

Business customer application form

Please ensure you tick the relevant boxes and complete in ink using BLOCK CAPITALS or fill out the form digitally before printing.

Please ensure you read the following section carefully and tick the boxes to help confirm you have completed each section.

Sections 1-10 have been completed

Complete section 11 if you are applying for a transactional banking account

Complete sections 11 and 13 if you are a charity, club or association

Section 16 has been signed. For Limited Companies by either two Company Directors that are registered at Companies House or a Director and Company Secretary

A Group Structure chart has been provided/attached to this application?*

Financial accounts and/or business plan have been provided/attached to this application (where applicable)?

Last three consecutive months business bank statements have been provided/attached to this application if you are switching your banking to us

Last three consecutive months personal bank statements have been provided/attached to this application for two Directors/Owners of the business if the business is a start-up

A Trust Deed has been provided (for Trusts or where a Trust is part of the ownership structure)

*The Group structure chart is only required where there are two or more companies in the group and should be provided on company headed paper and include the following:

- All levels of ownership upwards (including intermediate owners) from the applicant in this form
- Each level of ownership should include the following details
 - Company name
 - Company registration number
 - % ownership
 - Country of incorporation
 - Full Registered Address
 - Whether each Company in the Group is Regulated or Listed on a Stock Exchange
- To be signed by one of the Company Directors or Company Secretary and include the following statement:

^{&#}x27;I confirm this is a true and accurate ownership structure chart for "insert business name".

Glossary of terms

The following terms appear in this application form

"Holding Company"

A holding company is a company that does not have any operations, activities, or other active business. Instead, it owns assets.

"Bearer Share"

A share of the company. The owner of the bearer share can change by passing over ownership of the share certificate.

"Shell Company"

A company which serves as a vehicle for business transactions without itself having any significant assets or operations.

"Offshore Vehicle"

A company or trust established overseas to hold a company's assets.

"Non-charitable UK Trust"

A UK based trust that exists to advance a non-charitable purpose, i.e. does not benefit humans, animals or specific groups.

"Foreign Controlled Corporation"

A business for which strategic decisions and control is undertaken from a different jurisdiction.

"Non UK Trust"

A non-UK domiciled trust of which the beneficiaries and/or trustees reside overseas.

"Ultimate Parent Company"

The top responsible company in a business' structure and has subsidiaries or branches. It is not controlled by another company.

"Subsidiary"

This is a company controlled by another company that owns equal to or more than 50% of its voting stock.

"Intermediate Owner"

An Intermediate Owner is an Entity or legal arrangement that sits between the Customer and the Ultimate Beneficial Owner.

"Ultimate Beneficial Owner and/or Key Controller"

The Ultimate Beneficial Owner is an individual who ultimately owns the top Company within a Group.

The Key Controller is someone who is elected or appointed to exercise more direct control over the legal entity, by participating in the governance or senior executive activities of the business. Key Controllers typically set the strategic direction of the entity. Most commonly, Key Controllers will include the Chief Executive Officer (CEO), Chief Financial Officer (CFO), Managing Partner and Chairman of the Board. If a person or legal entity is mandated sole control over a product or service (e.g. if only one signature is required on a cheque) they are also considered a Key Controller.

"Authorised Signatory"

Is an employee who receives delegated authority to the businesses HSBC products and services

"Director"

A Director is an appointed member of a business Board and may be either an executive or a non-executive. A Director may or may not be a Key Controller. Certain Directors and managers will be classified as Key Controllers, due to their ability to exercise significant control over an entity and to have a substantial influence over the day-to-day management of the business.

"Venture Capital"

Venture Capital is generally financial capital provided to early-stage, high-potential or, growth start-up companies.

1. Tell us about your organisation

Full Registered Business /Legal Name Trading Name (if different to Registered Business /Legal Name)

Were you referred/recommended to HSBC? Yes No If Yes, please tell us how you were referred/recommended

HSBC Group referral Referral by another customer Referral by a professional entity

Unsolicited (branch, website, advertisement etc.).

If you were referred/recommended by a professional entity please complete the table below

Full name	Address (inc. country)	Is the professional entity regulated?

Nο

Is this application for a Holding Company? Yes If Yes, what assets do they hold?

