



## Important – Your Personal Information

**Credit decisions and also the prevention of fraud and money laundering.**

We may use credit reference and fraud prevention agencies to help us make decisions. A short guide to what we do and how both we and credit reference and fraud prevention agencies will use your information is detailed in the section called: **A condensed guide to the use of your personal and business information by ourselves and at credit reference and fraud prevention agencies.** For details of how your data may be used, also read carefully the 'Using Your Personal Information' notice provided with the terms and conditions of your account and the 'Keeping You Informed' section in this application form.

By confirming your agreement to proceed you are accepting that we may each use your information in this way.

**A condensed guide to the use of your personal and business information by ourselves and at credit reference and fraud prevention agencies.**

- 1) When you apply to us to open an account, this organisation will check the following records about you and, where applicable, your business Partners and anyone to whom you are linked financially:
  - a) Our own.
  - b) Personal and, where applicable, business records at credit reference agencies (CRAs). When CRAs receive a search from us they will place a search footprint on your personal credit file and where applicable your business credit file that may be seen by other lenders. They supply both public (including the electoral register) and shared credit and fraud prevention information.
  - c) Those at fraud prevention agencies (FPAs).
  - d) If you're a Director, we will seek confirmation, from credit reference agencies, that the residential address that you provide is the same as that shown on the restricted register of Directors' usual addresses at Companies House.

We will make checks such as assessing this application for credit and verifying identities to prevent and detect crime and money laundering. We may also make periodic searches at CRAs and FPAs to manage your account with us.
- 2) If you are making a joint application or tell us that you have a spouse or financial associate, we will link your records together so you must be sure that you have their agreement to disclose information about them. CRAs also link your records together and these links will remain on your and their files until such time as you or your Partner successfully files for a disassociation with the CRAs to break that link.
- 3) Information on applications will be sent to CRAs and will be recorded by them, including, where applicable, information on your business and its proprietors. The CRAs may create a record of the name and address of your business and its proprietors if there is not one already.
- 4) Where you borrow from us, we will give details of your account(s) and how you manage it/them to CRAs.
- 5) If you borrow and do not repay in full and on time, CRAs will record the outstanding debt. This information may be supplied to other organisations by CRAs and FPAs to perform similar checks and to trace your whereabouts and recover debts that you owe. Records remain on file for six years after they are closed, whether settled by you or defaulted.
- 6) If false or inaccurate information is provided and fraud is identified, details including the names of the company Directors at the time of the fraud will be passed to fraud prevention agencies. You undertake to inform all Directors of this notice.
- 7) Law enforcement agencies may access and use this information.
- 8) We and other organisations may also access and use this information to prevent fraud and money laundering, for example, when:
  - a) Checking details on applications for credit and credit-related or other facilities.
  - b) Managing credit and credit-related accounts or facilities.
  - c) Recovering debt.
  - d) Checking details on proposals and claims for all types of insurance.
  - e) Checking details of job applicants and employees.
- 9) If you have borrowed from us and do not make payments that you owe us, we will trace your whereabouts and recover debts.
- 10) We and other organisations may access and use from other countries, the information recorded by fraud prevention agencies.
- 11) Your data may also be used for other purposes for which you give your specific permission or, in very limited circumstances, when required by law or where permitted under the terms of the Data Protection Act 1998.

**How to find out more**

You can contact the credit reference agencies currently operating in the UK; the information they hold may not be the same so it is worth contacting them all. They will charge you a small statutory fee.

- **CallCredit**, Consumer Services Team, PO Box 491, Leeds LS3 1WZ or call 0870 060 1414.
- **Equifax PLC**, Credit File Advice Centre, PO Box 3001, Bradford BD1 5US or call 0844 335 0550 or log on to [www.myequifax.co.uk](http://www.myequifax.co.uk)
- **Experian**, Consumer Help Service, PO Box 8000, Nottingham NG80 7WF or call 0844 481 8000 or log on to [www.experian.co.uk](http://www.experian.co.uk)
- If you want to receive details of the relevant fraud prevention agencies please contact us at:  
The Co-operative Bank  
Fraud Management  
Pennylands House  
1 Westgate  
Skelmersdale WN8 8LP.



