

Application Form



START HERE	3. ABOUT YOU - THE 2nd APPLICANT/TRUSTEE/SIGNATORY		
Do you have a savings account or mortgage with us?	Title Mr Mrs Miss Ms Other		
Yes No	Surname		
Account number	All other names in full		
1. ABOUT YOUR PROPOSED INVESTMENT	Date of birth DD/MM/YYYY Nationality		
Savings account name and Issue number	Occupation		
For example 30 Day Notice account - Issue 23	Full address (We do not accept a PO Box or 'care of' address)		
Amount to open the account £			
Amount to open the account Make your cheque payable to 'Principality re: [and insert your name(s) here]' and			
attach it to the bottom of the page overleaf.			
Source of this money For example, savings, inheritance, salary			
	Length of time at this address Years Months		
2. ABOUT YOU - THE 1st OR ONLY APPLICANT/TRUSTEE	If less than three years at your current address please provide us with your		
Title Mr Mrs Miss Ms Other	previous addresses, and length of time at each address, on a separate sheet.		
Surname	Phone numbers		
All other names in full	Home (Including area code)		
Date of birth DD/MM/YYYY Nationality	Work (Including area code)		
Occupation	Mobile		
Full address (We do not accept a PO Box or 'care of' address)	Email address		
	Tax status (Please refer to Section 7 on the reverse)		
	Are you resident for TAX PURPOSES anywhere other than the UK?		
	Are you a citizen of the USA?		
Length of time at this address Years Months	If you answered Yes to either of the tax status questions please complete the Self-Certification Declaration Form. Please request this from a member of staff.		
If less than three years at your current address please provide us with your previous addresses, and length of time at each address, on a separate	4. OPERATING A JOINT ACCOUNT (if applicable)		
sheet.	Any one of us may sign to operate the account including withdrawals		
Phone numbers	All of us must sign to operate the account including withdrawals		
Home (Including area code)	5. HOW WOULD YOU LIKE YOUR INTEREST TO BE PAID?		
Work (Including area code) Mobile	Before completing this section please refer to your chosen product leaflet Terms and Conditions.		
	Is the interest on the account you are opening paid		
Email address	Annually (Fill in 1,2 or 3 below) Monthly (Fill in 2 or 3 below)		
	1 Added to your savings account annually		
Tax status (Please refer to Section 7 on the reverse)	2 Into Principality account number		
Are you resident for TAX PURPOSES anywhere other than the UK?			
Are you a citizen of the USA? Yes No	3 Into the following bank/building society account		
If you answered Yes to either of the tax status questions please complete the Self-Certification Declaration Form. Please request this from a member of	Bank/Building Society name		
staff. FOR OFFICE USE ONLY	Sort Code Account Number		
Account Number	Account held in the name(s) of Reference number (if applicable)		
Date Opened			

6. WHERE DID YOU HEAR ABOUT THIS ACCOUNT AND FUTURE	MARKETING TO YOU				
Where did you hear about this account?					
☐ Branch advertising ☐ Mailing ☐ Press ☐ Principality website ☐ Online advertising ☐ Other					
Please quote promotional code, if you have one					
Future marketing to you					
From time to time we may provide you with information regarding existing or new similar products and services offered by us (including but not limited to mortgage lending, savings, general insurance and financial services) our associated companies or our insurance and financial services partners.					
If you would like to receive this information, you can choose how by t	icking the boxes below:				
Applicant 1 ☐ Email ☐ Mail ☐ Telephone ☐ SMS	Applicant 2 ☐ Email ☐ Mail ☐ Telephone ☐ SMS				
Member Rewards When appropriate, we'd <u>also</u> like to contact you with information and programme, Member Rewards. This may include information on third					
If you're <u>also</u> happy for us to contact you about Member Rewards, pl You will only receive this information by your preferred contact of them. If you don't tick one of them, you will not receive this in	method(s) detailed above, providing you have ticked at least one				
Applicant 1 □	Applicant 2				
You can opt out of receiving direct marketing by calling us on 0330 3	33 4435 or by using the 'unsubscribe' link in our emails.				
Where offered I would like to receive all future correspondence i	in Welsh:				
Applicant 1 □	Applicant 2				
7. DECLARATION AND SIGNATURES					
Please make sure you understand the terms of the account mentioned in section 1 as set out in the General Terms and the Account Leaflet before signing. Information you provide may be used to prevent or investigate fraud and money laundering – further details are available by writing to the address in section 9. Please answer all questions on this form that apply to you. ABOUT YOU - TAX STATUS	and will operate the account as trustee(s).				
The government may share tax information they obtain with tax authorities in other countries. The law requires us to collect details of certain arrangements, including tax residency – for example if you spend most of the year in the UK you will be UK tax resident, but you could be resident for tax in more than one country at the same time. If you pay income tax in a country, you are likely to be resident there	Assignment of windfalls to charity Note: This section does not apply to anyone who has been a continuous Member with the Principality since any date before 6 June 2000. I assign to the Charities Aid Foundation ('CAF') (or to any charities nominated by it, but to no one else) the rights to any Conversion				

