

# Registered Charities Account



## Application Form PLEASE COMPLETE IN BLACK INK AND BLOCK CAPITALS

This form is for use by Appointed Officers or Trustees of Registered Charities where monies are to be invested by an individual on behalf of the Registered Charity. The Registered Charity must meet the criteria detailed on the account Summary Box.

PLEASE ENSURE ALL SECTIONS ARE COMPLETED & THE FORM SUBMITTED WITH THE REQUIRED IDENTIFICATION.

### Section 1: Account Name

Name of Account

### Section 2: Registered Charity Details

Name of Registered Charity

Charities Commission Registration No

Does the Charity have an FCA Registration No.

Yes

No

FCA Registration No (if applicable)

Legal Status / Nature of Organisation

Limited Company

Unincorporated Association

Charitable Incorporated Organisation

Other

Principal (Registered) Address of Organisation

Postcode

Organisation Email Address

Correspondence Address (if different than above)

Postcode

Organisation Email Address

Telephone

Day

Mobile

Organisation Start Date

Number of Trustees

We are required by the Financial Services Compensation Scheme to identify whether you are a micro, small or medium enterprise. Please answer the following questions so we can ascertain this information.

How many employees does the business have?

What was the turnover in the last 12 months?

What is the anticipated turnover for the next 12 months?

### Section 3: Account Information

How often do you expect to use the account?

One off lump sum

Bi-Monthly

Quarterly

Half-yearly

Annually

Please tick the box which most accurately reflects the anticipated turnover of this account, excluding your initial deposit during a typical year:

£50,000 - £100,000

£100,000 - £250,000

£250,000 - £500,000

£500,000 - £750,000

Other

Opening Investment

Electronic Transfer £

Total £

NOTE: INITIAL DEPOSIT AND ALL SUBSEQUENT DEPOSITS MUST BE MADE BY BANK TRANSFER.

## Section 4: Withdrawal Instructions & Payment of Interest

### Withdrawal Instructions

Withdrawals from the account must be made by bank transfer to the nominated client account at a UK bank in the name of the Organisation

We the Officers (Chair, Treasurer & Secretary) of the Organisation authorise the following number of Appointed Signatories to perform withdrawals on the account:

Any 1 of the Appointed Signatories listed in **Section 9** of this Application Form

Any 2 of the Appointed Signatories listed in **Section 9** of this Application Form

### Payment of Interest

Interest earned will be added to the account balance annually on 31<sup>st</sup> March.

## Section 5: Entity Tax Declaration

Please can you complete in full the Entity Tax Declaration Form and submit this along with your completed Application Forms.

This form is available to be downloaded from the Society's website: [www.thevernon.co.uk/35-day-charity-account](http://www.thevernon.co.uk/35-day-charity-account). We will not be able to open your account without this information.

## Section 6: Personal Data (Appointed Officer / Trustee / Appointed Signatory)

### YOUR RIGHTS

For the purposes of General Data Protection Regulation, the Vernon Building Society is the Data Controller responsible for the processing of your personal data. You have the right to request in writing a copy of the details held about you and where necessary the right to object to certain processing, the right to correct, sometimes delete and restrict the personal data the Society uses. In addition, you have the right to complain to the Society and the Information Commissioners Office (the data protection regulator). Please refer to the Vernon Building Society's Privacy Notice for further information on your rights.

Where you have provided your consent to the Society, such as to receive marketing messages, you have the right to withdraw it at any time. You can do this by notifying your local branch, calling us on 0161 429 6262 or writing to us at Marketing Communications, Vernon Building Society, 19 St Petersgate, Stockport, SK1 1HF. Alternatively, email [unsubscribe@thevernon.co.uk](mailto:unsubscribe@thevernon.co.uk).

### HOW WE USE YOUR DATA

- The Vernon Building Society will only retain your personal data only for as long as necessary to administer your account in line with regulatory and legal requirements.
- The Vernon Building Society processes your personal information to enable it to provide a service for its members and customers which may include managing your accounts, maintaining its own accounts and records, supporting staff training and development, promoting its services; undertaking market research and the provision of financial services and advice.
- If false and inaccurate information is provided and fraud is identified, your details will be passed to fraud prevention agencies.
- The Vernon Building Society requires a lawful reason to process your personal data and for some processing more than one legal basis may be relevant (except where the Society relies on Consent). The Society uses the following reasons to process your personal data: Consent, Performance of a Contract, Legal Obligation and Legitimate Interests.

## Section 7: Marketing Preferences

### Appointed Officers & / OR Account Signatories

I would like to receive email updates about Vernon Building Society products, services, charity and news

1	2	3	4	5	6
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

You can change your preferences at any time by emailing [communications@thevernon.co.uk](mailto:communications@thevernon.co.uk), calling 0161 429 6262 or writing to:  
Marketing Communications, Vernon Building Society, 19 St. Petersgate, Stockport, SK1 1HF.

## Section 8: Identification

We need sufficient ID for all Appointed Officers and Account Signatories to open your account.