What is your business legal status?

eg, (Sole Trader, Partnership, Limited Liability Partnership, Limited Company, Club, Society, Charity, Association, School, College, etc. If your Charity, Club, Society or Association is unregistered, please attach a copy of your constitution rules)

Date of establishment/ (when the business began trading) Date of registration/incorporation (if different from above) Country of registration/ incorporation Company/Limited Liability Partnership Registration Number

Is the business capable of issuing Bearer Shares?

No Yes and bearer shares have been issued Yes but no bearer shares have been issued

Please list your principal business activity(ies)?

Business Activity	% of revenue

Is the business a Regulated Financial Institution Yes No

What is your (the applicant company's) country / countries of residence for tax purposes?

Country 1

Country 2

Country 3

Have you registered for VAT in the EU? Yes No

EU VAT EU VAT

If Yes, please provide details Country Code Registration Number

If your business is part of a franchise, please provide the name of the franchise below

If your business is part of a Traders association or Buyers Group, please provide the name of the association/group below

Is the business or any of its customers or sup	pliers involved in the gar	nbling industry e.	.g. online gambling, cas	sinos?	
Yes – Business If Yes to any of the above please provide de	Yes – Suppliers etails on the involvemen	nt	Yes – Custome	∍rs	No
Is the business a member of a group containi	ng any of the following (1	tick as appropriate	e)?		
Shell Company	Offshore Vehicle		Non-Charitable	UK Trust	
Foreign Controlled Corporation	Non-UK Trust				
Does the business require a licence/permis Please provide the following information:	sion to operate in the U	JK? Yes	No		
Licence/Permit Number					
Name of issuing body (eg, Trade Organisation, Local Magistrate, L	ocal Authority etc.)				
2. Tell us about your Business S	Structure				
Please complete the following section if parent company.	you are part of a Grou	ıp of Companie	s and this application	on is not for the ulti	imate
Name of the ultimate parent company					
Number of Companies in the Group					
What is your Group's turnover on a consolidat	ted basis?				
Country of incorporation / registration of the u	ltimate parent company				
Nature of business / industry for the ultimate	parent company				
Primary country of operation for the ultimate	parent company				
Year of incorporation for the ultimate pare	ent company				
If the ultimate parent company is an existing	g customer of HSBC pla	ease provide det	ails below		
Country of primary HSBC account					
Primary HSBC account number					
Relationship Manager's name within the co (if known)	ountry of account				
Is the ultimate parent company listed on a If Yes, which stock exchange(s) are they list	-			Yes	No
Are any of the Group Companies capable of If Yes, please provide the names of the Group Companies capable of the Group Compa			usiness requiring the a	Yes account:	No
Name of Group Company		Relationship to	business		

3. Existing relationship with HSBC

Business website URL

(if available)

Do you hold any other business accounts with the HSBC Group? Yes No If Yes, please provide the following details: Name of account Name of branch and country Relationship manager's name Account Number where account is held (if applicable) Only complete this section if you are transferring your business account from another bank or if you hold a business account with another bank. Name of current business bankers What are your current business borrowing facilities? Do you currently hold a business credit/charge card? Yes No Only complete this section if your business is a Start Up If your business is a start up, please tell us the total of your personal income last year? How many years experience do you or your business partner/co-director have in this business sector? Have you or your business partner/co-director previously run a business? Yes No How many years have you or your business partner/co-director had a personal bank account. 4. Business Contact Details Registered Office Address Postcode **Business Address** (if different from Postcode Correspondence Address (if different from Postcode Mobile telephone No. Contact telephone number (inc. area code) Fax number (if available) Business email address (if available)

5. Who should we contact at the business for general day to day queries Full name Job title Telephone No. (+ Ext) E-mail address Full name Job title Telephone No. (+ Ext) E-mail address 6. Ownership Information Please provide details of any Ultimate Beneficial Owner of the business with a shareholding of 10% or greater (listed by order of highest shareholding % first). In certain circumstances we may require further information and we will contact you if this is the case First business owner/partner/director/official Full name (including title) and middle name Please list any former names (including maiden name) here. Home address Postcode What is your residential status? (eg, homeowner, tenant, living with parents etc.) Gender Home (please tick) Male Female telephone number What is your date of birth? When did you move in? If you have lived at your present address for less than three years, please complete your previous address below. Home address Postcode If you are a sole trader please list any other address(es) not mentioned above that you have lived at in the last three years Postcode Nationality/Citizenship (if you hold more than one nationality/citizenship please include these details below - you may include up to three): Please provide country of residence for tax purposes (if more than one please include below): Business ownership/Interest percentage Job Title (if applicable) What is your management role? You may select more than one option. **Authorised Signatory** Key Controller Power of Attorney Other Director If other has been selected, please indicate your role in the business

