

# Focus account personal 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

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") – First applicant

Title (eg, Mr/Mrs/Miss/Ms/Other)  Gender

Forename(s)

Surname

Previous name(s)

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

Marital status      married       single       divorced/separated       widow(er)

Relationship between applicants

Number of dependents

Existing Fairbairn Private Bank account number (if any)

Telephone (home)  Mobile number

Email address

Nationality  Date of birth

Place of birth  Domicile

Country of residence for taxation purposes

National insurance number

Tax identification number

(Allocated by country of residence for taxation purposes)

**Isle of Man/Jersey office Accountholders only:** If your country of residence for taxation purposes is an EU Member State, please elect one of the following options:

Retention tax (withholding tax)

Exemption

If you tick this box, you will need to complete and return exemption declaration – form B

Exchange of information

**Important: Under the exchange of information option, you will continue to receive gross interest and we will pass certain information about you and your interest to the tax authorities.** They may subsequently compare this information with the figures included in your tax returns. By ticking this box you authorise us to disclose the required information on your account(s).

Please note: Unless you have ticked a box for exemption (and completed and returned a form B) or exchange of information, retention tax (withholding tax) will automatically be deducted from credit interest applied to your account(s).

## Do not write here – Bank use only

Account number  Source code

## Second applicant (only needs completing throughout if you require a joint account)

Title (eg, Mr/Mrs/Miss/Ms/Other)  Gender

Forename(s)

Surname

Previous name(s)

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

Marital status      married       single       divorced/separated       widow(er)

Relationship between applicants

Number of dependents

Existing Fairbairn Private Bank account number (if any)

Telephone (home)  Mobile number

Email address

Nationality  Date of birth

Place of birth  Domicile

Country of residence for taxation purposes

National insurance number

Tax identification number

(Allocated by country of residence for taxation purposes)

**Isle of Man/Jersey office Accountholders only:** If your country of residence for taxation purposes is an EU Member State, please elect one of the following options:

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## 2. About where you live – First applicant

Residential address

Post code

Do you own the property? Yes  No  Period at present address (in years)

If less than 3 years, please state previous addresses for that period

Post code

Address for correspondence (if different from above)

Post code

## 3. About what you do – first applicant

Are you? (please tick one):

employed  self-employed  retired (please answer all following questions for your former occupation)

Occupation

Name of employer/your business

Address of employer/your business

Post code

Business telephone number

Nature of business

Position held

How long have you been (or were you) in your current/former occupation? years  months

**If in current occupation or have been self-employed for less than 3 years, please give previous employment details:**

Name of employer/your business

Address of employer/your business

Post code

How long were you in your previous occupation? years  months

## Second applicant

Residential address

Post code

Do you own the property? Yes  No  Period at present address (in years)

If less than 3 years, please state previous addresses for that period

Post code

Address for correspondence (if different from above)

Post code

## Second applicant

Are you? (please tick one):

employed  self-employed  retired (please answer all following questions for your former occupation)

Occupation

Name of employer/your business

Address of employer/your business

Post code

Business telephone number

Nature of business

Position held

How long have you been (or were you) in your current/former occupation? years  months

**If in current occupation or have been self-employed for less than 3 years, please give previous employment details:**

Name of employer/your business

Address of employer/your business

Post code

How long were you in your previous occupation? years  months

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## 4. About your finances – first applicant

### Your income:

Gross annual salary/pension (£)  per annum  
 Other income\* (£)  per annum  
 \*Please specify source

### Your investments:

Value of investments held:

equities	£ <input type="text"/>	bonds	£ <input type="text"/>
mutual funds	£ <input type="text"/>	cash deposits, etc	£ <input type="text"/>
property portfolio	£ <input type="text"/>	other investments	£ <input type="text"/>

How are your investments held?    in own name     custodian

Name of custodian/nominee

Name of current bank

Period of time account held

## Second applicant

### Your income:

Gross annual salary/pension (£)  per annum  
 Other income\* (£)  per annum  
 \*Please specify source

### Your investments:

Value of investments held:

equities	£ <input type="text"/>	bonds	£ <input type="text"/>
mutual funds	£ <input type="text"/>	cash deposits, etc	£ <input type="text"/>
property portfolio	£ <input type="text"/>	other investments	£ <input type="text"/>

How are your investments held?    in own name     custodian

Name of custodian/nominee

Name of current bank

Period of time account held

## 5. Gold status Visa card services

Please complete this section if you require a gold status Visa card.

