

# Corporate application form

Please complete in BLOCK CAPITALS and black ink. If you need help to complete this form, please call us on 0800 289 936 (Freephone UK only) or +44 (0) 1624 645000

## Which Fairbairn Private Bank office do you wish to apply for an account with:

Isle of Man     Jersey     London

## Which Fairbairn Private Bank corporate account do you wish to apply for:

Reserve account  
NB: The minimum balance to be maintained: £5,000 / US\$7,500 / €7,500.

Focus account  
NB: The minimum balance to be maintained in cash and/or investments is £50,000 / US\$75,000 / €75,000, of which at least £5,000 (or currency equivalent) must be in cash.

## 1. About you ( the Accountholder )

Full name of account

Please open the account for the following: (please tick as appropriate)

limited company\*     limited partnership  
 other (please specify)

\*Please note that we are unable to open an account for limited companies who have issued or intend to issue bearer shares.

Nature of company's business

Date of incorporation

Country of incorporation

VAT registered number

Contact name

Registered office address

Post code

Business address (if different)

Post code

Business telephone number

Fax number

Email address

## Do not write here – Bank use only

Account number  Source code

## 2. Services required

Please tick appropriate boxes to indicate the services that you may require immediately. You may at any time advise us that you wish to utilise other services.

### Currency of interest bearing current account:

Currency required (tick all applicable) sterling  US dollars  euro   
other (specify)

Do you require a cheque book? (available in sterling only) Yes  No

### Fixed term deposit accounts:

Currency required sterling  US dollars  euro

Deposit amount

Minimum deposit: £50,000 / US\$75,000 / €75,000

Term of deposit 1 month  3 months  6 months  1 year

Other currencies may be available by arrangement.

### Focus accounts only:

#### Currency in which your Focus account will be reported and valued:

(tick one box only) sterling  US dollars  euro   
other (specify)

Unless you request otherwise, investment income and proceeds from the sale of investments will remain in the currency it is received.

### Borrowing facility

Borrowing secured against investments. Subject to status and approval.

### Focus wealth management

If you have been introduced to us through a financial adviser, please contact them for information on the Focus wealth management services available.

If you are a direct client and wish to utilise the Focus wealth management services, please complete this application in conjunction with the financial profiler / investment profile, as applicable. **Please note, this is not required for the execution only service.**

If you do not have a copy of the profiler, please tick the box.

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## 3. Reason for opening your account

Please state reason for requiring an account.

  

If opening an account outside your country of incorporation, please indicate why you require an offshore account.

  

Please state what the account will be used for: (please tick relevant boxes)

saving  day to day administration (not trading accounts)  
 other (please give details)

## 4. Source of funds

**Deposit amount**

Please state the source of initial funds (ie, generated from what transaction or business) used for the opening of this account.

  
  

Likely source of ongoing funds into the account:

sales  rent  investment proceeds  investment income  
 other (please specify)

How much do you expect to pay into the account per year? £

## 5. About Fairbairn Private Bank

To assist us in our market research, would you please indicate where/how you first heard of us.

Advertising (please indicate newspaper/magazine/poster location/website)   
 Internet search (eg, Google)  Radio advert  
 Reflections client newsletter  Sponsorship  
 Fairbairn Private Bank office  Hold another account with the group  
 Recommendation (please specify)   
 Introducer (please give introducer's details)   
 Other, please specify

## 5. About Fairbairn Private Bank (continued...)

### Data Protection

The information requested on this form may be used by us to assist us in providing the service you are applying for, to confirm, update and enhance our records, and to assess your credit rating and establish your identity.

This information may also be used to advise you of other products and services and additional benefits which may be of interest to you. If you wish to receive newsletters and information about our products and services please tick box.

Please note that if you do not tick the box we will not be able to tell you about additional benefits available to you.

If you wish to receive newsletters and information about other group companies' products and services please tick box.

Under the terms of the data protection legislation you are entitled to a copy of your personal data held by us on payment of a fee.

## 6. Authorisation

Do you wish us to divulge information to an intermediary? (please tick)

Yes  No

Do you wish us to send copy statements of your account to an intermediary? (please tick)

Yes  No

Do you wish to have your account details made available to an intermediary via the internet? (please tick)

If Yes, an internet application form may be sent to the intermediary.

Yes  No

If you have answered "Yes" to any of the above, please give details of the intermediary.