If you are an existing H	SBC personal c	ustomer, please list you	r account numbers and the c	ountry of the account belov	V
Account Number			Country where account	is held	
We may require proo	f of your ident	ity and we will advise	e in due course the docum	entation required.	
Second business own	er/partner/dire	ctor/official			
Full name (including title	e)				
and middle name Please list any former					
names (including maide name) here.	en				
Home address					
			Postcode		
			rosicode		
What is your residential	status?	lag hamagyunar tan	ant living with paranta ata \		
Gender		(eg, nomeowner, ten	ant, living with parents etc.) Home		
(please tick)	Male	Female	telephone number		
What is your date of birth If you have lived at your		s for less than three yea	When did you mov ars, please complete your pre		
Home address					
N. 100			Postcode		
Nationality/Citizenship (if you hold more than o	one nationality/c	itizenship please include	e these details below – you m	ay include up to three):	
Please provide country of	of residence for	ax purposes (if more that	an one please include below):		
Business ownership/Into	erest percentage	9			
Job Title (if applicable)					
What is your managem	ent role? You m	ay select more than one	e option.		
				D'	
Authorised Signat If other has been select		Key Controller ate your role in the busi	Power of Attorney ness	Director	Othe

If this beneficial owner is related to any other beneficial owner, please provide their name(s) and relation below

If you are an existing HSB	C personal cu	istomer, please list	your account numbers and the coun	try of the account belov	W
Account Number			Country where account is he	eld	
We may require proof of	f your identi	ty and we will ad	vise in due course the documenta	tion required.	
Third business owner/pa	rtner/directo	or/official			
Full name (including title) and middle name					
Please list any former names (including maiden name) here.					
Home address					
			Postcode		
M/hat is your racidential at	2+1103		1 0310000		
What is your residential sta	alus?	(eg, homeowner,	tenant, living with parents etc.)		
Gender (please tick)	Male	Female	Home telephone number		
What is your date of birth? If you have lived at your pr	esent address	s for less than three	When did you move in eyears, please complete your previou		
Home address					
			Postcode		
Nationality/Citizenship	nationality/cir	tizanshin placea ina	lude these details below – you may in	actudo un to throot:	
(ii you noid more than one	riationality/Ci	uzeristiip piease iric	nude triese details below – you may ii	icidde up to trifee).	
Please provide country of re	esidence for t	ax purposes (if mor	e than one please include below):		
Business ownership/Intere	st percentage				
Job Title (if applicable)					
What is your management	role? You ma	av select more than	one ontion		
Authorised Signatory If other has been selected		Key Controller	Power of Attorney	Director	Othe
Trouter had been edicated	, prodoc maroc	ato your role in the	040111000		
If this beneficial owner is r	elated to any	other beneficial ow	ner, please provide their name(s) and	I relation below	
If you are an existing HSB	C personal cu	stomer, please list	your account numbers and the coun	try of the account belov	W
Account Number			Country where account is he	eld	

Fourth business owner/partner/director/official Full name (including title) and middle name Please list any former names (including maiden name) here. Home address Postcode What is your residential status? (eg, homeowner, tenant, living with parents etc.) Home telephone number Gender (please tick) Male Female What is your date of birth? When did you move in? If you have lived at your present address for less than three years, please complete your previous address below. Home address Postcode Nationality/Citizenship (if you hold more than one nationality/citizenship please include these details below - you may include up to three): Please provide country of residence for tax purposes (if more than one please include below): Business ownership/Interest percentage Job Title (if applicable) What is your management role? You may select more than one option. **Authorised Signatory** Key Controller Power of Attorney Director Other If other has been selected, please indicate your role in the business If this beneficial owner is related to any other beneficial owner, please provide their name(s) and relation below If you are an existing HSBC personal customer, please list your account numbers and the country of the account below Account Number Country where account is held

We may require proof of your identity and we will advise in due course the documentation required.

Please tell us about any other Ultimate Beneficial Owners, Authorised Signatories, Key Controllers, Power of Attorneys and all Directors or Partners who have not been mentioned previously. If necessary, please photocopy this page.

