will supply you with information, including information from the electoral register, for the purposes of verifying my identity. Scoring methods may be used to verify my identity. A record of this process will be kept that may be used to help other companies to verify my identity. If false or inaccurate information is provided and fraud identified details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information.

You and other organisations may search and use the records held by credit reference and fraud prevention agencies to prevent and investigate crime, fraud and money laundering and for example:

- to check details on applications for credit and credit related or other facilities
- to verify my identity if I or my financial associate applies for other facilities
- to undertake statistical analysis and system testing
- to manage credit and credit related accounts or facilities
- to recover debt and trace my whereabouts
- to check details on proposals and claims for all types of insurance
- to check details of job applicants and employees

You may also search and use your internal records for these purposes.

8 Data Protection Statement (continued)

Applicant to complete

You and other organisations may search and use from other countries the information recorded at fraud prevention agencies. I understand further information on the credit reference agencies and fraud prevention agencies you use is available by telephoning your Agents on 0800 092 3300.

Cards on my account

If I have cards on this account, I understand that you may give information on transactions I have made using my cards on my account to any payment system under which you issue my cards (for example Visa

or MasterCard), who may transfer the information overseas to deal with transactions, to resolve disputes and for statistical purposes.

Access to my information

I understand I have the right to see certain records you hold about me if I pay a fee* and I can get an information sheet (Subject Access Info Sheet) explaining my rights by calling 0800 092 3300.

* Please see Banking Tariff for details.

9 Declaration and Mandate

Applicant to complete

Private Limited Company/Public Limited Company

I/We confirm that a meeting has taken place and the Board of Directors passed a Resolution to open an Account with Cater Allen Private Bank and that Resolution has been duly recorded in the minute book.

I/We, (the 'Account Holder') being a Private Limited Company/Public Limited Company hereby apply to open an Account ('the Account') with Cater Allen Private Bank ('the Bank') on the published Terms and Conditions thereof ('the Conditions'), which we acknowledge having received and to which we agree to be bound and any subsequent amendments which the Bank may inform us of from time to time, and in accordance with the Mandate below which shall remain in effect until a new Mandate is executed, and which we understand and accept and hereby request and authorise the Bank:

- (a) To honour and comply with all cheques drawn on our behalf and debit such cheques to the Account;
- (b) To honour and comply with all instructions for withdrawal from the Account;
- (c) To collect for credit to the Account, all instruments endorsed on behalf of the Account Holder as named above.

Provided that such cheques, instructions or endorsements are signed by our Authorised Signatories as detailed below (please complete and tick the appropriate boxes):

You can choose the number of signatories you wish to have on your account. Please tick only ONE of the boxes below.

Total number of Authorised Signatories to be held on this account: (Please write only one number in this box)

Please note that if any Visa Deferred-Debit cards are issued on the Account, then the Account must be set up so that only ONE signature is required to authorise any transaction.

You can choose the number of signatories required to authorise any single transaction. Please tick any one of the boxes below.

- any one signature
- any two signatures
- more than two signatures, please specify how many

The instructions of the signatories appearing in section 11, when appearing in accordance with the current Mandate to operate the above account, will be honoured whether the Account is in credit or debit.

Provided further that the Bank be furnished with a list giving the full names and specimen signature and documentary proof of name and home address of each of the persons referred to in section 11, certified, where applicable, by the Company Secretary and that the Bank receives notice in writing of any change there may be or any further such list, in each case and the Bank may be assured that any Resolutions have not been amended or revoked until it receives notice in writing thereof.

I/We authorise the Bank to make enquiries and to take up references as it considers appropriate in connection with this application form and this authorisation is to remain effective until the Bank receives our written notification to the contrary.

I/We agree that any indebtedness or liability incurred to the Bank under this authority shall, in the absence of any express written agreement by the Bank to us, be due and payable on demand.

I/We shall, as and when necessary, supply to the Bank lists of current Directors and, if applicable, other officials authorised to sign, with specimen signatures in accordance with the current Mandate to operate the above Account.