### Currency in which your gold status Visa card will be issued and settled:

Tick one box only:    sterling\*     US dollars     euro

\* incorporates a £250 cheque guarantee facility

The following information is required to ensure that you can be correctly identified when contacting us. Please answer the following in BLOCK CAPITALS or spaces only, providing a one word answer where possible.

### First applicant

1 Favourite subject at school

2 First name of your closest friend

3 Favourite holiday

The balance of your gold status Visa card statement and / or cash transactions generated by use of your gold status Visa card are to be debited from your Focus account.

**NB: A gold status Visa card can only be issued on accounts with 'anyone to sign' arrangement.**

### Second applicant

1 Favourite subject at school

2 First name of your closest friend

3 Favourite holiday

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## 6. Services required

Please tick appropriate boxes to indicate the services that you require immediately. Focus consists of a wide range of individual services.

You may at any time advise us that you wish to utilise other services.

### Focus account

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

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

#### Currency of interest bearing current account:

(tick all applicable) sterling  US dollars  euro   
 other (specify)  \_\_\_\_\_

\*Accumulation account (please refer to product literature for further details) Yes  No

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

Do you require segregation of income received? Yes  No

Do you require your investment income and the proceeds from the sale of investment to remain in the reporting currency or in the currency it is received? reporting currency  currency received

#### 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.

\*High interest accumulation account (minimum balance £50,000 cash) Yes  No

#### Third party authorisation

Authority for a third party to operate the account. Please tick box to receive a mandate.

#### Borrowing facility

Borrowing secured against investments. Subject to status and approval. Minimum age 18.

#### 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.

\* Available only for Isle of Man and Jersey office Accountholders. For an accumulation account you will not receive any interest earned on the account until you instruct that you wish the account to close (the account will earn interest only while the minimum balance is maintained).

## 7. Reason for opening your account

Please state reason for requiring an account.

If opening an account outside your country of residence, 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 living expenses  
 other (please give details) \_\_\_\_\_

## 8. Source of funds

Deposit amount \_\_\_\_\_

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

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:

salary/pension  bonus  investment proceeds  
 other (please specify) \_\_\_\_\_

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

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

Category	Amount	Details/Original source of funds
<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"/> 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"/>



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## 12. Mandate to comply with withdrawal instructions given by facsimile

Important: You should take legal advice before indicating "Yes". Do not complete this section unless you want to be legally bound.

Do you wish us to accept withdrawals by facsimile? Yes  No

- By indicating "Yes" and signing section 15, we are hereby authorised to comply with all instructions given by facsimile, provided that instructions are signed in accordance with the current mandate to operate the above account. We may act upon such instructions without the need for further enquiry.
- In consideration of your agreeing to allow the arrangements described in paragraph 1 above, you hereby:
  - agree that you are stopped from pleading or maintaining as against us that any instructions issued to us in accordance with the arrangements described in paragraph 1 above have been issued without your authority;
  - indemnify us and agree to keep us indemnified from and against all losses, claims, expenses and liabilities whatsoever which we may sustain or incur or become responsible for in any way as a result of us agreeing to allow the arrangements described in paragraph 1 above; and
- This mandate and indemnity is governed by the laws of the Isle of Man, Jersey or England (as applicable).

## 13. Mandate to comply with withdrawal instructions given by email

Important: You should take legal advice before indicating "Yes". Do not complete this section unless you want to be legally bound.

Do you wish us to accept withdrawals by email? Yes  No

- By indicating "Yes" and signing section 15, we are hereby authorised to comply with all instructions within a PDF document given by email, provided that instructions are sent from the email address specified in section 1 and are signed in accordance with the current mandate to operate the above account. We may act upon such instructions without the need for further enquiry.
- In consideration of your agreeing to allow the arrangements described in paragraph 1 above, you hereby:
  - agree that you are stopped from pleading or maintaining against us that any instructions issued to us in accordance with the arrangements described in paragraph 1 above have been issued without your authority;
  - indemnify us and agree to keep us indemnified from and against all losses, claims, expenses and liabilities whatsoever which we may sustain or incur or become responsible for in any way as a result of us agreeing to allow the arrangements described in paragraph 1; and
- This mandate and indemnity is governed by the laws of the Isle of Man, Jersey or England (as applicable).

