

Power of Attorney Registration Form

The Loughborough
Building Society

POS ☐

POA ☐

(Office use only)

Account details for existing accounts

Account Number of all accounts to be added to:

This form needs to be accompanied by the
Power of Attorney document and
Identification and address verification for
POA's being registered

1st Named Account Holder

Customer Number (for office use only)

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Title

Forename(s)

Surname

Address

 Post Code

Tel. No(s) Daytime: Evening: Mobile:

Email

Date of birth - -

Tax Residency (Please read the Information Section and declaration 8)

1. Are you a citizen and tax resident of the UK only? ☐ Yes ☐ No If no, please answer questions 2 and 3

2. Are you a citizen of the USA? ☐ Yes ☐ No

3. Please list the countries other than the UK of which you are tax resident, if any, together with associated tax reference number.

Country/countries of tax residency	Tax Reference Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

2nd Named Account Holder ☐

Power of Attorney ☐

Court of Protection (Deputy) ☐

Missing Person Guardian Order ☐

Customer Number (for office use only)

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Title

Forename(s)

Surname

Address

 Post Code

Tel. No(s) Daytime: Evening: Mobile:

Email

Date of birth - -

Are you an existing account holder with the Loughborough? If Yes, please supply account number:

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Tax Residency (Please read the Information Section and declaration 8)

1. Are you a citizen and tax resident of the UK only? ☐ Yes ☐ No If no, please answer questions 2 and 3

2. Are you a citizen of the USA? ☐ Yes ☐ No

3. Please list the countries other than the UK of which you are tax resident, if any, together with associated tax reference number.

Country/countries of tax residency	Tax Reference Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Please also complete the adding a Power of
Attorney, Court of Protection (Deputy) or Missing
Person Guardian section overleaf if applicable.

Power of Attorney <input type="checkbox"/>	Court of Protection (Deputy) <input type="checkbox"/>	Missing Person Guardian Order <input type="checkbox"/>	
Customer Number (for office use only) <input style="width: 100px;" type="text"/>		Please also complete the adding a Power of Attorney, Court of Protection (Deputy) or Missing Person Guardian section overleaf if applicable.	
Title <input style="width: 150px;" type="text"/>			
Forename(s) <input style="width: 150px;" type="text"/>			
Surname <input style="width: 150px;" type="text"/>			
Address <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
		Post Code <input style="width: 50px;" type="text"/>	
Tel. No(s)	Daytime: <input style="width: 100px;" type="text"/>	Evening: <input style="width: 100px;" type="text"/>	Mobile: <input style="width: 100px;" type="text"/>
Email <input style="width: 150px;" type="text"/>			
Date of birth <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>			
Are you an existing account holder with the Loughborough? If Yes, please supply account number: <input style="width: 100px;" type="text"/>			
Tax Residency (Please read the Information Section and declaration 8)			
1. Are you a citizen and tax resident of the UK only? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please answer questions 2 and 3			
2. Are you a citizen of the USA? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. Please list the countries other than the UK of which you are tax resident, if any, together with associated tax reference number.			
Country/countries of tax residency		Tax Reference Number	

Power of Attorney <input type="checkbox"/>	Court of Protection (Deputy) <input type="checkbox"/>	Missing Person Guardian Order <input type="checkbox"/>	
Customer Number (for office use only) <input style="width: 100px;" type="text"/>		Please also complete the adding a Power of Attorney, Court of Protection (Deputy) or Missing Person Guardian section overleaf if applicable.	
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Forename(s) <input style="width: 150px;" type="text"/>			
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Address <input style="width: 150px;" type="text"/> <input style="width: 150px;" type="text"/>			
		Post Code <input style="width: 50px;" type="text"/>	
Tel. No(s)	Daytime: <input style="width: 100px;" type="text"/>	Evening: <input style="width: 100px;" type="text"/>	Mobile: <input style="width: 100px;" type="text"/>
Email <input style="width: 150px;" type="text"/>			
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2. Are you a citizen of the USA? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. Please list the countries other than the UK of which you are tax resident, if any, together with associated tax reference number.			
Country/countries of tax residency		Tax Reference Number	

Withdrawal Instructions

I/We authorise withdrawals and transfers to be permitted against:

Note: All signatures are required for account amendments

☐

Any one of the signatories

☐

2 to sign

☐

Other; please state

Correspondence address

Correspondence will be sent to the account holder unless stated below

(insert name of nominated attorney to receive mail _____)

Information Section

Tax Residency: The UK government has, and will be signing, a number on inter-governmental agreements to share tax information, where applicable, with the tax authorities in other jurisdictions. The requirement to collect certain information about each customer's tax arrangement is part of UK legislation and as a financial service company we are legally obliged to collect it. We are asking for your tax residency and tax ID number (where applicable) and will record this on our records now, but will only disclose this information to the relevant tax authorities if and when we are required to under UK law. Your tax residence generally is the country in which you live for more than half a year. Special circumstances (such as studying abroad, working overseas, or extended travel) may cause you to be resident elsewhere in more than one country at the same time (dual residency).

