



Airdrie Savings Bank

## ANCHOR ACCOUNT APPLICATION FORM

### SOCIAL ENTERPRISE DETAILS

Name of Organisation	_____
Nature of Organisation e.g. Charity/Trust/CIC	_____
Charity No. (if applicable)	_____
Company No. (if applicable)	_____
Organisation Address	_____
	_____
	_____ Post Code _____
Organisation email Address:	_____
Organisation Contact	_____
Designation of Contact, e.g. treasurer, etc.	_____
Phone Number of Contact	_____
Contact Address	_____
	_____
	_____ Post Code _____
Email Address	_____

### MAILING ADDRESS

Please indicate which address all correspondence should be sent to by ticking the relevant box below

Contact Address

Organisation Address

### Officials

Name	_____
Address	_____
	_____
Post Code	_____
Years at Address	_____
<i>If less than 3 years give previous address</i>	
Address	_____
	_____
	Post Code _____
Nationality	_____
Date of Birth	_____
Organisation Position	_____
Specimen Signature	_____

### Internet Banking Access

Full access      View only      No access

If Full access, please specify required limits for transfers and payments:

Limit per day    £\_\_\_\_\_      Limit per transaction    £\_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_ Years at Address \_\_\_\_\_  
*If less than 3 years give previous address*  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Organisation Position \_\_\_\_\_  
Specimen Signature \_\_\_\_\_  
Internet Banking Access  
Full access      View only      No access  
If Full access, please specify required limits for transfers and payments:  
Limit per day    £ \_\_\_\_\_      Limit per transaction    £ \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_ Years at Address \_\_\_\_\_  
*If less than 3 years give previous address*  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Organisation Position \_\_\_\_\_  
Specimen Signature \_\_\_\_\_  
Internet Banking Access  
Full access      View only      No access  
If Full access, please specify required limits for transfers and payments:  
Limit per day    £ \_\_\_\_\_      Limit per transaction    £ \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_ Years at Address \_\_\_\_\_  
*If less than 3 years give previous address*  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Organisation Position \_\_\_\_\_  
Specimen Signature \_\_\_\_\_  
Internet Banking Access  
Full access      View only      No access  
If Full access, please specify required limits for transfers and payments:  
Limit per day    £ \_\_\_\_\_      Limit per transaction    £ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_ Years at Address \_\_\_\_\_

*If less than 3 years give previous address*

Address \_\_\_\_\_

Post Code \_\_\_\_\_

Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_

Organisation Position \_\_\_\_\_

Specimen Signature \_\_\_\_\_

Internet Banking Access

Full access      View only      No access

If Full access, please specify required limits for transfers and payments:

Limit per day    £ \_\_\_\_\_      Limit per transaction    £ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_ Years at Address \_\_\_\_\_

*If less than 3 years give previous address*

Address \_\_\_\_\_

Post Code \_\_\_\_\_

Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_

Organisation Position \_\_\_\_\_

Specimen Signature \_\_\_\_\_

Internet Banking Access

Full access      View only      No access

If Full access, please specify required limits for transfers and payments:

Limit per day    £ \_\_\_\_\_      Limit per transaction    £ \_\_\_\_\_

### Marketing Information

From time to time, we may contact you by post, telephone, fax, email, text or other reasonable means, to inform you about products and services supplied by ourselves that we may consider to be of interest to you.

We will not pass your information to anyone else outside of the Bank for their own marketing purposes. You can inform us at any time if you do not want to receive marketing information by writing to Airdrie Savings Bank, 56 Stirling Street, Airdrie, ML6 0AW.

Please complete the following details and tick the appropriate box(es) if you **do not** wish to receive information from us by any of the following methods:

POST      ☐      TELEPHONE/FAX      ☐

EMAIL      ☐      TEXT      ☐

How did you hear about the Anchor account? SCRT/ASB/Other (please state).....

It was resolved that the undernoted account type(s) be opened with Airdrie Savings Bank:

30-day notice ☐

90-day notice ☐

1-year fixed term ☐ Amount to be deposited £ \_\_\_\_\_  
(A savings account will be opened to feed the fixed term account)

We understand that these accounts are internet based accounts.

### Proof of identity and address

Under money laundering regulations Airdrie Savings Bank is required to verify the identity and address of all new customers and their office bearers before it can accept the application.

To do this Airdrie Savings Bank will make an electronic check. This process involves checking the details you supply against those held on a number of specific databases which Call Credit, the agency used by Airdrie Savings Bank for the check, has access to. For example, they will check to see if you appear on the electoral register at the address you have provided.

Scoring methods will be used in the verification process as this gives a more thorough check of the available data. A record of this process will be kept that may be used to help other companies to verify your identity.

Airdrie Savings Bank may also pass information to organisations involved in fraud prevention to protect the bank and its customers from theft and fraud. If you supply false or inaccurate information and Airdrie Savings Bank suspects fraud it will record this and will share this information with other organisations. Airdrie Savings Bank may also, if necessary, ask you to send documents to confirm your identity and address.

### General terms

1. This agreement will not be made until it has been completed, signed by you and received by Airdrie Savings Bank.
2. If Airdrie Savings Bank relaxes any term of this agreement for you, this may be just a temporary measure or special case. Airdrie Savings Bank may enforce it strictly at any time.
3. You may not transfer your legal rights under this agreement to anyone else.

Airdrie Savings Bank standard client agreement upon which it intends to rely consists of this application form together with General Terms and Conditions, Internet Banking Terms and Conditions and Use of Personal Information terms. For your own benefit and protection you should read these terms carefully before signing this form. If you do not understand any point please ask for further information. By signing the form you confirm that you have read and understood these terms.

### Declaration and Signature

We declare that the information given on this application form is, to the best of our knowledge and belief correct and complete. We authorise Airdrie Savings Bank to open an account and register us for internet banking as detailed. We authorise Airdrie Savings Bank to carry out credit searches, where applicable.

We enclose a copy of the Constitution of our Organisation.

Authorised signatory (PRINT NAME) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Authorised signatory (PRINT NAME) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

When completed please return the form to Anchor Accounts, Airdrie Savings Bank, 56 Stirling Street, Airdrie, ML6 0AW. Or, encrypt it, contact us with the password, and email it to [john.mcmillan@airdriesavingsbank.com](mailto:john.mcmillan@airdriesavingsbank.com)

### FOR BANK USE ONLY

Branch Sort Code \_\_\_\_\_

Date Opened \_\_\_\_\_

Customer Number \_\_\_\_\_

Account Number(s) \_\_\_\_\_

Account opened by \_\_\_\_\_ (Teller)

Date \_\_\_\_\_  
Application, CIS, ID & Address Verification checked by \_\_\_\_\_ (Supervisor or above)