**Note:**

**ALL businesses must complete the Ethical Policy section.**

Please tick either 'yes' or 'no' for each question.



**Remember:**

**If you answer 'yes' to any of the questions in the Ethical Policy section, please ensure you provide further information.**

Our Ethical Policy promises our customers that we will not provide banking services to organisations involved in certain activities. In order to meet these stated obligations and to assist in our assessment, **please indicate the position of your organisation(s) (including parent company and subsidiaries) on the following:**

	Yes	No
Are you involved in the manufacture or trade of equipment for military or security purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any business arrangements with developing countries including imports and overseas operations?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the manufacture of pharmaceuticals?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the provision of water utility services to developing countries?	<input type="checkbox"/>	<input type="checkbox"/>
Do you manufacture tobacco products?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in biotechnology or the development of genetically modified organisms?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in nanotechnology or the development of products utilising nanotechnology?	<input type="checkbox"/>	<input type="checkbox"/>
Have you contravened any environmental legislation or regulations in the last three years?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the extraction, production or distribution of fossil fuels?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the production or distribution of other fuels (e.g. biofuels)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you manufacture chemicals?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in forestry or the timber trade?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the fishing industry?	<input type="checkbox"/>	<input type="checkbox"/>
Are you a promoter or a client of a tax scheme subject to HMRC notification or have you contravened any tax laws or rules (e.g. been convicted of tax evasion within the last 5 years)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you manufacture (or are you involved in the animal testing of) cosmetics, toiletries or household products or their ingredients?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the experimentation or use of Great Apes for any purpose?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in animal farming?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in blood sports (e.g. fox hunting)?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the animal fur trade?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the gambling industry?	<input type="checkbox"/>	<input type="checkbox"/>
Are you involved in the provision of short-term, small value personal loans (e.g. payday loans, home collected credit)?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever breached any relevant advertising standards codes or marketing codes (e.g. Advertising Standards Agency codes)?	<input type="checkbox"/>	<input type="checkbox"/>

**If you answered 'yes' to any of the questions above, please provide details:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Limited Companies, Limited Liability Partnerships, Unincorporated Associations, Clubs and any other organisations**

Details of how the Account(s) is/are conducted may be recorded with one or more credit reference agencies and may be shared with and used by other lenders for the purpose of assessing further applications from you (including all Directors, Partners, Proprietors and Committee Members if appropriate) and members of your household (including all Directors, Partners, Proprietors and Committee Members if appropriate) and for occasional debt tracing or fraud prevention. The Bank will hold and process the information you provide and may use it to assess the suitability of your application using the technique known as 'Credit Scoring'.

On behalf of

(the 'Business') (the 'Organisation') <sup>†</sup>
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I/We<sup>†</sup> authorise The Co-operative Bank p.l.c. (the 'Bank') to:

- act as our bankers, open and operate the Account(s) specified by the Business/Organisation<sup>†</sup> in the application form and to provide the Business/Organisation<sup>†</sup> with the services (the 'Service') offered by the Bank
- accept instructions (including written instructions sent by facsimile and electronic instructions through the use of digital signatures and/or identification numbers or passwords) from us in connection with the Account(s) and the Service, provided that the instructions are given and/or signed in accordance with the signing authority listed in the Account signatories Section 7 of this bank mandate. Instructions shall mean: cheques, bills of exchange, promissory notes or other orders for payment drawn, made or accepted on our behalf, (even if the payments cause the Account(s) to be overdrawn) and requests or instructions in writing concerning the Account(s), our affairs or property (including the opening of new Account(s), the arranging of facilities and creation of security)
- communicate with or in respect of the Business by email and/or SMS in connection with the Account(s)
- search the files of one or more credit reference agencies, who will keep a record of that search, and make other enquiries the Bank believes necessary to confirm the details on this application form and for credit assessment. It is important that you read and understand the section entitled 'Important – Your Personal Information' at the beginning of this application form, the 'Keeping You Informed' section in the application form and the 'Using Your Personal Information' notice provided with your terms and conditions. By signing this application you agree that we can use your information in this way.

