

Gibraltar Savings Bank Registered Debentures Purchase Form - Individual(s)



All new applicants must complete a separate <u>Client Information Form</u>

	1. Details of Applicant(s)	1					
	(Please tick the appropriate box)	11.	Jointly Held in two or more names in an:				
	Individual (Held in one name only)	UK		'And / Or' basis			
1	Forename(s) Surn	name(s)]	Date of Birth			
	Address						
2	Forename(s) Surn	name(s)	1	Date of Birth			
	Address						
3	Forename(s) Surn	name(s)]	Date of Birth			
	Address						
.4	Forename(s) Surn	name(s)]	Date of Birth			
	Address						
		Please tick bo	x if another form is required	to add more Account Holders			
	2. Primary Contact Details						
	Please note that these details will be the point of contact for this Investment Account.						
	Correspondence Address:						
	Email:	Contact No	Contact No.:				
	3. Interest Payment Instructions						
	Bank	Sort Code	Accou	ant Number			
	Reference (If applicable) Account Name						
	Please tick the appropriate box: Existing Payment In	struction	New Payment Instr (Proof is required, e	uction .g. Bank Statements)			
	4. Investment Options						
	Investment		Interest rates per annum	Amount			
	10-Year Fixed Term Pensioner Monthly Incom (conditions of eligibility apply, see below) ***	ne Debentures	Fixed @ 5%				

Total Value £

^{*}Where debentures are held jointly in an 'and' basis all debenture holders will be required to sign for all transactions in relation to the debentures.

^{**}The GIBRALTAR SAVINGS BANK (GSB) will consider itself discharged of its liabilities if any monies are paid to any one of the account holders, where debentures are held jointly in an 'and/or' basis (only one signature is required).

^{***}The interpretation of a pensioner for this purpose means a resident individual aged 60 years or over, or who has retired and is in receipt of a pension or a person who has received a lump sum payment in lieu of a pension.

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5. Method of Payment								
	Io. Sort Code	Account Number	Account Name					
£	lo. Soft Code	Account Number	Account Name					
· ·	2 . 2 1							
Bank Transfer	Sort Code	Account Number	Account Name					
£								
Debit Card Last 4 digits	Sort Code	Account Number	Account Name					
£								
Ordinary Deposit		Account Number	Account Name					
£								
£								
Total Investment								
	Please specify)							
o. Source of investment (Trease specify)								
Please note that you may be asked to supply documentary evidence to verify the source of funds. Such evidence will be required, in any case, where the investment, or series of investments, is greater than £10,000. (e.g. Personal Savings, Property Sales, Gratuity, etc)								
7. Client Consent (If applicable)								
I/we hereby confirm that the GSB has informed us that we may provide redacted bank statements. I/we								
however confirm that I/we have willingly provided the Gibraltar Savings Bank with full unredacted bank statements.								
		P	lease initial here X					
8. Applicant Signatures								
I/We accept the terms and conditions of investment as specified in the Prospectus and General Conditions. I/we authorise our ordinary deposit account to be debited with the inbestment value (if applicable)								
Signature		Signature						
Date:		Date:						
Signature		Signature						
		Data						
Date:		Date:						
9. Data Protection – How v	ve use your Information							
•	•	others as private and confiden						
privacy and understand the importance of protecting the personal information that we hold. See our privacy notice								
for full details – available at www.gsb.gov.gi or by calling us.								
For Office Use Only								
Applicant 1	Applicant 2	Ap	plicant 3					
IDS Client No.	IDS Client No	D. IDS	S Client No.					
Pensioner Status Verified:	Pensioner Stat	tus Verified: Per	nsioner Status Verified:					
Receipt / JV No.								
	Date of Purch	YYYY						
D 11								
Processed by:	Verified by:	Da	te:					