One form of identification is required for ALL of Registered Charities Appointed Officers (Chair, Treasurer & Secretary) and all Account Signatories (where these are not Appointed Officers). The Society will also carry out an electronic verification search for each of the Registered Charities Appointed Officers (Chair, Treasurer & Secretary) and all Account Signatories.

Please refer to 'Our Identity Requirements' Leaflet available on the Society's website for full details. [www.thevernon.co.uk/35-day-charity-account](http://www.thevernon.co.uk/35-day-charity-account)

Registered Charities opening a Registered Charities Account are also required to provide:-

- A copy of Charities Commission Registration (England & Wales, Scottish Charities Regulator or Charity Commission for Northern Ireland)
- A copy of the minutes of the meeting where approval to open the Registered Charities Account was given signed by the Secretary
- A Bank Statement in the name & address of the Registered Charity

We will also carry out a Charity Commission for England & Wales, Scottish Charities Regulator or Charity Commission for Northern Ireland search.

**Section 9: Appointed Officers / Appointed Signatories (Please delete as appropriate)**

**Appointed Officer / Signatory 1 (please delete)**

Title  Surname

First Name(s)

Date of Birth (DD/MM/YYYY)  /  /

National Insurance Number

Residential Address   
  
 Postcode

How long have you lived at this address?  
Years  Months

If less than 1 year please provide your previous address:-

Previous Residential Address   
  
 Postcode

How long did you live at this address?  
Years  Months

Email

Contact Telephone Numbers  
Day   
Mobile

Position in the Registered Charity

Nationality

Country of Residence

Will you be an Account Signatory? Yes  No

Are you an existing VBS customer? Yes  No

If Yes, please enter your existing Vernon account number(s)

Signature

**Appointed Officer / Signatory 2 (please delete)**

Title  Surname

First Name(s)

Date of Birth (DD/MM/YYYY)  /  /

National Insurance Number

Residential Address   
  
 Postcode

How long have you lived at this address?  
Years  Months

If less than 1 year please provide your previous address:-

Previous Residential Address   
  
 Postcode

How long did you live at this address?  
Years  Months

Email

Contact Telephone Numbers  
Day   
Mobile

Position in the Registered Charity

Nationality

Country of Residence

Will you be an Account Signatory? Yes  No

Are you an existing VBS customer? Yes  No

If Yes, please enter your existing Vernon account number(s)

Signature

**Section 9: Appointed Officers / Appointed Signatories (Please delete as appropriate)**

**Appointed Officer / Signatory 3 (please delete)**

Title  Surname

First Name(s)

Date of Birth (DD/MM/YYYY)  /  /

National Insurance Number

Residential Address   
  
  
 Postcode

How long have you lived at this address?  
 Years  Months

If less than 1 year please provide your previous address:-

Previous Residential Address   
  
  
 Postcode

How long did you live at this address?  
 Years  Months

Email

Contact Telephone Numbers  
 Day   
 Mobile

Position in the Registered Charity

Nationality

Country of Residence

Will you be an Account Signatory? Yes  No

Are you an existing VBS customer? Yes  No

If Yes, please enter your existing Vernon account number(s)

Signature

**Appointed Officer / Signatory 4 (please delete)**

Title  Surname

First Name(s)

Date of Birth (DD/MM/YYYY)  /  /

National Insurance Number

Residential Address   
  
  
 Postcode

How long have you lived at this address?  
 Years  Months

If less than 1 year please provide your previous address:-

Previous Residential Address   
  
  
 Postcode

How long did you live at this address?  
 Years  Months

Email

Contact Telephone Numbers  
 Day   
 Mobile

Position in the Registered Charity

Nationality

Country of Residence

Will you be an Account Signatory? Yes  No

Are you an existing VBS customer? Yes  No

If Yes, please enter your existing Vernon account number(s)

Signature

**Section 9: Appointed Officers / Appointed Signatories (Please delete as appropriate)**

**Appointed Officer / Signatory 5 (please delete)**

Title  Surname

First Name(s)

Date of Birth (DD/MM/YYYY)  /  /

National Insurance Number

Residential Address   
  
  
Postcode

How long have you lived at this address?  
Years  Months

If less than 1 year please provide your previous address:-

Previous Residential Address   
  
  
Postcode

How long did you live at this address?  
Years  Months

Email

Contact Telephone Numbers  
Day   
Mobile

Position in the Registered Charity

Nationality

Country of Residence

Will you be an Account Signatory? Yes  No

Are you an existing VBS customer? Yes  No

If Yes, please enter your existing Vernon account number(s)

Signature

**Appointed Officer / Signatory 6 (please delete)**

Title  Surname

First Name(s)

Date of Birth (DD/MM/YYYY)  /  /

National Insurance Number

Residential Address   
  
  
Postcode

How long have you lived at this address?  
Years  Months

If less than 1 year please provide your previous address:-

Previous Residential Address   
  
  
Postcode

How long did you live at this address?  
Years  Months

Email

Contact Telephone Numbers  
Day   
Mobile

Position in the Registered Charity

Nationality

Country of Residence

Will you be an Account Signatory? Yes  No

Are you an existing VBS customer? Yes  No

If Yes, please enter your existing Vernon account number(s)