<sup>†</sup>Delete as appropriate throughout



**Note:**

**Limited Companies/  
Companies Limited  
by Guarantee:**

All Directors/Designated Members must sign this section.

Limited Liability Partnerships:

all Partners must sign this section.

**If it is a Sole  
Directorship, and  
you have a Company  
Secretary, your  
Company Secretary  
must sign this  
section.**

For other types of organisation this section should be signed in accordance with your rules/constitution.



**Note:**

With the exception of your Company Secretary, each person who signs this section must complete Section 3: Personal details.

**The section below must be completed in all cases.**

**Please tick:**  I/We have received and read the Financial Services Compensation Scheme (FSCS) Information Sheet and Exclusions List

I/We<sup>†</sup> agree, declare and hereby resolve:

- the information provided in this mandate is true and correct
- all signatories/Authorised Account Persons to the account are aged 18 or over
- no signatories/Authorised Account Persons have been subject to bankruptcy in the last six years
- no signatories/Authorised Account Persons have had County Court Judgments registered against them in the last six years
- that the Bank shall be notified in writing of any change in limited company share ownership and any change of Partners/Directors/Secretary/Members<sup>†</sup>, other official or authorised signatory /Authorised Account Person and shall provide the Bank with a copy of any changes to the Constitution/Rules/Memorandum and Articles of Association/Regulations or Bye Laws. Any changes will be subject to FCA requirements
- that the Partners/Directors/Members<sup>†</sup>, having carefully considered the terms and conditions for the Account(s) and the Service, have agreed to accept and comply with the terms and conditions
- that this authority shall remain in force notwithstanding any change in our constitution, LLP agreement (if applicable), name or membership
- that the Business/Organisation<sup>†</sup> is empowered by, and is acting within, its constitution in giving instructions for the Bank to act as our bankers in the terms set out above.
- that I/We<sup>†</sup> appoint Authorised Account Persons to access and use my/our<sup>†</sup> account(s) with the Bank on the terms set out above entirely at my/our<sup>†</sup> own risk and that the Bank will have no liability to me/us<sup>†</sup> for any losses, costs, charges or expenses of any nature whatsoever that I/we<sup>†</sup> suffer or incur in connection with the Authorised Account Persons' improper or unlawful use of my/our<sup>†</sup> account(s) (save for any liability that the Bank cannot exclude or limit under applicable law).

Name <input type="text"/>	Signature <input type="text"/>
Position in Business/Organisation <sup>†</sup> <input type="text"/>	
Date <input type="text"/>	

**If you are a Sole Director, without a Company Secretary, we require your signature to be witnessed.  
The witness will need to complete this box.**

I confirm the above signature was signed in my presence by the individual named above.	Witness Signature <input type="text"/>
Name of Witness <input type="text"/>	
Occupation <input type="text"/>	
Address <input type="text"/>	

Name of Secretary/Member/Director/Partner <sup>†</sup> (this must be a different individual to above) <input type="text"/>	Signature <input type="text"/>
Position in Business/Organisation <sup>†</sup> <input type="text"/>	
Date <input type="text"/>	

Name of Secretary/Member/Director/Partner <sup>†</sup> (this must be a different individual to above) <input type="text"/>	Signature <input type="text"/>
Position in Business/Organisation <sup>†</sup> <input type="text"/>	
Date <input type="text"/>	

Name of Secretary/Member/Director/Partner <sup>†</sup> (this must be a different individual to above) <input type="text"/>	Signature <input type="text"/>
Position in Business/Organisation <sup>†</sup> <input type="text"/>	
Date <input type="text"/>	

Excerpt of minutes of a meeting of Directors/Members <sup>†</sup> of <input type="text"/>	
Held at <input type="text"/>	On <input type="text"/>

<sup>†</sup>Delete as appropriate throughout.

# Section 2

# Business details



**Note:**  
ALL businesses must complete Section 2.

## Business name and Business trading name (if different)

Full name of business



**Note:**  
Please tick the box that best describes your business or tick 'other' and give further details.

## Business type

Limited Company       Limited Liability Partnership  
 CIU Affiliated       Other

## What does your business do and how does it operate on a day-to-day basis?

Do you undertake any of the following activities: money transmission/money service business, cheque cashing, money lending or payday lending? If so, please provide details.