The country/countries in which you pay income tax are likely to be your country/countries of tax residence. If you are a US citizen or hold a US passport or green card, you will also be considered tax resident in the US even if you live outside the US.

DECLARATIONS - please read carefully before signing

I am/We are applying to open a savings account with the Society and I/we declare, consent that:

1. I/We have read the general terms and conditions relating to the account applied for as set out in the General Terms and Conditions for Savings Accounts.

2. I/We agree to be bound by the Society's rules, a copy of which is available upon request

3. If required, you may make searches about me/us at credit reference agencies who supply you with information, including information from the Electoral Register, for the purpose of verifying my/our identity. The agencies will record details of the search whether or not this application proceeds. The searches will not be seen or used by lenders to assess my/our ability to obtain credit. You may use scoring methods to assess this application and to verify my/our identity. Credit searches and other information which is provided to you and/or the credit reference agencies, about me/us and those with whom I/we are linked financially may be used by the Loughborough Building Society and other companies for the prevention of money laundering as well as the management of your account. Alternatively, we may ask you to provide physical forms of identification.

4. All information provided above is accurate and true to the best of my knowledge.

5. Your Personal Data: I/We acknowledge that I/we have been provided with a copy of the Society's full Privacy Notice which outlines how the Society will deal with my/our personal information. A copy of this Notice can be found at www.theloughborough.co.uk I/We acknowledge that my/our personal data will be used and retained in the manner set out in the Privacy Notice.

6. Tax Residency: I undertake to inform The Loughborough Building Society of any changes in my circumstances, such as moving outside of the UK, that may affect this declaration.

7. I/We declare that the amount being invested is:

☐

by me as sole beneficial owner

☐

by us as joint beneficial owners. If one of the joint owners dies, the account will become the property of the survivor(s)

☐

by me/us as trustee(s) and enclose completed form 4C Government trustee document.

☐

by me/us as nominee for member and enclose completed form 4B (Government issued document)

☐

by me/us as attorney/attornies for the member and enclose a copy of the power of attorney document.

8. An "association" between the joint applicants and/or individual identified as our financial partner, will be created at credit reference agencies, which will link our financial records. We and everyone else with whom you have a financial link understand that each other's information will be taken into account in all future applications by either or both of us. This linking will continue until one of us successfully files a 'disassociation' at the credit reference agencies. (This clause is applicable to joint applicants).

9. Financial Services Compensation Scheme (FSCS)

I/We confirm that I/we have received and read the Information Sheet relating to the FSCS.

10. General Communication

To help us improve our environmentally friendly credentials we'd like to send you Society statutory notices and member communications via email rather than post. If you consent please tick the box/boxes below.

I consent to receive Loughborough Building Society statutory notices via email:

☐ Applicant 1 ☐ Applicant 2

☐ POA 1 ☐ POA 2

☐ POA 3 ☐ POA 4

You can change your preference or withdraw your consent at any time by writing to us at Loughborough Building Society, 6 High Street, Loughborough LE11 2QB or emailing us at enquiries@theloughborough.co.uk

11. Informing you of other products

From time to time we'd like to contact you with details of other mortgage or savings products we provide which may be of interest to you. We'll never share your personal information with third parties for sales or marketing purposes.

If you consent to us contacting you for this purpose please tick below to say how you would like us to contact you.

I consent to receive communications about the Loughborough Building Society's mortgage and savings products by:

Applicant 1:

☐ Email ☐ Post ☐ Telephone

POA 1

☐ Email ☐ Post ☐ Telephone

POA 3

☐ Email ☐ Post ☐ Telephone

Applicant 2:

☐ Email ☐ Post ☐ Telephone

POA 2

☐ Email ☐ Post ☐ Telephone

POA 4

☐ Email ☐ Post ☐ Telephone

I / We agree to the above persons registering as Power of Attorney on my/our accounts (if applicable)

Account holder Signature 1 Date		Account holder Signature 2 Date	
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I / We agree to be registered as Power of Attorney on the stated accounts held with The Loughborough

POA Signature 1 Date		POA Signature 2 Date	
POA Signature 3 Date		POA Signature 4 Date	