Gender Gender (please tick) Male Female (please tick) Male Female Full name (inc. title) Full name (inc. title) and middle name and middle name Please list any former Please list any former names (including names (including maiden name) here. maiden name) here. Home address Home address Postcode Postcode What is your What is your residential status? residential status? (eg, homeowner, tenant, living with parents etc.) (eg, homeowner, tenant, living with parents etc.) When did you move in? When did you move in? If you have lived at your present address for less than three years, please complete your previous address below. Postcode Postcode Date of birth Date of birth Nationality/Citizenship (if you hold more than one nationality/citizenship please include these details below - you may include up to three) If you are resident for tax purposes in more than one country please include these below: Business ownership/ Business ownership/ interest percentage interest percentage Job title (if applicable) Job title (if applicable) Management role (you may select more than one option) Management role (you may select more than one option) **Authorised Signatory Authorised Signatory** Key Controller Key Controller Power of Attorney Power of Attorney Director/Partner/Sole Trader Director/Partner/Sole Trader Other Other If other has been selected, please indicate your If other has been selected, please indicate your

role in the business.

role in the business.

Gender (please tick) Full name (inc. title)

and middle name Please list any former names (including maiden name) here.

Male Female Gender (please tick)

Full name (inc. title) and middle name Please list any former names (including maiden name) here.

What is your

Home address Home address

> Postcode Postcode

Male

Female

What is your residential status?

residential status?

(eg, homeowner, tenant, living with parents etc.) (eg, homeowner, tenant, living with parents etc.)

When did you move in? When did you move in?

If you have lived at your present address for less than three years, please complete your previous address below.

Postcode Postcode

Date of birth Date of birth

Nationality/Citizenship (if you hold more than one nationality/citizenship please include these details below - you may include up to three)

If you are resident for tax purposes in more than one country please include these below:

Business ownership/ Business ownership/ interest percentage interest percentage Job title (if applicable) Job title (if applicable)

Management role (you may select more than one option) Management role (you may select more than one option)

Authorised Signatory Authorised Signatory

Key Controller Key Controller

Power of Attorney Power of Attorney

Director/Partner/Sole Trader Director/Partner/Sole Trader

Other Other

If other has been selected, please indicate your If other has been selected, please indicate your

role in the business. role in the business. Gender

(please tick)

Male

Female

Gender

(please tick) Full name (inc. title)

and middle name

names (including

Please list any former

maiden name) here.

Male

Female

Full name (inc. title) and middle name Please list any former names (including

maiden name) here.

Home address

Home address

Postcode

What is your

residential status?

(eg, homeowner, tenant, living with parents etc.)

What is your residential status?

(eg, homeowner, tenant, living with parents etc.)

When did you move in? When did you move in?

Postcode

If you have lived at your present address for less than three years, please complete your previous address below.

Postcode

Postcode

Date of birth

Date of birth

Nationality/Citizenship (if you hold more than one nationality/citizenship please include these details below - you may include up to three)

If you are resident for tax purposes in more than one country please include these below:

Business ownership/ interest percentage

Job title (if applicable)

Business ownership/ interest percentage Job title (if applicable)

Management role (you may select more than one option)

Management role (you may select more than one option)

Authorised Signatory

Key Controller

Power of Attorney

Director/Partner/Sole Trader

Other

If other has been selected, please indicate your role in the business.

Authorised Signatory

Key Controller

Power of Attorney

Director/Partner/Sole Trader

Other

If other has been selected, please indicate your role in the business.

If any Ultimate Beneficial Owner/Key Controller is a company or an LLP, please complete the following section:

Company name			Company name		
Company number			Company number		
Business ownership/ interest percentage			Business ownership/ interest percentage		
Country of Incorporation			Country of Incorporation		
Is the Company listed on a stock exchange? If Yes, name of the stock exchange(s)	Yes	No	Is the Company listed on a stock exchange? If Yes, name of the stock exchange(s)	Yes	No
Is the Company Regulated?	Yes	No	Is the Company Regulated?	Yes	No
If Yes, please provide the nar	me & count	ry of Regulator	J		
Name			Name		
Country			Country		
If any Ultimate Beneficial	Owner/K	ey Controller is a Trust o	r Foundation, please comp	olete the fo	ollowing section
Full Name of the Trust/Foundation		,			
Is this a trust or a Foundation? Trust/Foundation/ ownership interest %	Trust	Foundation			
Country of Trust/ Foundation establishment					
Address of Trust/Foundation					
			Postcode		
What is the nature, purpose	and objectiv	ves of the Trust/ Foundation?			
What is the approximate nur	nber of Ber	neficiaries?			
Name of Regulator of the Tru	ust (where a	applicable)			
If any Ultimate Beneficial	Owner/K	ey Controller is a Govern	ment Body, please comple	ete the fol	lowing section
Name of Government Body Business ownership/ interest percentage					·
Country of Incorporation					
Permanent address					
			Postcode		