Upon any Directors ceasing to be a member of the Company by death or otherwise, the Bank may, in the absence of written notice to the contrary from us treat the surviving continuing Directors for the time being as having full power to carry on the business of the Company and to deal with its assets as freely as if there had been no change in the Company.

I/We authorise the Bank to disclose details of that Account to our Accountant as named on this application, or their successors in title (unless advised to the contrary).

Copy Statements Preferences

Please read the following preferences and confirm as to whether or not you wish your Accountant to receive copies of all statements issued in respect of your Account by ticking the corresponding box:

I/We authorise the Bank to send copies of all statements issued in respect of my/our Account

I/We **do not** authorise the Bank to supply copies of all statements issued in respect of my/our Account

The Bank is hereby authorised to comply with all withdrawal instructions given by facsimile, providing that such instructions are signed in accordance with the current Mandate to operate the above Account. The Bank may act upon such instructions immediately and without further enquiry unless it has cause to be suspicious as to the nature and content of the request.

I/We understand that the Bank accepts no liability whatsoever in respect of any losses which may be suffered as a result of any fraud or negligent misuse of the banking services including telephone banking unless such loss occurs as a result of fraud or negligence on the part of the Bank or its employees or agents.

The above authority shall remain in force until the Bank receives written notice of its revocation, notwithstanding any change in our constitution (or name), and shall apply notwithstanding any change by death, bankruptcy, retirement or otherwise.

Changes to Signatories

The Bank will not accept changes in Authorised Signatories unless detailed on our appropriate Renewal Mandate form.

Closure of Account

The Bank will not accept notification of closure of this Account unless it is authorised by the correct signatories as detailed on the valid Mandate that is in existence at that point in time.

Any individual who wishes to be able to view and/or transact on this account must be identified as an Authorised Signatory. If an individual is not identified as an Authorised Signatory then we will not accept their signature as authorisation to carry out a transaction, e.g. on a letter, on a cheque, on a faxed request, etc.

Individual Authorised Signatories

The following Signatories are authorised to operate this account ("The Account") with Cater Allen Private Bank ("The Bank").

By signing this application form we agree that:

- We have read and understand the Declaration and Mandate and Data Protection Statement, and agree that you can use our information as stated in the Data Protection Statement
- We have received and accept the Terms and Conditions of this Account (or those Accounts applied for) and agree to also be bound by any subsequent amendments advised to us by the Bank from time to time
- We hereby certify that the information provided in this application form is, to the best of my knowledge and belief, accurate and complete in all respects

First signatory

Full name

Position

Signature

Date

Third signatory

Full name

Position

Signature

Date

Second signatory

Full name

Position

Signature

Date

Fourth signatory

Full name

Position

Signature

Date

11 The Financial Services Compensation Scheme (FSCS)

Applicant to complete

The Financial Services Compensation Scheme (FSCS) is the UK's statutory fund of last resort for customers of financial services companies. This means that the FSCS can pay compensation to consumers and small businesses if a financial services company is unable, or likely to be unable, to pay claims against it. The FSCS is an independent body, set up under the Financial Services & Markets Act 2000 (FSMA).

All banks have to maintain records to help determine the eligibility of their customers under this scheme. To help us determine the eligibility status of your company under these regulations we need some additional information about your business. We may also need to contact you from time to time to make sure that this information is up to date.

Please complete section A OR B according to your organisation type (please do not complete both sections).

Section A.

All companies and other corporate bodies (excluding unincorporated associations and mutuals):

Is your company deemed a **small company*** under sections 382 & 383 of Companies Act 2006?

Yes No

*Under the Companies Act, a company is deemed to be small if it meets **two or more** of the following three criteria:

1 Annual turnover

Companies: £6.5 million or less

Parent Companies: £6.5m net or less, or £7.8m gross or less

2 Balance sheet

Companies: £3.26 million or less

Parent Companies: £3.26m net or less, or £3.91m gross or less

3 Employees – 50 employees or less

There are additional qualification requirements; please refer to the Companies Act to see the full requirements, or alternatively speak to your accountant.

