

# Transfer of account ownership

## (Bonus account/Future Fund from adult to child)

For the ownership of the Bonus Account/Future Fund to be transferred into the child’s own name this form will need to be completed in full as follows:

**Section A:**

Account holder’s declaration - this section is to be completed and signed by the account holder that is being removed from the account and transferring ownership to the child

**Section B:**

Child’s declaration - this section is to be completed and signed by the child who is becoming the sole owner of the account

**Section C:**

Parent or guardian’s declaration - this section is to be completed and signed by the child’s parent or guardian to enable our checks to be undertaken

To The Co-operative Bank p.l.c.:

Section A: Account holder’s declaration

I agree that you may:

- transfer account number  and any credit balance on the account held by me on behalf of  (child’s name) into the child’s own name
- credit to the account the amount of any deposits which may have been made to the account held on the child’s behalf, but which are still in transit to you
- debit the account with any withdrawals on the account held on the child’s behalf which still have to be presented
- I understand that once the account is transferred I will no longer have access to the account or to any funds held in it.

Signature of account holder  Date

Full name of account holder

## Section B: Child's declaration

Title	First name	Other initials	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

First line of child's address	
Town	
County	Postcode

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 advisor.

### Tax Status

Are you a US Citizen? (Y/N)	
If yes please provide a Tax Identification No	
Are you resident for tax purposes outside the UK? (Y/N)	

If "Yes" please provide details of your tax residencies below:

Countries where Tax Resident	Tax Identification, National Insurance or Social Security Number
1)	
2)	
3)	



### Your marketing preferences and consent declaration:

At The Co-operative Bank p.l.c. (trading names - smile, Platform and Britannia) we would like to keep you up to date with details of our retail banking products and services such as:

current accounts, savings, mortgages and unsecured lending products. If you consent to us contacting you for this purpose, please tick the relevant box(es):

You have the right to withdraw, object to, or change your marketing preferences at any time. You can do this online (for online banking customers) or by calling us or visiting one of our branches.

by post ☐ by telephone ☐

by e-mail ☐ by text message ☐

The Co-operative Bank p.l.c. would also like to keep you up to date with relevant products and services available to you by our carefully selected third parties. (Go to [co-operativebank.co.uk/global/thirdparties](https://co-operativebank.co.uk/global/thirdparties) for a list of third parties.)

Please tick if you consent to this: ☐

In accordance with data protection requirements you have the right of access to your information held by the bank.

- I confirm that the information provided by me is true and complete.
- I understand and agree that The Co-operative Bank Savings General Terms and Conditions and Co-operative Bank Future Fund or Bonus Account Terms and Conditions will continue to apply.
- You may use my personal data in accordance with the notice 'Using your personal information'.

**We will send you another set of terms and conditions with our welcome letter.**

Signature of child

Date

## Section C: Parent or guardian's declaration

**Your information:** It is essential you read carefully the notice headed 'Using your personal information' provided with the terms and conditions of the account(s). This explains how we will use your information. The Data Controller is The Co-operative Bank p.l.c.

**Credit reference & fraud prevention agencies:** We may make searches about you at credit reference agencies who will supply us with credit information as well as information from the Electoral Register. The agencies will record details of any search whether or not this application proceeds. We may use credit scoring methods to assess this application and to verify your identity. Credit searches and other information provided to us and/or the credit reference agencies about you and anyone with whom you are linked financially may be used by us and other companies or organisations if credit decisions are made about you or anyone with whom you are linked financially or other members of your household. This information may also be used for debt tracing and the prevention of money laundering as well as the management of your account(s). In addition, we will ask you to provide physical forms of identification and/or we may telephone you to confirm your identity.

To prevent or detect fraud or to assist in verifying your identity we may make searches of our records and at fraud prevention agencies who will supply us with information. We may also pass information to financial and other organisations involved in fraud prevention to protect ourselves and our customers from theft and fraud. If you give us false or inaccurate information and we suspect fraud, we will record this. We, The Co-operative Bank p.l.c., and other companies or organisations may use this information if financial or motor, household, credit, life or any other insurance facility decisions are made about you or others at your address(es). It may also be used for tracing and claims assessments and verifying identity.

By stating a financial link with another party, you are also declaring that you are entitled to:

- disclose information about your joint applicant and/or anyone else referred to by you
- authorise us to search, link and/or record information at credit reference agencies about you and/or anyone else referred to by you.

Information held about you by the credit reference agencies may already be linked to records relating to anyone with whom you have a financial relationship, such as a joint account. For the purposes of this application you may be treated as financially linked and your application will be assessed with reference to any linked records.

**Please provide the following information and sign the declaration below.**

Title	Full first name	Full middle name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname	Any other name(s) you have been known as in the last six years (please include previous title(s) if this has changed)	
<input type="text"/>	<input type="text"/>	
Gender	Date of birth	Country of nationality
<input type="checkbox"/> M <input type="checkbox"/> F	<input type="text"/> DD <input type="text"/> MM <input type="text"/> YYYY	<input type="text"/>

Present address

<input type="text"/>		
<input type="text"/>		
Postcode		
Time at this address*		Years Months

**\* If less than three years please fill in previous address below**

<input type="text"/>		
<input type="text"/>		
Postcode		
Time at this address		Years Months

### Declaration and Data Protection

I declare that the information I have given on this form is true to the best of my knowledge.

**Your consent:** It is important that you read and understand the section entitled 'Your information' (including the parts about credit reference and fraud prevention agencies) above.

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

Signature of parent/guardian  Date

In accordance with data protection requirements you have the right of access to your information held by the Bank.

**Please complete and return to The Co-operative Bank p.l.c. PO Box 4931, Swindon, SN4 4PL**

**Please call 03457 212 212\* 8am to 6pm Monday to Friday, 9am to 5pm Saturday and Sunday 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 (Financial Services Register No: 121885). Registered office: 1 Balloon Street, Manchester, M4 4BE. Registered in England and Wales (Company No: 990937).

\*Calls to 03 numbers from a UK landline cost up to 16p per minute and from a mobile cost between 3p and 65p if outside any inclusive minutes. Charges for calls made outside of the UK will be determined by your local provider. Calls may be monitored or recorded for security and training purposes.