



Trust Savings Account Application Form

Trust Savings Account Application Form

Our Trust Accounts can be used with the following UK Trusts – Will Trusts, Bare or Simple Trusts, Life Interest Trusts, Personal Injury Trusts and Charitable Trusts. We do not accept Non-Resident Trusts or Discretionary Trusts.

Please read the Key Product Information that applies to your chosen account type, then complete ALL sections in BLOCK CAPITALS.

Section 1 – Account Type

Please open a:

Trust Instant

Trust Fixed Term Deposit Account

Section 2 – Initial Deposit

I/We would like to open this account with

£

Minimum £1.00

You can make an initial deposit by transfer from an existing Bath Building Society account or electronic transfer or cheque.

Section 3 – Trust Details

Trust Name

Please enter either your Unique Tax Reference Number (UTR) or your Unique Reference Number (URN) if the Trust is exempt from tax. Without either of these, we will not be able to accept your application.

Trust Unique Tax Reference number (UTR)

Trust Unique Reference Number (URN)

Main Contact (Lead Trustee)

Correspondence Address

Postcode

Email

Nature and Purpose of the Trust

How do you expect this account to be used?
(For example long term savings, payment of school or care home fees etc.)

Anticipated amount to be held within this Trust Account

£

When is the first payment expected

D	D	M	M	Y	Y	Y	Y
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Expected life span of the Trust

Years

*This is required if we need to contact you for security reasons.

Section 3 – Trust Details (continued)

Where are the funds being held currently?

Name of Financial Institution

Address

Postcode

Sort Code

			-			-		
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Account Number

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How often do you expect to use the account?

Monthly

Quarterly

Half Yearly

Annually

Section 4 – Beneficiary Details (if you have more than four Beneficiaries please ask for an Additional Beneficiaries page)

Beneficiary 1

Name

Occupation

Address

Postcode

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Beneficiary 2

Name

Occupation

Address

Postcode

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Beneficiary 3

Name

Occupation

Address

Postcode

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Section 4 – Beneficiary Details (continued)

Beneficiary 4

Name	<input type="text"/>
Occupation	<input type="text"/>
Address	<input type="text"/> <input type="text"/> <input type="text"/>
	Postcode <input type="text"/>
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Section 5 – Trustee Details

Please complete all fields

Trustee 1 (this should be the Lead Trustee)

Title	<input type="text"/>	Forename(s)	<input type="text"/>
Surname	<input type="text"/>	Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Occupation	<input type="text"/>	Mobile* (UK only)	<input type="text"/>
Telephone (including the STD code)	<input type="text"/> <input type="text"/>	Existing BBS account number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email	<input type="text"/>		
Residential Address	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>		
Number of years at current address	<input type="text"/>		
If you have lived at your current address for less than two years, please give your previous address	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>		

*This is required if we need to contact you for security reasons.

Section 5 – Trustee Details (continued)

Please complete all fields

Trustee 2

Title	<input type="text"/>	Forename(s)	<input type="text"/>
Surname	<input type="text"/>	Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Occupation	<input type="text"/>	Mobile* (UK only)	<input type="text"/>
Telephone (including the STD code)	<input type="text"/> <input type="text"/>	Existing BBS account number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email	<input type="text"/>		
Residential Address	<input type="text"/> <input type="text"/> <input type="text"/>		
	Postcode		
Number of years at current address	<input type="text"/>		
If you have lived at your current address for less than two years, please give your previous address	<input type="text"/> <input type="text"/> <input type="text"/>		
	Postcode		

Trustee 3

Title	<input type="text"/>	Forename(s)	<input type="text"/>
Surname	<input type="text"/>	Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Occupation	<input type="text"/>	Mobile* (UK only)	<input type="text"/>
Telephone (including the STD code)	<input type="text"/> <input type="text"/>	Existing BBS account number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email	<input type="text"/>		
Residential Address	<input type="text"/> <input type="text"/> <input type="text"/>		
	Postcode		
Number of years at current address	<input type="text"/>		
If you have lived at your current address for less than two years, please give your previous address	<input type="text"/> <input type="text"/> <input type="text"/>		
	Postcode		

*This is required if we need to contact you for security reasons.