### Do not write here – Bank use only

Application accepted and agreement signed on behalf of  
Fairbairn Private Bank.

Spending limit

£

Date

Authorised signature

## 14. 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 of the first applicant only.

### Security information

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

### First applicant

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 2 parties to the account require online access, please request additional forms.**

### Second applicant

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)

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## 14. Internet access to view your account (continued...)

By completing the information on the previous page, you hereby request us to provide access to your Focus account. You agree that your signature(s) to this application shall be your acknowledgement that:

- (i) You have received a copy of the relevant Focus account Terms and Conditions and agree to be bound by them;
- (ii) You have read the disclaimer page attached to the website [www.fairbairnfb.com](http://www.fairbairnfb.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 £5.00 per sheet;
- (iv) 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.

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

## 15. Your signatures

**Please read the following statements and sign in the space provided:**

You confirm that the information given is true and complete.  
You are (both) aged 18 or over.

You hereby request us to open an account in your name(s) and until we receive written notice to the contrary from you, you authorise us:

1. to pay and debit your account(s) for the time being opened with us in your name(s) all cheques or others, instructions or receipts for money signed by you notwithstanding that such payments may cause the account(s) to be overdrawn or increase an existing overdraft;
2. to accept remittances for the credit of your account(s) tendered to us in your name or in the name of any one of you; and
3. to deliver up anything held by us by way of security, safe custody, collection or any other purpose whatsoever on your account(s) against the written receipt or instruction of you.

## 15. Your signatures (continued...)

You agree that your signature(s) to this individual application shall be your acknowledgement that:

1. You have received a copy of the Focus account Terms and Conditions and agree to be bound by them;
2. the Terms and Conditions as amended from time to time shall form an agreement between you and us as if incorporated herein. Any changes to the above will be advised to you immediately;
3. **(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;
4. **(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;
5. You authorise us to obtain independent verification of any data provided by you; and
6. You authorise us to disclose the information contained in this form in the circumstances provided in the Terms and Conditions.

### Joint accounts only

Where this mandate is signed by more than one person you acknowledge that:

1. **We shall only act in accordance with notices, instructions, receipts, requests and instruments executed by any one of you;**
2. the liability of each such person (whether or not a signatory to the account(s)) shall be joint and several;
3. We shall on the death of any one of you hold to the order of the survivor(s) of you any money for the time being standing to the credit of your account(s) and any other asset whatsoever held by it on your behalf; and
4. You hereby waive your statutory right to receive two separate statements of account and request that statements be sent to the first named applicant.

**Sign below only if you want to be legally bound by the Terms and Conditions of this account.**

Signature of first applicant

Date of signature

Signature of second applicant

Date of signature

**This individual account application form shall be governed by and construed in accordance with the laws of the Isle of Man, Jersey or England (as applicable).**

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## 16. Documentation required

### IMPORTANT – Documents required for all accounts

We are required to confirm the identity and address of all clients opening bank accounts. We need the following documents which will be treated as confidential and originals will be returned to you.

A **copy** of your passport(s), or a **copy** of your driving licence(s)\* or a **copy** of any other government issued ID document bearing your photograph and signature **certified** by an independent solicitor, accountant, notary public, British Embassy official or an officer of an authorised credit or financial institution (as stated below);

### AND

An **original** utilities bill or bank statement, not more than 3 months old, showing name and residential address (a **certified copy** is acceptable if completed as stated below).

### To certify a document:

The certifier must state on the copy documents the following:

“I certify that this is a true copy of the original document”

and where the document includes a photograph the certifier must continue to state

“and that the photograph is a true likeness.

The certifier should sign and date the documents, print his/her name and contact details clearly in capitals underneath and indicate his/her position or capacity on it, and affix a stamp of the institution to authenticate the certification.

**If you do not possess a passport, driving licence or government issued ID card please contact us.**

\* Only UK, Jersey, Guernsey or Isle of Man driving licences can be accepted.

## 17. Your checklist

- All relevant sections of the application form completed.
- Isle of Man/Jersey office Accountholders only:** If you are resident in an EU Member State, and believe that you are exempt from the EUSD, you must include a completed exemption declaration – form B.
- Documentation as stated in section 16.

**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 or</b>	<b>Fairbairn Private Bank Ltd or</b>	<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.**

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.fairbairnfb.com](http://www.fairbairnfb.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.

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 Bank's Act 94 of 1990.