**Note:**  
e.g. not just consultancy or sales. Try to give as full a description as possible. Not supplying this information may lead to a delay in the processing of your application.

## What is your business website address and please provide details of how you advertise your business

## Existing business account details

Full name of account

Branch sort code  
  -   -

Account number

Time at bank  
years  months

# Business details

## Business trading address (premises)

House number or name and street

Town

City Postcode

Are your premises owned  or leased?



**Note:**

Consider carefully where statements are sent to as you may be at an increased risk of fraud if they are sent to an official's personal address rather than a business address.

## Correspondence address

House number or name and street

Town

City Postcode

## Registered/regulated/status

Are you registered with/regulated by a professional industry body? Yes  No

If yes, please record the following: name of registered/regulated body, address of registered/regulated body, registered/regulated number.

# Section 2

## Business details

### Financial details (These details are compulsory and must be completed in ALL cases.)



**Note:**

Number of working officials/employees means all individuals involved in the day-to-day running of the business.



**Note:**

If you are a newly established business, please complete the financial details section using estimated/projected figures.

Date business established	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Current year end date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	day	month	year		day	month	year		day	month	year				

Annual Credit Turnover/expected turnover	£	<input type="text"/>	Number of working officials/employees	<input type="text"/>	Expected financial growth	%	<input type="text"/>
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Please provide a brief summary of what the start-up costs were in forming or purchasing the business and also confirm how this was funded (e.g. director's loan, property sale, redundancy funds, etc.). If there have been any recent cash injections into the business, please also confirm the amount and source.

Where will your income/turnover come from, e.g. sale of existing business/assets, etc.?

### Tax status

UK tax regulations require the collection of information regarding an account holder's tax residency and citizenship status. Therefore, please complete the relevant questions below and provide the information requested. Please note that we may be required to share this information about you with the relevant tax authorities.

If at any time in the future you need to change the information that you have provided, you are required to advise us within 30 days of such change in circumstances. If you have any questions about how to complete this form, please contact your tax adviser.

1. Was your business established or is it resident for tax, outside of the UK ?	Yes	No
If yes, please provide details of your tax residences below.	<input type="checkbox"/>	<input type="checkbox"/>
Country where Business Established / Tax Residence	Tax Identification Number (TIN)	
<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	
If you have more than two countries' information to provide please photocopy this page		
2. Does your business generate more than 50% of its income from the creation/sale of goods and/or services?	<input type="checkbox"/>	<input type="checkbox"/>

If you have a Relationship Manager please leave this section blank.

### Details of existing business borrowings?

Provider/bank	Amount (£)	Type (e.g. loan/overdraft/HP)	Term	Purpose
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Lending requirements from The Co-operative Bank

Amount (£)	Type (e.g. loan/overdraft)	Term	Purpose
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



**Note:**

Only fill in the FSB membership details if they are relevant to your business.

### FSB membership details

Membership number

If you are a member of the Federation of Small Businesses (FSB), please enter your membership number. By entering your number you give your consent for the Bank to verify this number and your membership with the Federation of Small Businesses.



# Section 3

# Personal details

**All individuals who have a liability for the business/organisation such as Directors/Members/Trustees/Committee Members as well as individuals with authority to transact on the account (either signatory or Authorised Account Persons) must complete this section. BEFORE COMPLETING THIS SECTION PLEASE ENSURE YOU HAVE READ AND UNDERSTOOD SECTION 1: IMPORTANT INFORMATION. ONCE COMPLETE, PLEASE SIGN SECTION 1.**



**Note:**

If necessary, please photocopy this page.



**Note:**

Individual's shareholding/ stakeholding/voting right percentage means the proportion of the business owned by the individual.



**Note:**

If shares are being held by a nominee we will also require details to be provided within this section of the beneficial shareholders/stakeholders for whom these are being held.

**Useful tip:**

If you are a newly appointed Director (within the last three months), please provide a copy of your Form AP01.



**Note:**

Please supply assets and liabilities information for each individual.