Name   
Address   
 Post code   
Telephone number

## 7. Security password option

Do you wish the authorised signatories to give instructions by telephone? (Please indicate)

Yes  No

By indicating "Yes" and signing section 15, we may accept your security password as specified as authorisation for enquiries, investment transaction instructions, foreign exchange instructions via the telephone.

My/our chosen password is:

(Telephone instructions and requests for information will only be accepted if we can adequately identify the caller as the Accountholder.)

If you wish to make any payment instructions by telephone we require the full bank account details in advance. Please complete the details overleaf and let us know should you require more special withdrawal mandate forms.

(continued overleaf)



# Corporate application form

## 11. Internet access to view your account

If you wish to apply for internet access to view your account, please complete this section.

Internet access can only be provided upon receipt of a valid email address. Please ensure that you have provided this in section 1 and note that notifications will be sent to the email address stated in section 1 only.

### Security information

The following information is required to ensure that only you can access your account.

#### First named individual

Name of person to be granted internet access

1 Memorable name

(BLOCK CAPITALS or spaces only, no more than 15 characters, minimum of 3)

2 Memorable date

((DDMMYYYY) eg, 08SEP2004, no spaces)

3 Mother's maiden name

(BLOCK CAPITALS or spaces only, no more than 15 characters, minimum of 3)

4 Favourite place

(BLOCK CAPITALS or spaces only, no more than 15 characters, minimum of 3)

NB: You will be asked for any two of the above four fields each time you log on.

**If more than two individuals require online access to the account, please request additional forms.**

By completing this information, you hereby request us to provide access to your Fairbairn Private Bank corporate account. You agree that your signature(s) to this application shall be your acknowledgement that:

- (i) You have received a copy of the relevant Fairbairn Private Bank Terms and Conditions and agree to be bound by them;
- (ii) You have read the disclaimer page attached to the website [www.fairbairnpb.com](http://www.fairbairnpb.com), and agree to be bound by its contents;
- (iii) The website displays all historical transactions, therefore you accept that you will not receive:
  - a) Any credit and foreign exchange advices or deposit confirmations
  - b) Bank statements, Visa statements or contract notes.All historical transactions can be printed off from the online service. Printed copies of any of the above documents are available upon request at the cost of £5 per sheet;
- (iv) (Focus Accountholders only) You are entitled to receive regular valuations under UK, Isle of Man and Jersey rules and regulations, however, by ticking this box  you instruct us to cease sending these until further notice;

**and**

- (v) You agree never to write down the password or disclose it to anyone. If you suspect that anyone else may know this password, you will contact us immediately.

#### Second named individual

Name of person to be granted internet access

1 Memorable name

(BLOCK CAPITALS or spaces only, no more than 15 characters, minimum of 3)

2 Memorable date

((DDMMYYYY) eg, 08SEP2004, no spaces)

3 Mother's maiden name

(BLOCK CAPITALS or spaces only, no more than 15 characters, minimum of 3)

4 Favourite place

(BLOCK CAPITALS or spaces only, no more than 15 characters, minimum of 3)

**Please note: you are advised to check your account(s) online monthly and inform us immediately if any discrepancies are found.**

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## 12. Declaration

To be made by those duly authorised by the board of directors (in the case of limited companies). You wish to open an account with us in accordance with the published Terms and Conditions which you acknowledge having received and to which you agree to be bound. You authorise us to make enquiries and take up references as we consider appropriate in connection with this application form and this authorisation is to remain effective until we receive written notification to the contrary. You understand that we do not accept any liability whatsoever in respect of any losses which you may suffer as a result of any fraud or negligent misuse of the banking services including telephone banking unless such loss occurs as a result of fraud or gross negligence on the part of us or our employees or agents.

If corporate director, name of company

and please complete details of ALL directors/authorised signatories below (attach an additional sheet if necessary):

Name

Previous name(s)  Gender   
(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Capacity/position

Personal address   
 Post code

Signature  Date   
(day/month/year)

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:  
  
 Post code

Name

Previous name(s)  Gender   
(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Capacity/position

Personal address   
 Post code

Signature  Date   
(day/month/year)

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

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(day/month/year)

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:  
  
 Post code

Name

Previous name(s)  Gender   
(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Capacity/position

Personal address   
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Signature  Date   
(day/month/year)

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:  
  
 Post code

# Corporate application form

## 13. Statement of beneficial owner(s)

Please complete details of the beneficial owner(s) of the company below. If shareholder(s) is a corporate entity/nominee etc, please provide name of entity  and provide details of ultimate beneficial owner(s) below. If applicable, please provide a structure chart.