Section 5 – Trustee Details (continued)

Please complete all fields

Trustee 4

Title	<input type="text"/>	Forename(s)	<input type="text"/>
Surname	<input type="text"/>	Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Occupation	<input type="text"/>	Mobile* (UK only)	<input type="text"/>
Telephone (including the STD code)	<input type="text"/> <input type="text"/>	Existing BBS account number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email	<input type="text"/>		
Residential Address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Number of years at current address	<input type="text"/>	Postcode	
If you have lived at your current address for less than two years, please give your previous address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	Postcode		

Section 6 – Operation of Account

I/We agree that all or part of the money in this account may be withdrawn on the authority of:

Any one Trustee All authorised Trustees Or any (enter number) Trustee(s) to sign

Section 7 – Authority to Accept Email Instructions

Please only complete this section if you wish to operate your account by email as well as by post.

Declaration:

Transactions are based on the balance held on the account, not on the balance shown in the passbook.

The Society uses standard email only and you should therefore take care when requesting or providing personal information. Use of email to provide personal data is done so at your own risk and the Society cannot be held responsible for third party interception.

I understand that email instructions must be sent to savings@bibs.co.uk and must be received by 3pm to ensure they are actioned on the day received. I will not hold Bath Building Society liable for any loss incurred provided they operate in accordance with these instructions.

I understand that withdrawals must be authorised as detailed in Section 6.

Email address for instructions

*This is required if we need to contact you for security reasons.

Section 8 – Nominated Bank Account for Withdrawal Purposes

You must have another Bank or Building Society account for transferring money out of your savings account. The account must be in the same name as the Trust, Beneficiary or Trustee and must be able to accept electronic payments via the Faster Payments Service. If the opening cheque is not from this nominated bank account, please forward a recent statement, as evidence that this is a personal current account in your name(s).

Bank/Building Society name	<input type="text"/>	Bank/Building Society account in the name(s) of	<input type="text"/>
Bank/Building Society account number	<input type="text"/>	Sort Code	<input type="text"/>

Section 9 – Privacy – Your Personal Information

We need to collect information about you and the other trustees and beneficiaries in order to open and administer your savings account. The legal basis on which we process your data will be either that the processing is necessary for us to perform our contract with you or for taking steps prior to entering into it; necessary to comply with our legal obligations; in our legitimate business interests in relation to such purposes or with your consent.

The information we collect is used to verify your identity, administer your accounts, provide you with our services and to communicate with you about other products or services of ours that we think may be of interest to you.

When using your information we may also share information with anyone you appoint to administer or operate your account; regulatory and government bodies; auditors; any individuals/organisations that we use to provide services to us; and any other person or organisation if the law, public duty or our legitimate interests require us to do so.

We may send your details to credit reference agencies and/or fraud prevention agencies who will supply us with information for the purpose of verifying your identity, including information from the Electoral Register. We reserve the right to carry out further checks of your identity and address should we need to in order to comply with our legal and regulatory obligations. The credit reference agencies will record details of the search whether or not the application proceeds. The searches will not be seen or used by lenders to assess your ability to obtain credit. Credit searches and other information which is provided to us and/or the credit reference agencies or fraud prevention agencies about you and those with whom you are linked financially may be used by Bath Building Society and other companies if you, or other members of your household, apply for other facilities, including insurance applications and claims. This information may also be used for debt tracing and the prevention and detection of fraud or money laundering as well as the management of your account. Alternatively, we may ask you to provide physical forms of identification.