Title	Forename (in full)	Middle name
Surname		Any other name(s) you have been known as during the last six years
Date of birth	Nationality/ies	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	
day	month	year
Position within business		Individual's shareholding/ stakeholding/voting right percentage <input type="text"/> %

Are these shares being held by a nominee? Yes  No

If yes, please provide full details of actual (beneficial) shareholder (name, address, date of birth, nationality/ies)

Do you already hold a Co-operative Bank account (personal and/or business)? If so, please complete your sort code and account number in order for us to keep our records up to date.

Branch sort code	Account number
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>

Please provide three full years' address history for each person. If necessary, provide additional information on a separate sheet and attach to your application.

Home address

Postcode  Time at this address years  months

Previous home address (if moved within the last three years)

Postcode  Time at this address years  months

Home telephone number (including STD code)

Mobile telephone number

Assets	Estimated Current Value £	Liabilities	Amount Outstanding £
Domestic Property	<input type="text"/>	Domestic Mortgage Outstanding	<input type="text"/>
Address <input type="text"/>		Other Mortgage Outstanding	<input type="text"/>
<input type="text"/>		Other Secured Loans	<input type="text"/>
<input type="text"/>		Unsecured Loans	<input type="text"/>
Other Property		Hire Purchase/Credit Cards	<input type="text"/>
Address <input type="text"/>		Bank Overdrafts	<input type="text"/>
<input type="text"/>		Tax Liabilities	<input type="text"/>
<input type="text"/>			
Bank/Building Society Deposits	<input type="text"/>	Total Liabilities	£ <input type="text"/>
Investments	<input type="text"/>		
Total Assets	£ <input type="text"/>		

**Your consent**

I authorise the Bank to search the files of one or more credit reference agencies, who will keep a record of that search, and make other enquiries the Bank believes necessary to confirm the details on this application form and for credit assessment. If false or inaccurate information is provided and fraud is identified, details including the names of the company Directors at the time of the fraud will be passed to fraud prevention agencies to prevent fraud and money laundering. You undertake to inform all Directors of this notice.

It is important that you read and understand the section entitled 'Important – Your Personal Information' at the beginning of this application form, the 'Keeping You Informed' section in the application form and the 'Using Your Personal Information' notice provided with your terms and conditions.

By signing this application you agree that we can use your information in this way.

**(Additional information may be requested by the Bank if no/insufficient records are found by searches.)**

Signature

Date

# Section 3

# Personal details

All individuals who have a liability for the business/organisation such as Directors/Members/Trustees/Committee Members as well as individuals with authority to transact on the account (either signatory or Authorised Account Persons) must complete this section.

**BEFORE COMPLETING THIS SECTION PLEASE ENSURE YOU HAVE READ AND UNDERSTOOD SECTION 1: IMPORTANT INFORMATION. ONCE COMPLETE, PLEASE SIGN SECTION 1.**



### Note:

If necessary, please photocopy this page.



### Note:

Individual's shareholding/stakeholding/voting right percentage means the proportion of the business owned by the individual.



### Note:

If shares are being held by a nominee we will also require details to be provided within this section of the beneficial shareholders/stakeholders for whom these are being held.

### Useful tip:

If you are a newly appointed Director (within the last three months), please provide a copy of your Form AP01.



### Note:

Please supply assets and liabilities information for each individual.

Title	Forename (in full)	Middle name
<input type="text"/>		
Surname	Any other name(s) you have been known as during the last six years	
<input type="text"/>		
Date of birth	Nationality/ies	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	
day	month	year
Position within business		
Individual's shareholding/ stakeholding/voting right percentage <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> %		

Are these shares being held by a nominee? Yes  No

If yes, please provide full details of actual (beneficial) shareholder (name, address, date of birth, nationality/ies)

Do you already hold a Co-operative Bank account (personal and/or business)? If so, please complete your sort code and account number in order for us to keep our records up to date.

Branch sort code	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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Please provide three full years' address history for each person. If necessary, provide additional information on a separate sheet and attach to your application.