Full Name					22 1 1 1 2	D	11/2 /5	
	Cı	urrent / previous posi	tion held	Country	position held in	Dates he	eld (to/from)	
to be of influence i Military or Judicial							sidered Yes	No
Full name of associates or family member	Relationship to influential persor	Current/previous	Country held in	position	Date held from	Date held to	Full name o	
	annual revenue of a start-up please a	the business? dvise based on the b			r Ranks)			
What is the approx	kimate size of your Funds & Non-Bar	assets under manag nking Financial Institu	gement?	ipariies oi	Darikay			
Country of primary		ons by of the businesses	premises,	/people ar	re based)			
Country of primary	where the majori	ey of the businesses Exchange?	premises,	/people ar	re based)		Yes	No
Country of primary (this is the country Is this Company list Yes, which Stock Please confirm if to the business in	where the majoring sted on any Stock of Exchange and Control of the last five years	ey of the businesses Exchange? buntry? een any material cha			re based)		Yes Yes	No No
Country of primary (this is the country Is this Company list this Company list f Yes, which Stock Please confirm if the fusiness in If Yes, please proven Please provide nar	where the majoring where the majoring sted on any Stock is Exchange and Countries where have there be the last five years ide details of the countries of the countries of the countries where the majoring steel and the majoring steel and the majoring steel and the countries where th	ey of the businesses Exchange? buntry? een any material cha	nges to th	ne nature		enerate) 10% or	Yes	Ne
Country of primary (this is the country ls this Company lis f Yes, which Stock Please confirm if to the business in If Yes, please prov	where the majoring where the majoring sted on any Stock is Exchange and Countries where have there be the last five years ide details of the countries of the countries of the countries where the majoring steel and the majoring steel and the majoring steel and the countries where th	ey of the businesses Exchange? buntry? een any material cha ? changes	nges to th	ne nature	or anticipates to g	enerate) 10% or	Yes	Ne

Please provide names of the countries where the business makes (or anticipates to make)	10% or more of its purchases
(include the UK if applicable)	

Percentage (%)

Countries

(e.g. Japan)		(e.g. 25%)					
Please provide details of countries where 10 include the UK if applicable))% or more of t	he bı	usiness' assets ar	e held (or a	nticip	ated assets)	
Countries	Percentage (%)	Typ	pe of asset(s) (i.e. tories/equipment	offices/	Subs	Subsidiary Businesses	
(e.g. Japan)	(e.g. 25%)	(e.	g. two offices, two	o factories)	(e.g.	three subsidiary com	panies)
					<u> </u>		
Please indicate the nature of your customer b		all th					
	rnment / sector bodies		Banks / other fina	ncial institut	tions	Other	businesses
f 'other businesses', please provide further de							
Do you rely on one customer for more than 5	60% of your sale	es rev	venue?			Yes	No
f Yes, please provide the name of the custon	ner and the indu	stry t	hey are operating	in			
Registered name of key customer	Trading na registered		(if different from ne)	% of sales revenue	1	Nature of business/inc	dustry

8. Other business details

Number of employe	es				
If the business has r	no employees, please	explain why			
Number of principals directors/partners	s/				
Does the business t	rade from a freehold o	or leasehold property	Freehold	Leasehold	
	or any members of yet the below countries:		cluding branches, subs	sidiaries, affiliates and joint ventu	res) do
Syria	Iran	North Korea	Sudan	Myanmar (Burma)	Cuba
N/A					
If you have ticked for undertaken.	r any of the above cou	ıntries, please provide th	e name/s of the count	ry/ies and details of the nature of	the business
Countries			Business undertake	n	

