

# Trust Application (Discretionary trust & Personal injury trust)

**Before you start to complete this application, please ensure:**

- ☐ All named parties are aged 18 or over
- ☐ All named parties are a UK resident
- ☐ Hold a transactional UK Bank account in the name of the trust, where electronic payments can be made
- ☐ The trust is a Discretionary or Personal injury trust that is not governed by a Will
- ☐ You have provided the original or certified copy of the trust deed and any supplemental or amendments
- ☐ If required you are able to supply ID for all trustees, beneficiaries, settlors/testators and protector or controllers
- ☐ You are able to supply your Trust Registration Service proof of registration document where applicable

## Section A

Trust name: \_\_\_\_\_

Nature of trust: \_\_\_\_\_

Country trust established in: \_\_\_\_\_

Date established: \_\_\_\_\_

Source of income: \_\_\_\_\_

Value of trust: \_\_\_\_\_

Registered address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Address for correspondence: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Contact name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

## Section B

**Nominated bank account (for transferring funds to, and receiving funds from your UTB account)**

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Sort code: \_\_\_\_\_

Branch name: \_\_\_\_\_

## Section C

**Your new account**

Type of new account required (please check available products)

**Notice deposit**

Period \_\_\_\_\_ days

☐ Please tick here to have annual interest repaid to your nominated bank account.

**Fixed deposit**

Term \_\_\_\_\_ months/years (delete as appropriate)

☐ Please tick here to have annual interest repaid to your nominated bank account. (Only available for terms longer than 1 year)

**Opening balance**

We wish to open a deposit account on the basis set out above with an initial deposit of

£: \_\_\_\_\_

**Please note, funds must be sent to United Trust Bank either by way of electronic transfer or a cheque from the nominated Bank account (details provided in Section B of this application).**

**Please choose one of the options below:**

☐ Faster payment, BACS, CHAPS or cheque made payable to United Trust Bank - once your account has been opened

☐ Cheque made payable to United Trust Bank Limited - enclosed with this application

**Source of funds**

**Please indicate the source used to fund the savings account:**

☐ Proceeds of a sale

☐ Compensation/settlement

☐ Donation/Grant

☐ Gift/Inheritance

☐ Other - please provide detail \_\_\_\_\_



## Section D

Please provide details of all signatories, trustees, beneficiaries and settlors/testators and protector or controllers. We require the details of all the trustees listed on the Trust Deed whether individuals or organisations, these individuals must have the authority to open the account on behalf of the trust.

### 1.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

National Insurance number: \_\_\_\_\_

Residential address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Previous address: (Please complete this if you have lived at your current address for less than three years, if there are more addresses, please provide the information on a duplicate sheet.)

\_\_\_\_\_

Postcode: \_\_\_\_\_

Signatory ☐ Yes ☐ No (If yes please complete Section E)

### 3.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

National Insurance number: \_\_\_\_\_

Residential address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Previous address: (Please complete this if you have lived at your current address for less than three years, if there are more addresses, please provide the information on a duplicate sheet.)

\_\_\_\_\_

Postcode: \_\_\_\_\_

Signatory ☐ Yes ☐ No (If yes please complete Section E)

### 2.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

National Insurance number: \_\_\_\_\_

Residential address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Previous address: (Please complete this if you have lived at your current address for less than three years, if there are more addresses, please provide the information on a duplicate sheet.)

\_\_\_\_\_

Postcode: \_\_\_\_\_

Signatory ☐ Yes ☐ No (If yes please complete Section E)

### 4.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

National Insurance number: \_\_\_\_\_

Residential address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Previous address: (Please complete this if you have lived at your current address for less than three years, if there are more addresses, please provide the information on a duplicate sheet.)

\_\_\_\_\_

Postcode: \_\_\_\_\_

Signatory ☐ Yes ☐ No (If yes please complete Section E)

If more than four individuals are required to fulfil requirements, please provide the information on a duplicate sheet.



Section D (continued)

Where applicable please provide details of the organisation trustee.

Organisation Trustee

1.

Organisation name:

Address:

Postcode:

Director name:

Contact name:

Telephone:

Mobile:

Email:

Signatory ☐ Yes ☐ No (If yes please complete Section E)

2.

