

Application for Chelsea 60 Day Notice account

This is an application to open an account with Yorkshire Building Society (trading as Chelsea Building Society and Chelsea). Chelsea is operated under its own brand and with its own products. Please complete all applicable white boxes (including declaration overleaf) in **block capitals**. Proof of identity and address will be required for new savers, please read the relevant section of this leaflet. For transfers, please complete the amount you wish to transfer and complete a transfer form.

Please read and sign the declaration overleaf (all applicants must sign)



*I/we enclose £ to open a Chelsea 60 Day Notice account Interest is paid annually, if you require monthly interest please tick this box

Applicant(s) details Whoever is first named on the account will be the representative joint shareholder and, under the rules he/she alone will be entitled to exercise rights of membership.

Title	First names	Surname	Date of birth	Nationality	Account numbers of any existing accounts held with Chelsea (either savings or mortgage)
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Address of first named account holder (If the second named account holder has a different address from the first named account holder please provide details to us in writing.)

Postcode Home telephone Daytime telephone

1st Applicant's occupation **National Insurance Number (if you have one)** **Employer** Retired Y N

2nd Applicant's occupation **National Insurance Number (if you have one)** **Employer** Retired Y N

Interest mandate Interest will be added to the account balance unless you complete A or B below:

A Transfer to another account with Chelsea:

B Credit to nominated bank account as detailed below:

Bank sort code Account number Reference number¹ Account holder's name

Name and address of bank or building society

Postcode

Saving on behalf of another

*I/we are saving as: (See section 2 of the declaration overleaf) **Attorney(s)** **Trustee(s)** **Administrator(s)** **Executor(s)**

Of: Date of birth

Origin of funds (where the funds have come from) Name of Trust (if applicable)

Please read and sign the declaration below (all applicants must sign)

¹Delete as appropriate ²If funds are to be transferred to a building society account a reference number may be required

Declaration

I (each of us if more than one) apply to open Chelsea 60 Day Notice account on the basis of the completed application form and:

- Confirm that I am 16 years or over.
- Confirm the funds which are to be saved belong to me or, if not, are being saved by me as Trustee, but not as a Trustee for a corporate body or a person including a corporate body or for a Discretionary or Accumulation Trust or Will Trust or Settlement.
- Agree that the terms that apply to Chelsea 60 Day Notice are Chelsea's savings account standard terms and Chelsea 60 Day Notice product terms.
- I will be subject to the Rules of Yorkshire Building Society a copy of which is available on request.
- Confirm that I have received a copy of Chelsea's 'Essential savings information' leaflet.
- Confirm that you may search my records at one or more credit reference and fraud prevention agencies in order to check my identity. (I understand that details of the search will be recorded by the agency(ies) and that these details will be seen by other organisations carrying out later searches and may be used by them for making lending decisions, collecting debts or fraud prevention.)
- Confirm that you may, for the purpose of verifying identity, confirm my address with my employer or business as detailed in this application.
- I acknowledge that if false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies and law enforcement agencies may access this information.
- I further acknowledge that you and other organisations may also access and use this information to prevent fraud and money laundering, for example, when:
 - checking details on applications for credit and credit related or other facilities
 - managing credit and credit related accounts or facilities
 - recovering debt
 - checking details on proposals and claims for all types of insurance
 - checking details on job applicants and employees.
- I acknowledge that you and other organisations may access and use from other countries the information recorded by fraud prevention agencies. (The fraud prevention agencies Chelsea Building Society uses can be provided on request. Please contact us at Thirlestaine Hall, Thirlestaine Road, Cheltenham, Gloucestershire, GL53 7AL or call on 0845 744 6622 to receive details.)
- Consent to you holding information about me on computer and other media even after my account has been closed.
- Acknowledge that you have absolute discretion to decide whether to accept my application to open this account or not.

Charitable Assignment declaration

I have read the section titled 'Charitable Assignment' and I agree that unless I am an 'exempt customer', I will transfer to Yorkshire Building Society's Charitable Foundation (or any other charities nominated by it, but to no other person) my rights to any windfall conversion benefits to which I may become entitled. I acknowledge that my agreement cannot be withdrawn or varied.

I authorise the Yorkshire to pass any relevant information about me or my account to the Charitable Foundation and also to transfer any windfall conversion benefit to the Charitable Foundation without notice to me.

If you are an existing customer, please provide your mortgage and/or savings account number(s) in the boxes below:

Keeping you informed about other products and services

We would like to give you details (by telephone and post) of our mortgage, savings, insurance and other products and services which we think you might be interested in. We would also like to pass your details on to other selected organisations so that they can contact you with similar products and services that you might be interested in.

Tick here if you object to receiving such details

Operating joint accounts

We explain in our 'Essential savings information' that, if the account is a joint account, the account may be operated on an either to sign basis or a joint authority basis and the respective benefits/risks to each approach.

Please select below how you wish to operate the account.

Signature	Signature
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Date <input type="text"/>	<input type="checkbox"/>

If you want the account to operate on a joint signature basis, please tick the box - if not ticked, we shall presume that you want to operate on an either to sign basis.

Account number	First named customer's surname	Date A/C opened	Branch	Sig mandate	Product types	Customer	V/roll	CAS	CAS
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