9. Financial Information How will your business be funded on an ongoing basis (please tick all that apply)
Business income (accumulated profits)	External investment
Business Loan	Other, please specify below
Investment by owner/partner	
Sale of assets	
Please complete this section if the business	is less than 5 years old
Please tell us how your business was initially funded (i.e. the shave been invested from. Typically this will be the largest sing amount you may need to photocopy this section.	start-up capital). We need to understand where the majority of the funds gle investment. If there are more than two investments of the same
In certain circumstances we may require further information. Name of investor 1 (please complete the most relevant sections).	
·	
a. Personal savings and investments/previous employn	nent Value of savings from employment
Occupation industry	
Occupation	
Name of employer Number of years employed	
b. Inheritance	Amount of inheritance
c. Family Loan	Amount of loan
Name of lender	
d. Pension	Amount of pension
Pension provider	
e. Redundancy payment	Amount of redundancy payment
Name of employer	
f. Remortgage	Amount
	Value of the property
Name of lender Address of the property including postcode	
	Postcode
g. Sale of property/assets	Value of asset
Type of asset	
If the initial investment into the business was a business	s banking loan, please provide the following information:
	Amount borrowed?
Who provided the loan?	
Term of the loan?	

h. Other Please provide the details of the source of the funds if none of the ce.g. venture capital, finance from group company etc. Please details		
Name of investor 2 (please complete the most relevant sections be	elow)	
a. Personal savings and investments/previous employment	Value of savings from employment	
Occupation industry		
Occupation		
Name of employer Number of years employed		
b. Inheritance	Amount of inheritance	
c. Family Loan	Amount of loan	
Name of lender		
d. Pension	Amount of pension	
Pension provider		
e. Redundancy payment	Amount of redundancy payment	
Name of employer		
f. Remortgage	Amount	
	Value of the property	
Name of lender Address of the property including postcode		
	Postcode	
g. Sale of property/assets	Value of asset	
Type of asset		
If the initial investment into the business was a business bank	ing loan, please provide the following information:	:
	Amount borrowed?	
Who provided the loan?		

Term of the loan?

h. Other

Please provide the details of the source of the funds if none of the options above are applicable e.g. venture capital, finance from group company etc.

Please detail below

Value

10. Financial Accounting Information

Please advise the name of your audit or accounting firm (if the business does not have an audit or accounting firm please advise N/A)

11. Product requirements						
If you require a transactional banking ac	count pleas	se tick as appr	opriate			
Business Current Account			Schools and Colleges Account			
Transaction details						
Tell us about the expected payments	into/out of	your account	:?			
				Number of transacti	ons	Typical value of each transaction
Cash activity (Notes and Coins)	Cash de	Cash deposits				
	Cash wit	Cash withdrawals				
Are cash deposits made on a regula	r basis?	Daily	Week	ly Monthly	Quarterly	Annually
Please advise further details of any fu	ıture signific	cant cash pay	ments and	d the reason behind the	ese cash payr	nents
				Number of transacti	ons	Typical value of each transaction
Cheque activity	Cheques	received				
	Cheques	sissued				
Domestic electronic transfers	Domestic payments received					
	Domesti	c payments s	ent			
International electronic transfers	International payments received					
	Internation	onal payments	sent			
Are international wire transfers made on a regular basis?		Daily	Weekl	y Monthly	Quarterly	Annually

Please advise further details of any significant or regular international electronic payments and the reason behind these payments

Payments made to		Payments rec	eived from		
Name of Country	% of total payments	Name of Cour	ntry		% of total payments
Will the company be making regular into f Yes, please provide details of these for	preign group compani	es:		Yes	N
Company name	Country of reg	istration/incorporation	Primary cou	untry of operatio	n
Are seasonal trends expected? if Yes, please explain these seasonal tr	ends below)			Yes	No
n this section we need to understar this is the initial capital which is/has this means the funds being transfer	s been injected into	the business account. If	you are swite		
How many depositors are there? (business or Person)					
Please complete this section for each d	epositor				
Name of depositor 1 How will the funds be transferred to HS	SBC?				
Cash Che	que	Domestic Electronic 1	ransfer	Internation Transfer	nal Electronic
Where are the funds going to be transfe Name of bank/ Building society	erred from?				
Country of bank/Building society f other, provide further details	UK Other				
How much is going to be transferred? please include the currency in which th	na transfer will he ma	da)			