Organisation name:

Address:

Postcode:

Director name:

Contact name:

Telephone:

Mobile:

Email:

Signatory ☐ Yes ☐ No (If yes please complete Section E)



## Section E

### Account Mandate

#### Signing arrangements

Please tick one box only. Instructions to operate this account will require:

☐ Any one signatory ☐ Any two signatories ☐ All signatories ☐ Other: \_\_\_\_\_

Please ensure the signature stays within the designated area.

#### Sole/First signatory

Signature:

Date:

Name:

#### Second signatory

Signature:

Date:

Name:

#### Third signatory

Signature:

Date:

Name:

#### Fourth signatory

Signature:

Date:

Name:

## Section F

### How did you hear about United Trust Bank Limited?

Please choose one option from the list below:

- ☐ Existing customer  
☐ Recommendation  
☐ United Trust Bank Limited website  
☐ Other website or search engine (please provide details below)

\_\_\_\_\_

## Section G

Please confirm you are registered in the UK for tax purposes ☐

Are you registered in another country outside of the UK for tax purposes? ☐ No ☐ Yes

Non-UK tax residency country:

Tax reference number:

If more than four individuals are required to fulfil signatory requirements, please provide the information on a duplicate sheet.



## Section H

### Agreement

We agree to be bound by the General Terms and Conditions and any Additional Terms and Conditions applying to this account or any other account we open with United Trust Bank Limited. We authorise you to make any enquiries that you consider necessary to confirm the details in this application. The information provided in this application is true to the best of our knowledge and the specimen signatures are correct.

We hereby certify that The Trust has the power to open the account applied for and if required we can produce evidence of the appropriate authority to confirm that the deposit may be made. We confirm that the account we are opening and the money we are investing is on behalf of The Trust named in this application.

We authorise you to act on the instructions of the authorised signatories named in this application. We acknowledge that we agree to indemnify United Trust Bank Limited fully in the event of any losses, claims or costs, which United Trust Bank Limited may suffer from accepting and enacting instructions provided by The Trust in accordance with this mandate. We will inform United Trust Bank Limited immediately, in writing, if the authorised signatories are to be changed. We will inform the bank immediately, in writing, should The Trust's tax status or beneficial owners change.

We confirm that The Trust named in this application is a UK resident entity and that we will inform United Trust Bank Limited immediately, in writing, if the entity or any named individual cease to be a UK resident.

We confirm that we have read a copy of the Terms and Conditions for the Bank's business accounts in force from time to time and agree to be bound by these.

In order to process your application, United Trust Bank Limited will perform an identity check on The Trust and any individuals named in the application with one or more credit reference agencies ("CRAs"). To do this, United Trust Bank Limited will supply information to CRAs and they will give us information about The Trust and the individuals. CRAs will supply to us both public (including the electoral register) and shared credit, financial situation and financial history information and fraud prevention information.

United Trust Bank Limited will use this information to:

- Verify the accuracy of the data you have provided to us
- Prevent criminal activity, fraud and money laundering
- Verify the identity of The Trust and the individuals

When CRAs receive a search from us they will place a search footprint on your credit file that may be seen by other lenders.

The identities of the CRAs, their role also as fraud prevention agencies, the data they hold, the ways in which they use and share personal information, data retention period and your data protection rights with the CRAs are explained in more detail within the Credit Reference Agencies Information Document (CRAIN). The CRAIN for the CRAs we use can be found at:

TransUnion: [www.transunion.co.uk/crain](http://www.transunion.co.uk/crain) Equifax: [www.equifax.co.uk/crain](http://www.equifax.co.uk/crain) Experian: [www.experian.co.uk/crain](http://www.experian.co.uk/crain)

If you do not have access to the internet or would prefer a paper copy, please contact us on 020 7190 5555.

We will also use your information in accordance with our Privacy Notice which has been previously provided to you.

A further copy can be found at [www.utbank.co.uk/privacy-notice](http://www.utbank.co.uk/privacy-notice) or contact the Data Protection Officer on 020 7190 5555.

#### Signed\*

I have received and read a copy of the Depositor Protection Information Sheet ☐

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

#### Signed\*

I have received and read a copy of the Depositor Protection Information Sheet ☐

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

\*by a minimum of two trustees where applicable

\*If a corporate trustee, the signing trustees must have the relevant authority to sign on behalf of the corporation



## Section I

### Marketing Consent

At United Trust Bank Limited we take your privacy and the security of the data you provide to us seriously.