Section B.

All unincorporated associations and mutuals:

Please indicate whether your organisation has net assets of £1.4 million or less

Yes No

A parent company's eligibility is established by aggregating its thresholds with those of its subsidiaries.

12 Required Documents

Applicant to complete

Impersonation checks/non-face to face verification

As a means of verifying identity, electronic checks are undertaken by the Bank on all applicants and related parties included in the Personal details section. Specific supporting documents are required for submitting in conjunction to these electronic checks.

Please read and select from **one** of the following options by ticking the corresponding box:

I/We have completed the separate Customer Identification Requirements Sheet* and provided copies of the necessary ID documents that have been certified as "a true copy of the original" by a "professional" (Bank employee, Lawyer, Accountant or Notary) in the UK or an equivalent jurisdiction**. Certification of these documents (via a signature) must include the position and contact details of the certifier.

or:

I/We have enclosed a personal cheque written from an account in my/our name with a bank in the UK or an equivalent jurisdiction for the total amount I/We wish to place on deposit and made payable to the name of the Account.

or:

I/We acknowledge that an impersonation check in the form of a letter will be sent to the home address of each person(s) included in the Personal details section(s) by the Bank and that I/We will complete the relevant section of this letter and return to Cater Allen Ltd in order that the verification process can be completed and your Account activated. Please note that if this option is taken, the account will not be activated until the signed letter is received by Cater Allen.

- **Please note:** If you are a Private or a Public Limited Company and the Shareholders/Directors/Company Secretary/Designated Members details have recently changed, please supply copies of the appropriate Companies House forms.

Once you have selected from the relevant option above, please progress to the Acceptance section.

* The Customer Identification Requirements Sheet can be accessed via www.caterallen.co.uk.

** If these documents are not certified by a "professional", then we will be required to carry out additional identity checks

Please note: Absence of any required documents will result in delays to the opening of your account.

This Acceptance should be signed by all applicants.

For Private Limited Companies, we will also require the signature of either;

- 2 Directors

or:

- 1 Director and the Company Secretary

or:

- Sole Director

By signing this Application Form we agree that:

- I/We have completed all relevant sections of this application form
- I/We have read and understand the Declaration and Mandate and Data Protection Statement, and agree that you can use our information as stated in the Data Protection Statement
- I/We have received and accept the Terms and Conditions of this Account (or those Accounts applied for) and agree to also be bound by any subsequent amendments advised to us by the Bank from time to time
- I/We hereby certify that the information provided in this application form is, to the best of my knowledge and belief, accurate and complete in all respects
- Cater Allen Private Bank is duly authorised to operate the Account(s)

Signature of first person

Full name

Position

Signature

Date

Signature of second person

Full name

Position

Signature

Date

Signature(s) of 25%+ Shareholders who are not Authorised Signatories on the Account

Signature of first person

Full name

Position

Signature

Date

Signature of second person

Full name

Position

Signature

Date

- ¹ If you are opening a Reserve Account and/or an Asset 30 Account and would like to make the initial deposit by cheque, it is required that the cheque is made payable to the name that you wish your new Account to be in. No cash, postal orders or third party cheques can be accepted.
- ² Please note that only fully transactional sterling accounts, requiring a single signature to transact, have full Internet Banking functionality. All other accounts will have View Only access.
- ³ If you request a Debit Card, it will be sent to you when the opening funds are available on your account.

For CAPB completion only

Marketing Code

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Cater Allen Private Bank is able to provide literature in alternative formats. The formats available are: Large Print (as recommended by RNIB), Braille, Audio Tape and PC Disk. If you would like to register to receive correspondence in an alternative format please contact us on 0800 092 3300. For the hard of hearing and/or speech impaired please use the Typetalk service via 18001 0800 092 3300.

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