### Beneficial owner 1

Name

Previous name(s)  Gender   
(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Occupation

Please provide background details of your accumulated wealth: (please tick relevant boxes)

Category	Amount	Description/original source of funding
<input type="checkbox"/> Inheritance	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of property	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Profits made from sale of stocks/shares	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Savings	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of own business	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>	<input type="text"/>

If you have completed section 12, please proceed to section 14

Personal address   
 Post code

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:

Post code

### Beneficial owner 2

Name

Previous name(s)  Gender   
(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Occupation

Please provide background details of your accumulated wealth: (please tick relevant boxes)

Category	Amount	Description/original source of funding
<input type="checkbox"/> Inheritance	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of property	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Profits made from sale of stocks/shares	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Savings	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of own business	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>	<input type="text"/>

If you have completed section 12, please proceed to section 14

Personal address   
 Post code

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:

Post code

# Corporate application form

## 13. Statement of beneficial owner(s) continued

Please complete details of the beneficial owner(s) of the company below (attach an additional sheet if necessary):

### Beneficial owner 3

Name

Previous name(s)  Gender

(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Occupation

Please provide background details of your accumulated wealth: (please tick relevant boxes)

Category	Amount	Description/original source of funding
<input type="checkbox"/> Inheritance	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of property	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Profits made from sale of stocks/shares	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Savings	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of own business	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>	<input type="text"/>

If you have completed section 12, please proceed to section 14

Personal address

Post code

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:

Post code

### Beneficial owner 4

Name

Previous name(s)  Gender

(ie, maiden name, former married name(s) or if you have changed your name by deed poll)

Occupation

Please provide background details of your accumulated wealth: (please tick relevant boxes)

Category	Amount	Description/original source of funding
<input type="checkbox"/> Inheritance	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of property	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Profits made from sale of stocks/shares	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Savings	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sale of own business	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>	<input type="text"/>

If you have completed section 12, please proceed to section 14

Personal address

Post code

Nationality  Date of birth

Place of birth  Domicile

Period at present address years  months

If less than three years, please state previous addresses for that period:

Post code

# Corporate application form

## 14. Your checklist

- All relevant sections of the application form completed.
- Documentation as stated in section 10.

**IMPORTANT – It is essential that the above items are enclosed in order for your application to be accepted. Your account will only be operational upon completion of our account opening formalities.**

Please note that additional information and/or further mandates may be required. When you have completed this form simply post it to:

<b>Fairbairn Private Bank (IOM) Ltd</b> or <b>Fairbairn Private Bank Ltd</b> or <b>Fairbairn Private Bank</b>
<b>St Mary's Court 20 Hill Street</b> <b>Fairbairn House 31 The Esplanade</b> <b>Old Mutual Place</b>
<b>Douglas Isle of Man</b> <b>St Helier Jersey</b> <b>2 Lambeth Hill</b>
<b>British Isles IM1 1EU</b> <b>Channel Islands JE1 1FB</b> <b>London EC4V 4GG</b>

**NB: We will require the original completed and signed copy of this application form to finalise account opening formalities.**

## 15. Company mandate

You hereby certify that at a Meeting of the Directors of

("the company")

held at  on the day of

**It was resolved:**

**1. THAT an account be opened with us and that we are authorised and requested to pay or honour all cheques, drafts, or other orders or receipts for money purporting to be drawn or signed on behalf of the company, and to debit the same to such account, whether such account be in credit or otherwise, provided that such cheques, drafts, orders or receipts are signed by (insert "any two Directors" or "a Director and the Secretary" or as otherwise resolved)**

**2. THAT we are authorised to treat all cheques, drafts, orders or receipts as having been duly endorsed or signed on behalf of the company and discount or otherwise deal with them provided that such endorsements purport to be signed by (insert "any two Directors" or "a Director and the Secretary" or as otherwise resolved)**

**3. THAT we are hereby authorised to honour and comply with all instructions to deliver or dispose of any securities or documents or property held by us on behalf of the company, provided such instructions are signed by (insert "any two Directors" or "a Director and the Secretary" or as otherwise resolved)**

**4. THAT (insert "any two Directors" or "a Director and the Secretary" or as otherwise resolved)**

are hereby authorised on behalf of the company:

**4.1 to borrow money and to obtain credit for the company from us on any terms and to make and deliver notes, drafts, acceptances, instruments of guarantee, agreements and any other obligations of the company therefore in a form satisfactory to us;**