Home address

Postcode

Time at this address years  months

Previous home address (if moved within the last three years)

Postcode

Time at this address years  months

Home telephone number (including STD code)

Mobile telephone number

Assets	Estimated Current Value £	Liabilities	Amount Outstanding £
Domestic Property	<input type="text"/>	Domestic Mortgage Outstanding	<input type="text"/>
Address <input type="text"/>		Other Mortgage Outstanding	<input type="text"/>
<input type="text"/>		Other Secured Loans	<input type="text"/>
<input type="text"/>		Unsecured Loans	<input type="text"/>
Other Property		Hire Purchase/Credit Cards	<input type="text"/>
Address <input type="text"/>		Bank Overdrafts	<input type="text"/>
<input type="text"/>		Tax Liabilities	<input type="text"/>
<input type="text"/>			
Bank/Building Society Deposits	<input type="text"/>		
Investments	<input type="text"/>	Total Liabilities	£ <input type="text"/>
Total Assets	£ <input type="text"/>		

## Your consent

I authorise the Bank to search the files of one or more credit reference agencies, who will keep a record of that search, and make other enquiries the Bank believes necessary to confirm the details on this application form and for credit assessment. If false or inaccurate information is provided and fraud is identified, details including the names of the company Directors at the time of the fraud will be passed to fraud prevention agencies to prevent fraud and money laundering. You undertake to inform all Directors of this notice.

It is important that you read and understand the section entitled 'Important – Your Personal Information' at the beginning of this application form, the 'Keeping You Informed' section in the application form and the 'Using Your Personal Information' notice provided with your terms and conditions.

By signing this application you agree that we can use your information in this way.

**(Additional information may be requested by the Bank if no/insufficient records are found by searches.)**

Signature

Date

**BEFORE COMPLETING THIS SECTION, PLEASE ENSURE YOU HAVE READ AND UNDERSTOOD SECTION 1: IMPORTANT INFORMATION.**

**Useful tip:**

If you require more than one person to fill in this section, photocopy it first and then attach the additional completed page(s) to your application.

If you have NO major shareholders/stakeholders, **please tick here**

## Individuals with 10% (or more) shareholding/stakeholding voting right: (other than those already specified in section 5)

Title	Forename (in full)	Middle name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname	Any other name(s) you have been known as during the last six years	
<input type="text"/>	<input type="text"/>	
Date of birth	Nationality/ies	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	
day month year		
Position within business	Individual's shareholding/stakeholding/voting right percentage <input type="text"/> <input type="text"/> <input type="text"/> %	
<input type="text"/>	<input type="text"/>	

Are these shares being held by a nominee? Yes  No

If yes, please provide full details of actual (beneficial) shareholder (name, address, date of birth, nationality/ies)

Home address

Postcode

Time at this address years   months

Previous home address (if moved within the last three years)

Postcode

Time at this address years   months

Home telephone number (including STD code)

Mobile telephone number

### Your consent

I authorise the Bank to search the files of one or more credit reference agencies, who will keep a record of that search, and make other enquiries the Bank believes necessary to confirm the details on this application form and for credit assessment. If false or inaccurate information is provided and fraud is identified, details including the names of the company Directors at the time of the fraud will be passed to fraud prevention agencies to prevent fraud and money laundering. You undertake to inform all Directors of this notice.

It is important that you read and understand the section entitled 'Important – Your Personal Information' at the beginning of this application form, the 'Keeping You Informed' section in the application form and the 'Using Your Personal Information' notice provided with your terms and conditions.

By signing this application you agree that we can use your information in this way.

**(Additional information may be requested by the Bank if no/insufficient records are found by searches.)**

Signature

Date



**Note:**

ALL businesses must complete Section 4. **Major Shareholders/ Stakeholders** means any individuals or business/organisation with 10% (or more) holding in issued share capital. If you are shareholders/ stakeholders and reside at the same address and your total shareholding/ stakeholding/voting right is 10% (or more), please complete this section.



**Note:**

If shares are being held by a nominee we will also require details to be provided within this section of the beneficial shareholders/stakeholders for whom these are being held.



**Note:**

If there are no additional shareholders/stakeholders, please tick the box at the top of this page.



**Note:**

Individual's shareholding/ stakeholding/voting right percentage means the proportion of the business owned by the individual.

# Major shareholders'/stakeholders' details

BEFORE COMPLETING THIS SECTION, PLEASE ENSURE YOU HAVE READ AND UNDERSTOOD SECTION 1: IMPORTANT INFORMATION.

