

Transfer from sole to joint

Your information: It's essential you read carefully the notice headed 'Using your personal information' provided with your terms and conditions in the terms and conditions of your account(s). This explains how we'll use your information.

The Data Controller is The Co-operative Bank p.l.c.

Credit reference and 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 which is 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 may ask you to provide physical forms of identification and/or we may phone you to confirm your identity.

To prevent or detect fraud or to assist in verifying your identity we may make searches of The Co-operative Bank 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 false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies to prevent fraud and money laundering.

Further details explaining how the information held by fraud prevention agencies may be used can be obtained by writing to the Fraud Department, The Co-operative Bank, 4th Floor Delf House, Skelmersdale WN8 6NY.

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 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.

Sole to joint amendments

Authority to add additional account holder

This form cannot be used to add another person to the following accounts: Everyday Extra, Privilege, or Privilege Premier.

Please complete in BLOCK CAPITALS.

Title _____ First name _____ Full middle name _____ Surname _____

Please use full names including any middle names

request and authorise you to add the name of _____

to my/our account(s) Sort code _____ Account number _____

Reason for adding the joint account holder _____

Customer information update

Date of birth _____

Full address including postcode _____

_____ Years at this address _____

If at this address less than three years, previous address _____

Home phone number _____ Mobile phone number _____

Work phone number _____ Email address _____

Occupation and employer's name and address (state length of time with employer) _____

_____ Gross annual income _____

Nationality/ies _____

Additional account holder details

Title _____ First name _____ Full middle name _____ Surname _____

Any other names you have been known as during the last six years _____

Date of birth _____ Nationality/ies _____

Full address including postcode _____

_____ Years at this address _____

If at this address less than three years, previous address _____

Home phone number _____ Mobile phone number _____

Work phone number _____ Email address _____

Occupation and employer's name and address (state length of time with employer) _____

Gross annual income _____

(If you have another) Co-operative Bank/Britannia/**smile** account Sort code _____ Account number _____

If no: Please provide original or certified proof of address and proof of identity.

Applicant 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're 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.

Are you a United States 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

Joint account mandate

By completing this form you are entering into a joint account. By doing so you will both be responsible, together and individually, for all debts on the joint account. This means that in the case of an overdraft, each account holder is responsible for the repayment of the balance and not just half of it. This includes any linked savings accounts. Also, in most cases one party can withdraw the entire balance of the account alone. Should one of you die, the account will transfer to the surviving party/parties. In the event of a relationship dispute, or if you require any further information, please refer to your account terms and conditions or contact us on **+44 (0) 3457 212 212** or call into any branch or visit **co-operativebank.co.uk**

Declaration by each applicant to The Co-operative Bank

We declare that the information we've given on this form is true, complete and up to date, and that we have read the account and Visa debit card terms and conditions where applicable. We accept them, and authorise and request you:

- to open an account in our joint names and where applicable provide a Co-operative Bank Visa debit card, subject to the conditions of use
- to honour our signatures as shown below for all purposes
- to accept the instruction of either of us.

We have read the declarations above.

We agree, in accordance with Section 185(2) of the Consumer Credit Act 1974, that you do not need to provide more than one Statement of Account to us as joint account holders.

We agree, in relation to any application for an overdraft on our joint account and to the extent permitted by law, that where you are required to give information to any of us orally you may give this information to any one of us.

Your consent: It is important that you read the section entitled 'Your information' (including the parts about credit reference and fraud prevention agencies) at the beginning of this form and in the notice headed 'Using your personal information' provided with your terms and conditions, and also 'Your marketing preferences and consent declaration' below the signature box. By signing this form you agree that we can use your information in this way.

Signature of new account holder: _____	Signature of existing account holder(s): _____
Date of signature: _____	Date of signature: _____

New account holder 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), by calling us or visiting one of our branches.

by post by telephone by email 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://www.co-operativebank.co.uk/global/thirdparties) for a list of third parties.) Please tick if you consent to this:

Please complete and return to The Co-operative Bank p.l.c., P.O. Box 50, Freepost NWW2331A, Delf House, Skelmersdale WN8 6GF. Please include certified proof of identity and address of the additional person if not already a Co-operative Bank customer.

Additional documentation may be required to confirm the name and address of the additional account holder. If you require any assistance in completing this form, please contact us on the below number.

Please call +44 (0) 3457 212 212* (8am - 8pm, 7 days a week) 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. subscribes to the Standards of Lending Practice which are monitored by the Lending Standards Board.

*Calls to 03 numbers cost the same as calls to numbers starting with 01 and 02. Calls may be monitored or recorded for security and training purposes.

Information correct as at 07/2019.