Occasionally we would like to provide The Trust with details of the deposit accounts, savings rates and other products that we offer.

If you provide your consent for The Trust to receive these details, you are free to withdraw it at any time in the future. You can do this by visiting [www.utbank.co.uk/preference-centre](http://www.utbank.co.uk/preference-centre) or by giving us a call on 020 7190 5555.

We will only ever use your information in accordance with any legal rights we have and always in accordance with our Privacy Notice: [www.utbank.co.uk/privacy-policy](http://www.utbank.co.uk/privacy-policy)

Please note that we will never pass The Trust's details to any third party for marketing purposes.

Please confirm your preferences below:

☐ **The Trust would like to receive information from United Trust Bank Limited regarding Deposit accounts, savings rates and other products that you offer.**

Please let us know the ways in which you are happy for us to contact The Trust by ticking those that apply:

- ☐ Phone/SMS
- ☐ Email
- ☐ Post

☐ **The Trust does not wish to receive such information from United Trust Bank Limited.**

### Checklist:

Before you send us your application, please ensure the following are checked:

- ☐ All pages of your application form have been completed
- ☐ Marketing consent completed
- ☐ Depositor Protection Information Sheet acknowledgement box completed and sheet retained for your records
- ☐ The original or certified copy of the Trust Deed and Trust Registration Service (where applicable) have been included
- ☐ A signed cheque is enclosed (unless cheque to follow or a bank transfer is to be made once the account is open)
- ☐ Photocopies of identity documents may be required for all account holders, signatories, settlors/testators, protectors/controllers, trustees and beneficiaries should electronic checks fail.

**Please return your completed application to United Trust Bank, One Ropemaker Street, London EC2Y 9AW**





# Financial Services Compensation Scheme (FSCS) Depositor Protection Information Sheet

## Basic information about the protection of your eligible deposits

Eligible deposits in United Trust Bank Limited are protected by:	<b>The Financial Services Compensation Scheme ("FSCS")<sup>1</sup></b>
Limit of protection:	<b>£85,000 per depositor per bank / building society / credit union<sup>2</sup></b>
If you have more eligible deposits at the same bank / building society / credit union:	<b>All your eligible deposits at the same bank / building society / credit union are "aggregated" and the total is subject to the limit of £85,000<sup>2</sup>.</b>
If you have a joint account with other person(s):	<b>The limit of £85,000 applies to each depositor separately.<sup>3</sup></b>
Reimbursement period in case of bank / building society / credit union's failure:	<b>20 working days<sup>4</sup></b>
Currency of reimbursement:	<b>Pounds sterling (GBP, £)</b>
To contact United Trust Bank Limited for enquiries relating to your account:	<b>United Trust Bank Limited Deposits Department, 1 Ropemaker Street, London EC2Y 9AW Tel: 020 7190 5599 Email: deposits@utbank.co.uk</b>
To contact the FSCS for further information on compensation:	<b>Financial Services Compensation Scheme 10th Floor Beaufort House, 15 St Botolph Street, London EC3A 7QU Tel: 0800 678 1100 or 020 7741 4100 Email: ICT@fscs.org.uk</b>
More information:	<b>www.fscs.org.uk</b>

Additional information (all or some of the below)

### <sup>1</sup> Scheme responsible for the protection of your eligible deposit

Your eligible deposit is covered by a statutory Deposit Guarantee Scheme. If insolvency of your bank, building society or credit union should occur, your eligible deposits would be repaid up to £85,000 by the Deposit Guarantee Scheme.

### <sup>2</sup> General limit of protection

If a covered deposit is unavailable because a bank, building society or credit union is unable to meet its financial obligations, depositors are repaid by a Deposit Guarantee Scheme. This repayment covers a maximum £85,000 per bank, building society or credit union. This means that all eligible deposits at the same bank, building society or credit union are added up in order to determine the coverage level. If, for instance a depositor holds a savings account with £80,000 and a current account with £20,000, he or she will only be repaid £85,000.