## Business/organisation with 10% (or more) shareholding/stakeholding voting right:

**Useful tip:**

If you require more than one person to fill in this section, photocopy it first and then attach the additional completed page(s) to your application.

**Useful tip:**

If there is more than one business/organisation with a 10% (or more) shareholding/stakeholding/voting right, please photocopy this section and then attach the additional completed page(s) to your application.

Business/organisation name <input style="width:95%;" type="text"/>	
Company registration number (if applicable) <input style="width:95%;" type="text"/>	<b>Business/organisation shareholding/stakeholding/voting right percentage</b> <input style="width:20px;" type="text"/> %
Registered address of business/organisation <input style="width:95%;" type="text"/>	
Town <input style="width:95%;" type="text"/>	Town <input style="width:95%;" type="text"/>
City <input style="width:95%;" type="text"/>	Postcode <input style="width:20px;" type="text"/>

## Principal personnel of above named business/organisation

Title <input style="width:95%;" type="text"/>	Forename (in full) <input style="width:95%;" type="text"/>	Middle name <input style="width:95%;" type="text"/>
Surname <input style="width:95%;" type="text"/>	Any other name(s) you have been known as during the last six years <input style="width:95%;" type="text"/>	
Date of birth <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>	Nationality/ies <input style="width:95%;" type="text"/>	
day month year	Position within business <input style="width:95%;" type="text"/>	
		<b>Individual's shareholding/stakeholding/voting right percentage</b> <input style="width:20px;" type="text"/> %

Are these shares being held by a nominee? Yes  No

If yes, please provide full details of actual (beneficial) shareholder (name, address, date of birth, nationality/ies)

Home address

Postcode  Time at this address years  months

Previous home address (if moved within the last three years)

Postcode  Time at this address years  months

Home telephone number (including STD code)

Mobile telephone number

## Your consent

I authorise the Bank to search the files of one or more credit reference agencies, who will keep a record of that search, and make other enquiries the Bank believes necessary to confirm the details on this application form and for credit assessment. If false or inaccurate information is provided and fraud is identified, details including the names of the company Directors at the time of the fraud will be passed to fraud prevention agencies to prevent fraud and money laundering. You undertake to inform all Directors of this notice.

It is important that you read and understand the section entitled 'Important – Your Personal Information' at the beginning of this application form, the 'Keeping You Informed' section in the application form and the 'Using Your Personal Information' notice provided with your terms and conditions.

By signing this application you agree that we can use your information in this way.

**(Additional information may be requested by the Bank if no/insufficient records are found by searches.)**

Signature <input style="width:95%;" type="text"/>	Date <input style="width:20px;" type="text"/>
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**Note:**

Business/organisation shareholding/stakeholding/voting right percentage means the proportion of the business owned by another business/organisation.



**Note:**

If shares are being held by a nominee we will also require details to be provided within this section of the beneficial shareholders/stakeholders for whom these are being held.



**Note:**

**Principal personnel** means anyone with liability for the named business/organisation, e.g. business owners, Directors and/or Partners.







**Please call 03457 213 213\* if you would like to receive this information in an alternative format such as large print, audio or Braille.**

**The Co-operative Bank p.l.c. is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (No.121885). The Co-operative Bank, Platform, smile and Britannia are trading names of The Co-operative Bank p.l.c., P.O. Box 101, 1 Balloon Street, Manchester M60 4EP. Registered in England and Wales No. 990937. Credit facilities are provided by The Co-operative Bank p.l.c. and are subject to status and our lending policy. The Bank reserves the right to decline any application for an account or credit facility. The Co-operative Bank p.l.c. is a member of the Council of Mortgage Lenders and subscribes to the Lending Code which is monitored by the Lending Standards Board. Information correct as at 03/2016.**

\*Calls to 0800 and 0808 numbers are free from landlines and mobiles. Calls to 03 numbers cost the same as calls to numbers starting with 01 and 02. Calls to 0845 and 0870 numbers cost 3p per minute, plus your phone company's access charge. Calls to 0844 and 0843 numbers cost 7p per minute, plus your phone company's access charge. Calls may be monitored or recorded for security and training purposes.