How have these funds been generated (please select one or more of the below)? **Business Income** (accumulated profits) Business Loan Investment by owner/partner Sale of assets External investment Other, please specify below. Name of depositor 2 How will the funds be transferred to HSBC? Cash Cheque Domestic Electronic Transfer International Electronic Transfer Where are the funds going to be transferred from? Name of bank/ Building society Country of bank/ Building society UK Other If other, provide further details How much is going to be transferred? (please include the currency in which the transfer will be made) How have these funds been generated (please select one or more of the below)? Business Income (accumulated profits) Business Loan Investment by owner/partner Sale of assets External investment Other, please specify below. No Do you require cheque books for your transactional banking account? Yes Please tick as appropriate. 25 cheques without counterfoils 100 cheques Please tick if you would like your cheque book in Welsh Please tick if you require a left-handed cheque book. (Not available in 100 size books) What title description (if any) do you want to appear on your cheques? eg, Director, Secretary, Partner etc. Signatory 1 Signatory 2 Signatory 3 How do you want your business name to appear on your cheques? For Limited Companies include 'For and on behalf of' and at least the full company name. Please also note that if you have chosen a cheque book with 25 cheques, you may only use the first 30 spaces on each line.

If you would like continuous cheques for use with automated cheque printing systems or cheques incorporating your company logo, please ask a member of staff.

Do you require Paying In Books for your transactional banking account? Yes No Please tick as appropriate. 50 pages with one carbon copy Initial quantity required 50 pages with counterfoils 50 pages with two carbon copies Re-order quantity Please tick if you would like your Paying-In Book in Welsh How do you want your business name to appear on your paying in book? Please also note that if you have chosen a paying in book with 25 pages you may only use the first 25 spaces on each line. Please leave blank if these details are the same as above. Do you require a Foreign Currency Account? If Yes, please fill out the information below for each Foreign Currency Account you require (If you require more than two Foreign Currency Accounts, please provide the same details on a blank piece of paper, with this form). Please complete the below section: **1st Foreign Currency Account** What is the purpose of the account? Countries payments will be made to/from Payments made to Payments received from Name of Country % of total Name of Country % of total payments payments Purpose of these payments Number of transactions per annum Typical value of each transaction **2nd Foreign Currency Account** What is the purpose of the account? Countries payments will be made to/from Payments made to Payments received from Name of Country % of total Name of Country % of total payments payments

Purpose of these payments

12. What other products do you require?

If you would like us to contact you about the following, please tick as appropriate.

Debit Cards	Commercial Cards	Foreign Exchange Services	Invoice Finance
Business Money Manager Savings account	Clients Deposit Account	Asset Finance	Business Money Market Account
Business Insurance quotation	Credit/Debit card processing	Trade and International services	Business Text Message Banking
Business Telephone Banking	Electronic Banking (HSBCnet)	Business Internet Banking	Other (please specify)

13 Tell us about Donations/Subscriptions/Membership fees you receive

is. Tell us abo	Jul Donation	18/3008CHPt10H8/1	vierribersnip lees yo	u receive		
(For Charities, Clu	ıbs and Associa	tion customers only)				
Charity Number						
Will you receive do	nations/subscript	ions into the account?			Yes	No
Please provide us v	vith the annual ar	mount of donations/subs	scriptions to be paid into the	e account		
Please provide deta	ails of the origin o	of these funds (eg the na	mes and sources providing	g the principal donations	s/subscription	s)
Will you receive me	embership fees ir	nto the account?			Yes	No
Number of member	ers		Averag	ge membership fee		
Tell us how these of	lonations, subscr	iptions or membership f	ees are received into your a	account (select all that a	apply):	
Cheques	Cash	Direct Debit	Standing Order	Rank Transfer	Foreig	n Pavment

14. Assistance for customers with disabilities (if applicable) **Statements** If you would like us to provide you with either Braille or large print statements, please tick the appropriate box. **Braille** Grade 1 Grade 2 **Large Print** Point size 16 Point size 20 Point size 32 Visit to the branch How can we make your visits to your branch more productive and enjoyable? Tick as appropriate. Would you need help filling in forms? Would you need wheelchair access? Do you need help signing forms, etc? Would you use the services provided by a British Sign Language Interpreter? (Minimum 14 days notice required.) How should we contact you to discuss your account and existing products or services?

Letter

Email

If we need to, what is the best way for us to contact you? Tick as appropriate.

Textphone

Telephone

15. Your information

In this section:

"you" and "your" in standard text means the Customer;

"you" and "your" in bold text has the following meanings:

- for sole traders and partnerships the individuals who own the business:
- for personal representatives and trustees the personal representatives and trustees (collectively and individually) and the deceased or trust (as appropriate); and
- for companies, limited liability partnerships, other incorporated bodies, clubs, societies, associations, charities and other unincorporated bodies – both our customer and (where applicable), the directors, officers, members, shareholders and other parties responsible for the operation of the business, charity or body.

