

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

All new applicants must complete a separate Client Information Form

	1. Details of Applicant(s)							
	(Please tick the appropriate box)	1		Jointly				
	Individual	OI	R	Held in two or more nar				
	(Held in one name only)	1		** 'And' basis	*** 'And / Or' basis			
A.1	Forename(s)	Surname(s)			Date of Birth			
					DD MM YYYY			
	Address							
A 2	Forename(s)	Surname(s)			Date of Birth			
11.2	1 Orename(s)	Sumanic(s)			DD MM VVVV			
	Address				DD IVIIVI IIII			
	Tradicos							
70								
This section is ONLY to be completed for investments held on behalf of a minor								
	_				D ( CP: 1			
M.1	Minor's Forename(s)	Minor's Surn	iame(	s)	Date of Birth			
	Address							
	Address							
	Relationship to Applicant *							
			Ple	ase tick box if another form is requi	ired 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:							
	Correspondence reducess.							
	Email:		Contact No.:					
	3. Maturity Instructions - Ordinary	Deposit Account	Deta	ils				
	Account No. Account							
Account No. Account Name								
	Ple	ase tick the appropriate	e box:	Existing Account	New Account			
	4 Internal December Instrumetica							
	4. Interest Payment Instructions		Sorte	code Accour	at No			
	Bank		SOFT	Accour	IL INU.			
	Reference (If applicable) Account N	Jama						
	Reference (If applicable) Account N	Name						
	Please tick the appropriate box: Existin	ng Payment Instruction		New Payment In (Proof is require	nstruction ed, e.g. Bank Statements)			
				(1700) to require	,			

<sup>\*</sup>Parent / Legal Guardian will also be required to sign the form if not applicants (see overleaf)

<sup>\*\*</sup>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.

<sup>\*\*\*</sup>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).

5. Investment Options									
Minimum investment £1,000									
	Amount								
1-Year Fixed Term									
3-Year Fixed Term									
5-Year Fixed Term									
	Total Value £								
6. Method of Paymer	nt								
<u>'</u>	eque No. Sort Code	Account Numbe	er	Account Name					
£									
Bank Transfer	Sort Code	Account Numbe	er	Account Name					
£									
Debit Card Las	t 4 digits Sort Code	Account Numbe	er	Account Name					
£									
Ordinary Deposit		Account Number	er	Account Name					
£									
£									
Total Investment									
7. 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. (e.g. Personal Savings, Property Sales, Gratuity, etc)									
8. Client Consent (I)		(eight or common migo, thought) come	, (1,11,11,11), (1,10)						
		s informed us that we may provided the Gibraltar Savings B	_						
0 Dedenstiene en 16			Please	initial here X					
9. Declarations and S		re of for the duration	of the term of t	he					
I/We hereby confirm acceptance of the rate of for the duration of the term of the Year Fixed Term Registered Debenture.									
		ment as specified in the Prospec Bank Debenture Account:	ctus and Genera	l Conditions and hereby					
Signature		Signature							
Date: DD MM YYYY Date: DD MM YYYY									
Parent or Legal Guardian Signature (if not the Applicant)									
Signature		Name:							
10. 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 Applicant 1		Applicant 2	Da	ate of Purchase:					
Pensioner Status Verified:  Processed by:  Pensioner Status Verified:  Pensioner Status Verified:  Pensioner Status Verified:  Pensioner Status Verified:  Receipt / JV No.									