for tax purposes. US citizens, US passport or green card holders are automatically tax resident in the US. This is not to be taken as advice. It is your duty to obtain information on and take professional advice on such matters. In the event that you have declared tax residency in another country the Self-Certification Declaration Form must be completed.

I/We confirm that I/We have received and read the following:

- Account Leaflet
- Current 'Savings Terms and Conditions' booklet
- 'Your Information' leaflet
- Basic information about the protection of your eligible deposits

I/We declare that:

- The information on this form is true to the best of my knowledge and belief.
- I/We accept the rules of Principality Building Society.
- Except for trust accounts, any sum invested will be as a sole beneficial owner if the account is in one name or as joint beneficial owners if it is in two or more names.

I/We undertake to notify you of any relevant changes to the tax or other information I/we have given you on this form or otherwise, such as leaving the UK.

We understand that (joint account holders):

- If a joint account holder dies, all the money in the account becomes the property of the surviving joint account holder(s).
- The first named applicant will have all the voting rights as the Representative Joint Shareholder.
- If we are opening an account in three or more names, we have used an additional form about the other people. We have clearly marked the additional form to this effect.

Benefits to which I may become entitled during the first seven continuous years or any shorter period as Member. I know that this assignment cannot be revoked or varied and I authorise Principality to make over to CAF (or its nominated Charities) any Conversion Benefits without further notice. As a further assurance, if requested to do so, I agree to sign any reasonable document required to give effect to this assignment.

'Conversion Benefits' means any benefits under the terms of any future transfer of the Principality's business to a company except the statutory right to have shares in Principality converted into deposits with the company and, if Principality merges with any other building society, 'Society' or 'Principality' shall, after the date of such merger, extend to such other Society.

Please see the General Terms for further details about this assignment.

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econd signature	
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8. CONSENT TO PROCESS YOUR PERSONAL DATA

Account Number

By law we require your consent to process your personal data in order to operate your account. This consent will also allow us to process your personal data in connection with any savings account to which you transfer your funds internally. Without this consent, we are unable to proceed.

I agree to PBS processing my personal data for this purpose. I understand that I can contact PBS to withdraw that consent at any time but that could result in the closure of my account.

All applicants to provide consent below by signing:

First signature	Second signature
Date	Date
Third signature	Fourth signature
Date	Date

9. WHAT TO DO NOW

Make your cheque payable to 'Principality re: [and insert your name(s) here]' and take it with this form to a Principality branch or post it to: **Principality Building Society, PO Box 89, Principality Buildings, Queen Street, Cardiff CF10 1UA.**

If sending a cheque in the post please attach it to the bottom of this page. We'll send your account documents if we're able to accept your application. Alternatively we will write to you if we're unable to accept your application.

FOR OFFICE USE ONLY		
Checklist (All documents 1-8 must be given to the customer and 9-11 explained to the customer then boxes ticked before point of sale to confirm this) 1 Product leaflet 2 Savings Terms and Conditions 3 Savings Rates Guide 4 'Your Information' leaflet 5 Leaflet on how we calculate interest rates if requested by the customer 6 Fees and charges leaflet 7 Summary Financial Statement to new investors 8 Basic information about the protection of your eligible deposits	Account number Account type Date opened Cashier's name Checked by	Opening amount £ Branch
9 Cooling off rights		
 Confidentiality of information, and exceptions Notification of changes in interest rates and Terms and Conditions 		

Principality Building Society is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, reference number 155998. www.principality.co.uk