HSBC Group means HSBC Holdings plc, and any of its affiliates, subsidiaries, associated entities and any of their branches and offices

Credit reference agencies (CRAs)

Sole Traders, Partnerships, Personal Representatives and Trustees

We may share information with credit reference agencies to verify **your** identity and suitability for an account using information from the Electoral Register and other public sources. If you apply for a current account or credit, we may use details of your credit history (together with those of any financial associate with whom **your** financial records have been linked by the credit reference agencies) to assess **your** ability to meet **your** financial commitments.

If your application is for a current account, the credit reference agencies will record details of your application which will form part of **your** credit history whether or not **you** proceed. If you make several applications for credit within a short period of time, this may temporarily affect **your** ability to obtain credit.

Incorporated Bodies and Unincorporated Bodies (except Personal Representatives and Trustees)

We may share information with credit reference agencies about **you** in order to verify **your** identity using information from the Electoral Register and other public sources connected with **your** business, charity or body.

If you apply for a current account or credit, we may use details of **your** credit history to assess **your** suitability for an account and **your** ability to meet **your** financial commitments.

Further information on credit scoring, credit reference and fraud prevention agencies

Further details on credit scoring and explaining how information held by CRAs and fraud prevention agencies may be used is set out in a leaflet entitled "Credit Scoring, Credit Reference and Fraud Prevention Agencies" available on our website www.hsbc.co.uk or can be requested from branches or by phoning 0800 587 7008 (textphone 0800 028 3516). Please call this number if you require details of the credit reference and fraud prevention agencies we use. Lines are open 8.30am to 6pm Monday to Friday, excluding public holidays.

Information about Products and Services

If you agree:

- the HSBC Group may use and share relevant information about you, your transactions and your relationships with the HSBC Group to give you information about products, services (including mortgages) and promotions available from members of the HSBC Group and those of selected third parties which may interest you by telephone, post, electronic and other means; and
- we may also share relevant information with our card processing supplier, GPUK LLP (t/a Global Payments) to enable them to provide **you** with information about their card processing services.

If **you** do **not** want to be contacted about such products, services and promotions, via any one or more of these channels tick the appropriate box(es).

Post	Email
Telephone	Mobile messaging (eg, SMS)

16. Your declaration and signature

On behalf of the sole trader/partnership/company/club/society/ charity/association/school or college ('the Customer'), you the undersigned request that HSBC Bank plc (the Bank) open the accounts selected in this Application Form

By signing this Application Form, you confirm that:

• you are over 18 years of age;

Signature(s) of Customer For and on behalf of

Business Name

Address

Position

Date

- you are authorised to complete and sign this Application Form and any documents incidental or relating thereto on behalf of the Customer;
- you have received the 'Business Banking Welcome to your Business Account' pack, which includes the current Business Banking Terms and Conditions, Business Banking Price List and Business Banking made easy brochure;
- you agree that the Customer's account(s) and banking relationship with the Bank will be governed by and subject to the Business Banking Terms and Conditions (as amended from time to time) together with any terms and conditions in respect of specific account(s), product(s) or service(s) requested by the Customer from time to time. Any of these terms and conditions may be varied by the Bank from time to time;

- you consent to us using your information in the way set out in section 9 and Appendix A2 - Customer Information in our Business Banking Terms and Conditions;
- if you are applying for a product or service with another, you are entitled to disclose information about your fellow applicant(s) and to authorise us to search records and record information at Credit Reference Agencies about your fellow applicant(s);
- you authorise us to search records and record information about you at Credit Reference Agencies;
- if you are a corporate or partnership applicant, the signatories of this Application Form are duly authorised by other directors, officers, partners, shareholders, signatories or other relevant parties to consent to the searches and use of information referred to in this Application Form;
- the information given in connection with the opening of the above account(s) is accurate and true to the best of your knowledge:
- in order to help us comply with our regulatory obligations relating to money laundering, you will notify us promptly in writing whenever there is a change to the beneficial owners or principal controllers of the Customer.

					Postcode
Signature Applicant 1					
Print name					
Position	Sole Trader	Partner	Director	Secretary	
Signature Applicant 2					
orginaturo / tppriodrit 2					,
Print name					

Partner

HSBC Group means HSBC Holdings plc, and any of its affiliates, subsidiaries, associated entities and any of their branches and offices.

Secretary

Director

hsbc.co.uk/business

Sole Trader