In making your application you acknowledge that you have received and read the summary of our Privacy Notice. Our full Privacy Notices are available on our website at www.bathbuildingsociety.co.uk

Section 10 – Agreement to Assign Windfalls to Charity

1. I/We agree with the Society that, if the right to any windfall benefits are granted to me/us after the account is opened, I/we will assign those windfall benefits to the Charities Aid Foundation unless the period between account opening and conversion announcement is more than five years. After five years I/we would receive the windfall benefits.
2. I/We authorise the Society and the successor to pass any windfall benefits directly to the Charities Aid Foundation without notice to me/us.
3. I/We understand that: i) The Society has promised to transfer to the Charities Aid Foundation the benefit of the agreement; ii) Neither the Society or the Charities Aid Foundation will release me/us from this agreement;
4. I/We authorise the Society to give the Charities Aid Foundation any information about me/us and the account I/we have with the Society (if they reasonably need it).

Section 11 – Execution Only Declaration


As your Trust Account is to be opened on a non-advised 'execution only' basis where no advice or assessments have been given to its suitability, it is important that you understand the terms and conditions of the account and how your account works. Please read the Key Product Information (KPI) document and the Savings Terms & Conditions carefully to ensure that you understand how the product works. Copies of these documents will have been provided to you, and can be found on our website. If you have any doubts about the suitability or flexibility of the product, you should seek independent expert legal and/or financial advice before signing and submitting your application form.

I/We confirm that I/we have read and understood the Key Product Information (KPI) and terms and conditions of the Trust Account.

I/We understand that Bath Building Society are providing an execution-only service. I/We understand that we have not received advice or assessment on the suitability of the Trust Account by Bath Building Society.

I/We understand that Bath Building Society will hold the Trust funds and make payments by request as long as they are in keeping with the Trust Deed, Trust Will, the KPI and the terms and conditions of the Trust Account.

Trustee Name	<input type="text"/>
	<input type="text" value="Signature"/>
Date	<input type="text" value="D D M M Y Y Y Y"/>
Trustee Name	<input type="text"/>
	<input type="text" value="Signature"/>
Date	<input type="text" value="D D M M Y Y Y Y"/>
Trustee Name	<input type="text"/>
	<input type="text" value="Signature"/>
Date	<input type="text" value="D D M M Y Y Y Y"/>
Trustee Name	<input type="text"/>
	<input type="text" value="Signature"/>
Date	<input type="text" value="D D M M Y Y Y Y"/>



Please return your completed form to:

Bath Building Society, Customer Service Department,
15 Queen Square, Bath BA1 2HN or you can take it to one
of our Branches, or email it to savings@bibs.co.uk

Section 12 – Declaration

I/We agree to be bound by the Rules of the Society and the terms of the account including the Terms and Conditions and the Agreement to Assign Windfalls to Charities set out in section 10 of this application. A copy of the KPI, T&Cs and Rules is available from the Society's Head Office and Branches.

It is important that you read the section headed 'Privacy – Your Personal Information' set out in section 9 of this application, including the Privacy Notice referred to.

By signing this form, you are confirming that you are not resident or tax resident in any other country other than the UK and that you have received and read the enclosed Financial Services Compensation Scheme Information and Exclusions list.

Trustee Name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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Trustee Name

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Trustee Name

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Trustee Name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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Account Number

Office use only

Application Received

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Date Opened

D	D	M	M	Y	Y	Y	Y
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Office

Welcome Letter Sent

Opened By

Version

Checked By

We're different
because you are

Head Office:
15 Queen Square,
Bath BA1 2HN

Telephone:
01225 423271

Email:
Savings@bibs.co.uk

Web:
www.bathbuildingsociety.co.uk

Telephone calls may be recorded
to help the Society to maintain
high standards of service delivery.

Bath Investment & Building Society
is authorised by the Prudential Regulation
Authority and regulated by the Financial
Conduct Authority and Prudential
Regulation Authority, Registration
Number 206026.

Thank you for choosing
Bath Building Society



We're different because you are