Signature

**Section 10: Declarations & Application**

**BEFORE SIGNING THIS FORM BELOW PLEASE READ THE TERMS & CONDITIONS RELATING TO THIS ACCOUNT CAREFULLY AS WE SHALL SEEK TO RELY ON THEM.**

**Declarations**

We the Appointed Officers or Appointed Signatories of the Registered Charity whose signatures appear on this form declare that:

- We are the Appointed Officers or Trustees of the Registered Charity who are authorised to open this Registered Charities Account.
- The sums to be deposited in the Vernon Building Society held in the name of the Registered Charity are the Registered Charities own financial resources.
- We the Appointed Officers of the Registered Charity:
  - Provide authority to the persons listed to operate this Registered Charities on behalf of the Registered Charity named in the application (Section 2 of this Application Form).
  - Acknowledge our responsibility to advise the Vernon Building Society where any changes are made to the Registered Societies Appointed Officers or Appointed Signatories
  - Acknowledge the Registered Charities responsibilities meet the appropriate fitness & proprietary and due diligence requirements for all Appointed Officers & Trustees to fulfil AML obligations and to be able to provide this information to the Vernon Building Society should this be required.
  - Understand that the Registered Charity is not a member of the Society and therefore it does not have the right to attend the AGM or vote on resolutions of the Society
  - Agree to be bound by the Rules of the Society.
  - Confirm we have read copies of the last published 'Annual Review & Report' incorporating the 'Summary Financial Statement' and the 'Complaints Policy & Procedure' Leaflet.
  - Confirm we have read a copy of the full Terms & Conditions of the account.
  - Undertake to advise the Vernon Building Society **within 30 days** of any change in circumstances which affects either the Registered Charities tax residence status declared on a previously completed Self-Certification Form which causes the information contained to become incorrect, and to provide the Vernon Building Society with a suitably updated Self-Certification and declaration **within 30 days** of such change in circumstances.

We the Appointed Officers of the Registered Charity detailed previously in Section 9 wish to apply to open an account on behalf of the Registered Charity detailed in Section 2 of this Application Form and hold funds on behalf the Registered Charity. We provide authority to the persons listed within Section 9 of this Application Form to operate this Registered Charities Account to hold funds on behalf of this Registered Charity.

We confirm that the details overleaf are correct, and our signatures are an acknowledgement to this declaration

Appointed Officer / Signatory 1 <b>Print Name</b>		Signature		Date	
Appointed Officer / Signatory 2 <b>Print Name</b>		Signature		Date	
Appointed Officer / Signatory 3 <b>Print Name</b>		Signature		Date	
Appointed Officer / Signatory 4 <b>Print Name</b>		Signature		Date	
Appointed Officer / Signatory 5 <b>Print Name</b>		Signature		Date	
Appointed Officer / Signatory 6 <b>Print Name</b>		Signature		Date	

## Section 10: Declarations & Application (cont.)

### Appointed Officers & / OR Account Signatories

1      2      3      4      5      6

We the Appointed Officers & /or Account Signatories overleaf confirm receipt of the FSCS Information Sheet providing basic information about the protection of eligible deposits relating to the Financial Services Compensation Scheme, including the Exclusions List.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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[www.thevernon.co.uk/35-day-charity-account](http://www.thevernon.co.uk/35-day-charity-account) FSCS Depositor Protection Information & Exclusions Sheet

## Section 11: Contact Preferences

Please record the contact preferences for all Appointed Officers & / OR Account Signatories below:

Officer/Sig 1		Officer/Sig 2		Officer/Sig 3		Officer/Sig 4		Officer/Sig 5		Officer/Sig 6	
Post	<input type="checkbox"/>	Post	<input type="checkbox"/>	Post	<input type="checkbox"/>	Post	<input type="checkbox"/>	Post	<input type="checkbox"/>	Post	<input type="checkbox"/>
Email	<input type="checkbox"/>	Email	<input type="checkbox"/>	Email	<input type="checkbox"/>	Email	<input type="checkbox"/>	Email	<input type="checkbox"/>	Email	<input type="checkbox"/>
Telephone	<input type="checkbox"/>	Telephone	<input type="checkbox"/>	Telephone	<input type="checkbox"/>	Telephone	<input type="checkbox"/>	Telephone	<input type="checkbox"/>	Telephone	<input type="checkbox"/>

You can change your contact preferences at any time by writing to: Investment Administration, Vernon Building Society, 19 St. Petersgate, Stockport, SK1 1HF or telephoning the Society on 0161 429 6262

## Section 12: Account Documentation

I / We the Appointed Officers & / or Account Signatories enclose the following documents along with this application form to open the account :

- One form of identification for ALL Appointed Officers (Chair, Treasurer & Secretary)
- Once form of identification for ALL Appointed Signatories if not an Appointed Officer
- Bank statement in the name & address of the Registered Charity
- A copy of the minutes of the meeting where approval to open the Registered Charities Account was given, signed by the Secretary
- A copy of the Charity Commission's registration

The Society will complete a Charity Commission for England & Wales, Scottish Charities Registers & Charity Commission for Northern Ireland search.