## **Savings Application Form**



Personal det	ails	For Joint Accounts, applicant Representative Joint Shareh		nt Shareholder in line with our Rules and (if ago	ed 18 or over) have	voting rights. You can cho	oose who you would like the	Ė
Applicant 1				Applicant 2				
Title				Title				
First name(s)				First name(s)				
Middle name(s)				Middle name(s)				
Surname				Surname				
Previous name				Previous name				
				Relationship to applican	nt 1			
Date of birth				Date of birth				_
Address				Address				=
Postcode				Postcode				
Nationality				Nationality				
Occupation				Occupation				
National Insurance nur	nber			National Insurance num	nber			
Telephone number				Telephone number				
Mobile telephone num	ber			Mobile telephone numb	ber			
Email address				Email address				
Tax residence	v status							
Country of birth	,			Country of birth				
Are you a citizen of any	country outsi	de the UK? Ye	es No	Are you a citizen of any c	country outsid	de the UK? Y	es No	
Are you resident, for to	ıx purposes, in	any Ye	s No	Are you resident, for tax	purposes, in	any Y	es No	$\neg$
country outside the UK?				country outside the UK?				
Are you a citizen of the		Ye		Are you a citizen of the U			es No	
	, other than th	e UK, of which you	are tax resident. Please	e also provide the relevant Tax Io	dentification	Number (TIN)		
Country				Country				_
TIN				TIN				
Savings deta	ils							
What account would y	ou like to open	1?				Interest rate		%
How much will you be	depositing?	£						
Deposits made by che		payable to the acco	ount holder(s)					
Source of Funds		Salary	Internal transfer					
Source of Funds	Savings / inve							
	held els		Pension					
	Нос	use sale	Inheritance					
	G	ift/loan C	other (please specify below)					
How often will you fun	d your account	t? Weekly	Monthly	Annually	Rarely	No	further deposits	
DFFICE USE ONLY							V12. 5 Decem	ber 2025
Date Opened		First Check		Second Check	14	Sample Check		
Customer Number		Identity (PIDE List 1)			(PIDE List 2)			
Customer Number		Identity (PIDE List 1)			Identity			

Savings det	ails contin	ued					
Where did you hear		Social media		In branch			
		Friends and family	Online comp	arison sites (please specify)			
		Online search		Other (please specify)			
Proving you	r identity						
		tions and to protect our custom	ers from fraud, w	e must confirm the id	entity and ad	dress of every applicant. We a	are able to access
nly and not a credit s	core, so will not aff	, in most cases, will allow us to o ect your credit rating. If we do ms of ID with you, one form of i	need further proo	f of identification, we	will let you k	now. If you are opening an ac	count at one of our
ease visit our websit		o.uk, ask a member of our team	,	,	,	•	,
ustomers under 18. Your declar	ation						
		ou should carefully read the info	ormation and term	s contained in this ap	plication forn	n. including the declaration be	elow, and the
conditions relating to	this account befo	re signing the form. If you do no	t understand any				,
0 0 11	•	he follow declaration, I declare ation has been completed to th		rledge and belief and	I/We agree to	inform the Society of any ch	anges in my/our
		ng outside the UK, which may a he Rules of the Society, the Spe			- and the	as Society's Torms and Condition	ions for Covings
		nave received and understood;	cial Conditions fer	ating to the account c	ppeneu anu ti	ie society's Terms and Condit	ions for Savings
	•	ing my information in the mann f the Financial Services Compen	•	, ,	•		='
account;		·			•		J
_	e to the conditions and understood;	relating to the Assignment of N	Vindfalls to Charit	y as specified in the C	haritable Assi	ignments leaflet, a copy of wh	ich I have
The accou	ınt is not being hel	d by me/us as a bare trustee for	a body corporate	, or for persons who i	nclude a body	y corporate.	
Additional a	assistance						
		or assistance from the Society, ¡	olease make us aw	are of how we can he	elp:		
Keeping up	to date wi	th products and so	ervices				
•		ommunications as relevant and eep you informed when we laui			•		•
_	·	are contacted, please tick belo	_	001		,	,
Applicant 1			Applicant 2		-		
Email	Yes	No	Email	Yes	No		
Post	Yes	No	Post	Yes	No		
Telephone	Yes	No	Telephone	Yes	No		
Text message	Yes	No	Text messag	e Yes	No		
		and can change your mind at any				hetipton.co.uk to complete o	ur online form,
Your signat		<u>fo@thetipton.co.uk</u> or writing t	to 70 Owen Street	, Tipton, West Midlan	ds, DY4 8HG.		
oint Account Withdr							
We authorise the Soc	iety to accept only	the following for all purposes of	onnected with this	account:			
Any o	ne signature	All signat	ures	Any	ou	t of Signatures	
	•	Society will assume that <b>all</b> significant solutions solutions are significant solutions.	•	red. If you subsequen	tly decide to	change any signatories, a sepa	arate authority in
	_	claim regarding such withdraw		unts, each applicant m	nust sign.		
Ţ							
Applicant 1					Date		
<u> </u>							
Applicant 2					Date		
hold a Power of Atto	orney/Court of Prot	ection and sign on behalf of the	Account holder.				