**4.2 to grant security interests in and/or pledge or assign and deliver, as security for money borrowed or credit obtained, stocks, bonds, instruments, bills receivable, accounts, mortgages, merchandise, bills-of-lading, warehouse receipts and other documents, insurance policies, certificates, and any other property now or hereafter held by or belonging to the company, with full authority to endorse, assign or guarantee any of the same in the name of the company;**

- 4.3 to discount any bills receivable or any paper held by the company with full authority to endorse the same in the name of the company;**
- 4.4 to withdraw from us and give receipt for, or to authorise us to deliver to the bearer or to one or more designated persons, all or any documents and securities or other property held by it, whether held as collateral security or for safekeeping or for any other purpose;**
- 4.5 to authorise and request us to purchase or sell for account of the company stocks, bonds and other securities;**
- 4.6 to execute and deliver all security and other agreements, financing statements and other papers required by us in connection with any of the foregoing matters and affix thereto the seal of the company; and**
- 4.7 to authorise the company's bankers to respond to client identification documentation provided by us by the execution and delivery to us of our standard customer identification authority and other papers required by us in connection with the company's identification.**
- 5. THAT a list of the names and specimen signatures of the persons at present authorised to sign under these resolutions be furnished to us in a form satisfactory to us and that we be advised in writing of all changes which may take place in the same from time to time; and**
- 6. THAT a certified true copy of the company's certificate of incorporation be furnished to us, and copies of the latest accounts and reports of the company where available. For partnerships, that a certified true copy of the partnership agreement be furnished to us.**

You agree that your signatures to this corporate account application shall be your acknowledgement that you have received a copy of our Terms and Conditions and that the Terms and Conditions as amended from time to time shall form an agreement between you and us as if incorporated herein.

**Focus Accountholders only: (For UK Office Accountholders only)** You acknowledge that we are required by the UK Financial Service Authority ('FSA') Rules to classify clients into one of three categories. The regulatory classification given to a client determines the UK regulatory requirements that will apply to us when providing services to clients from 1 November 2007. You acknowledge that pursuant to the FSA Rules and based on the information that we hold, we have classified you as a 'retail client' and that you will be treated as such in respect of all business we conduct with you. You acknowledge that you have the right to request classification as a 'professional' or 'eligible counterparty' client, subject to meeting the required criteria, but that this will result in you having a decreased level of client protections.

**Focus Accountholders only: (For UK Office Accountholders only)** 'Order Execution' acknowledgement: You acknowledge that you have received a copy of our 'Order Execution Policy' and agree to be bound by it.

You hereby certify that the signatory(ies) whose specimen signature(s) appear in Section 12 are duly authorised to sign on behalf of the company in accordance with the terms of this corporate account application:

Chairman (to sign)

Secretary (to sign)

Date

Any changes to the above will be notified to you immediately.

The terms of this Account Application form shall be governed by and construed in accordance with the laws of the Isle of Man, Jersey or England (as applicable).

Fairbairn Private Bank is a registered trade name of Fairbairn Private Bank (IOM) Limited and Fairbairn Private Bank Limited. The parent of Fairbairn Private Bank is Nedbank Group Limited, which is incorporated in South Africa and is regulated by the South African Reserve Bank. The ultimate parent of Fairbairn Private Bank is Old Mutual plc, which is incorporated in England and Wales. Fairbairn Private Bank places limited funds with other parts of its group and thus its financial standing is linked to, albeit not wholly dependent upon, that of the group. Fairbairn Private Bank has its own independent credit rating from the international credit rating agency, Moody's. Depositors may wish to form their own view of the financial standing of Fairbairn Private Bank and the group based on publicly available information. The latest report and accounts and details of the credit rating are available at [www.fairbairnbp.com](http://www.fairbairnbp.com)

Fairbairn Private Bank (IOM) Limited is licensed by the Isle of Man Financial Supervision Commission. The London office is authorised and regulated in the UK by the Financial Services Authority.

UAE representative office in Dubai licensed by Central Bank of the UAE Licence No. 13/1006/2011.

Fairbairn Private Bank Limited is regulated by the Jersey Financial Services Commission. Latest audited accounts are available on request. Authorised and regulated in the UK by the Financial Services Authority in respect of regulated mortgage contracts only.

UK Financial Services Authority registration numbers:

Fairbairn Private Bank (IOM) Limited 313189

Fairbairn Private Bank Limited 313187

South African representative office established in terms of Section 34 of the Banks Act 94 of 1990.

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