R	Gibraltar Savings Bank Economic Development Registered Debentures Application Form - Organisat
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Economic Development Registered Debentures Application Form - Organisations
We accept the terms and conditions of investment as specified in the Prospectus and General Conditions and hereby
apply to purchase the following Gibraltar Savings Bank Registered Debentures/Bonds:

1. Details of the Organisation Organisation Name:

Nature of Business:

Address:

Email:

Telephone:

Should the organisation own any Registered Debenture/Bonds please enter Account No.

	2. Details of the authoris	ed signatories			
A.1	Forename(s)	Surname(s)	Date of Birth	Status/Rank	Telephone:
	ID or Passport Number	Address:		Email:	
 A.2	Forename(s)	Surname(s)	Date of Birth	 Status/Rank	Telephone:
	ID or Passport Number	Address:		Email:	

Please specify the number of signatures required to authorise any transaction. A minimum of two signatures are required.

Please tick box if another form is required to add more authorised signatories

	3. Details of the benefici	al owners, directors &/o	r shareholders, p	ension sche	me
A.1	Forename(s)	Surname(s)	Date of Birth	*Capacity	
	ID or Passport Number	Address:			Email:
A.2	Forename(s)	Surname(s)	Date of Birth	*Capacity	Telephone:
	ID or Passport Number	Address:			Email:
	Please tick box if another form is 1 *Capacity within the organisation	•		areholders	
	4. Maturity Instructions	- Ordinary Deposit Acce	ount Details		
	Account Number Reference (If applicable)	Account Name			
		Please tick the appro	opriate box: Exi	sting Account	New Account
	5. Interest Payment Inst	ructions			
	Bank		Sort Code		Account Number
	Reference (If applicable)	Account Name			

Reference (If applicable)

Minimum investment £1,000

Investment	Rate	Amount
1-Year Economic Development Fixed Term Registered Debentures June 2026	4%	
5-Year Economic Development Fixed Term Registered Debentures June 2030	5%	
Total V		

7. Method of Payment

Cheque £	Cheque No.	Sort Code	Account Number	Account Name
Bank Transfer £		Sort Code	Account Number	Account Name
Debit Card £	Last 4 digits	Sort Code	Account Number	Account Name
Ordinary Depos £	it		Account Number	Account Name
2				

£

Total Investment

8. Source of Investment (*Please 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.

9. Organisation Consent (If applicable)

We hereby confirm that the GSB has informed us that we may provide redacted bank statements. We however confirm that we have willingly provided the Gibraltar Savings Bank with full unredacted bank statements.

10. Declarations and Signatures

I/We hereby confirm that I/we understand that no withdrawals are permitted on this debenture.

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 investment value (if applicable).

Signature

Signature

Date:

Please initial here X

Date:

All signatories must sign

11. Data Protection - How we use your information

We treat all the information you give us about you and others as private and confidential. We respect your right to 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		
Company No.	Receipt / JV No.	Date of Purchase:
		DD MM YYYY
Processed by:	Verified by:	Date:
		DD MM YYYY