In some cases eligible deposits which are categorised as "temporary high balances" are protected above £85,000 for six months after the amount has been credited or from the moment when such eligible deposits become legally transferable. These are eligible deposits connected with certain events including:

- (a) certain transactions relating to the depositor's current or prospective only or main residence or dwelling;
- (b) a death, or the depositor's marriage or civil partnership, divorce, retirement, dismissal, redundancy, or invalidity;
- (c) the payment to the depositor of insurance benefits or compensation for criminal injuries or wrongful conviction.

More information can be obtained at [www.fscs.org.uk](http://www.fscs.org.uk)

### <sup>3</sup> Limit of protection for joint accounts

In case of joint accounts, the limit of £85,000 applies to each depositor.

However, eligible deposits in an account to which two or more persons are entitled as members of a business partnership, association or grouping of a similar nature, without legal personality, are aggregated and treated as if made by a single depositor for the purpose of calculating the limit of £85,000.



## 4. Reimbursement

The responsible Deposit Guarantee Scheme is the Financial Services Compensation Scheme, 10th Floor Beaufort House, 15 St Botolph Street, London, EC3A 7QU, Tel: 0800 678 1100 or 020 7741 4100, Email: ICT@fscs.org.uk. It will repay your eligible deposits (up to £85,000) within 20 working days until 31 December 2018; within 15 working days from 1 January 2019 until 31 December 2020; within 10 working days from 1 January 2021 to 31 December 2023; and within 7 working days from 1 January 2024 onwards, save where specific exceptions apply.

Where the FSCS cannot make the repayment amount available within 7 working days, it will, from 1 June 2016 until 31 December 2023, ensure that you have access to an appropriate amount of your covered deposits to cover the cost of living (in the case of a depositor which is an individual) or to cover necessary business expense or operating cost (in the case of a depositor which is not an individual or a large company) within 5 working days of request.

If you have not been repaid within these deadlines, you should contact the Deposit Guarantee Scheme since the time to claim reimbursement may be barred after a certain time limit. Further information can be obtained at [www.fscs.org.uk](http://www.fscs.org.uk).

## Other important information

In general, all retail depositors and businesses are covered by the Deposit Guarantee Schemes. Exceptions for certain deposits are stated on the website of the responsible Deposit Guarantee Scheme. Your bank, building society or credit union will also inform you of any exclusions from protection which may apply. If deposits are eligible, the bank, building society or credit union shall also confirm this on the statement of account.

### A deposit is excluded from protection if:

1. The holder and any beneficial owner of the deposit have never been identified in accordance with money laundering requirements. For further information, contact your bank, building society or credit union.
2. The deposit arises out of transactions in connection with which there has been a criminal conviction for money laundering.
3. It is a deposit made by a depositor which is one of the following:
  - credit institution
  - financial institution
  - investment firm
  - insurance undertaking
  - reinsurance undertaking
  - collective investment undertaking
  - pension or retirement fund<sup>1</sup>
  - public authority other than a small local authority.
4. It is a deposit of a credit union to which the credit union itself is entitled.
5. It is a deposit which can only be proven by a financial instrument<sup>2</sup> unless it is a savings product which is evidenced by a certificate of deposit made out to a named person and which existed in the UK or a Member State on 2 July 2014).
6. It is a deposit of a collective investment scheme which qualifies as a small company.<sup>3</sup>
7. It is a deposit of an overseas financial services institution which qualifies as a small company.<sup>4</sup>
8. It is a deposit of certain regulated firms (investment firms, insurance undertakings and reinsurance undertakings) which qualify as a small business or a small company<sup>5</sup> – refer to the FSCS for further information on this category.
9. It is not held by an establishment of a bank, building society or credit union in the United Kingdom.

For further information about exclusions, refer to the FSCS website at [www.FSCS.org.uk](http://www.FSCS.org.uk)

<sup>1</sup> Deposits by personal pension schemes, stakeholder pension schemes and occupational pension schemes of micro, small and medium sized enterprises are not excluded

<sup>2</sup> As listed in Part I of Schedule 2 to the Financial Services and Markets Act 2000 (Regulated Activities) Order 2001

<sup>3</sup> Under the Companies Act 1985 or Companies Act 2006

<sup>4</sup> See footnote 3

<sup>5</sup> See footnote 3

