

Account Opening Form CLUB / SOCIETY / TRUST / CHARITY

Union Bank of India (UK) Ltd is authorised by the Prudential Regulation Authority and Regulated by the Financial Conduct Authority and Prudential Regulation Authority

CHECK LIST FOR DOCUMENTS	IDENTITY OF TRUSTEES/SIGNATORIES:
1. Charity/Trust/Associations's Certificate of Incorporation 2. Certified Copies of Rules and Regulations/Bye-Laws 3. Complete List of Trustees/Management Committee/ Governing Body 4. Board Resolution (as provided in Annexure 1) on the Charity/Trusts/Societies Letterhead 5. Current Bank Statement (not older than 3 months and postal copy) 6. Current Address proof: Utility bill copy (not older than 3 months & postal copy) 7. Two Years Latest Audited Annual Report/Financial Statement Special Instructions: Please also enclose 1. CRS Entity Certificate 2. CRS Controlling person certificate 3. Data protection Act 2018 4. FSCS Acknowledgement Form (DGS information sheet) Forms are available on our website www.unionbankofindiauk.co.uk under Forms download section.	Valid Passport/Valid UK Photo Card Driving Licence Address of all Signatories: *A copy of recent (not older than 3 months) Bank statement or uk driving license(If not used an ID proof) or utility bill (telephone, gas, electricity, water, council tax, T.V License) with full name and address. *Online Copies, Mobile Phone Bills & Credit Card Statement are not accepted. *In addition bank may ask for proof of source of wealth.
Branch: Type of Account: Current *Term Deposit Other(s) *Period of Deposit: year(s) Amount: *Interest Pay out: Annually On Maturity	For Office Use: Cust ID: A/C No: Risk Assessment: Low Risk Medium Risk High Risk PEP
Currency of the Account :	
1 : ENTITY INFORMATION	
 Full name of the Entity Date of Incorporation 	
3. Country of Incorporation	
4. Registration Number	
5. Details of Governing body - When and How Elected	
6. Details of Activity	
7. General source of receipts/credits	

8. Subsequent name change (if any) - Full name of Entity	
9. Date of Incorporation	
10. Country of Incorporation	
11. New Registration Number	
12. Details of change in Activity and Purpose	
13. Current correspondence Address	
14. Telephone 1 :	
15. Telephone 2 :	
16. Fax Number :	
17. City:	
18. Postal Code :	
19. Registered Address (only if different to current address) :	
20. Telephone 1 :	
21. Telephone 2:	
22. Fax Number :	
23. City:	
24. Postal Code :	
25. E-mail Address :	
26. Are you or any individual connected to your business a PEP ? (Politically Exposed Person)	Yes No
2 : ACCOUNT DETAILS	
PERSONAL DETAILS-1 (Governing Body Member/Trustee/Authorised Signatory)	PERSONAL DETAILS-2 (Governing Body Member/Trustee/Authorised Signatory)
TITLE: Mr Ms Mrs Miss Other	TITLE: Mr Ms Mrs Miss Other
1. First Name	1. First Name
Middle Name Surname	2. Middle Name3. Surname
4. Address	4. Address

5. Post 0	Code		5.	Post Code	
6. Count	ry		6.	Country	
7. Phone	e Number		7.	Phone Number	
8. Email			8.	Email	
(If not resi	dent in the above current or the past three years)		9.	Previous Address (If not resident in the above current address for the past three years)	
10. Post (Code		10.	Post Code	
11. Count	ry		11.	Country	
12. Mobile	e Number		12.	Mobile Number	
13. Date of	of Birth		13.	Date of Birth	
14. Place (City/ Tow	of Birth n and Country)		14.	Place of Birth (City/ Town and Country)	
15. Nation	nality		15.	Nationality	
16. Passp	ort Number		16.	Passport Number	
17. Natior /TIN N	nal Insurance No Io		17.	National Insurance No /TIN No	
18. Position	on in the firm		18.	Position in the firm	
	ting Union Bank of UK) Ltd account r?	Yes No	19.	If existing Union Bank of India(UK) Ltd account Holder?	Yes No
If yes Accou	please specify			If yes please specify Account no	
20. US W Decla For the pu Tax Comp please co US Perso		I am not a US Person or US Citizen I am a US Person or US Citizen* (*Please ask to complete FATCA form)			I am not a US Person or US Citizen I am a US Person or US Citizen* (*Please ask to complete FATCA form)
3 : ACCC	OUNT DETAILS				
PERSONAL DETAILS-3 (Governing Body Member/Trustee/Authorised Signatory) PERSONAL DETAILS-4 (Governing Body Member/Trustee/Authorised Signatory)					
TITLE	∷ □Mr □Ms □Mrs	s		TITLE: Mr Ms Mrs	s
1. First N	lame		1.	First Name	
2. Middle	e Name		2.	Middle Name	
3. Surna	me		3.	Surname	
4. Addre	ss		4.	Address	
5. Post 0	Code		5.	Post Code	
6. Count	ry		6.	Country	
7. Phone	Number		7.	Phone Number	

8.	Email		8. Email	
9.	Previous Address (If not resident in the above current address for the past three years)		Previous Address (If not resident in the above current address for the past three years)	
10.	Post Code		10. Post Code	
11.	Country		11. Country	
12.	Mobile Number		12. Mobile Number	
13.	Date of Birth		13. Date of Birth	
14.	Place of Birth (City/ Town and Country)		14. Place of Birth (City/ Town and Country)	
15.	Nationality		15. Nationality	
16.	Passport Number		16. Passport Number	
17.	National Insurance No /TIN No		17. National Insurance No	
18.	Position in the firm		18. Position in the firm	
19.	If existing Union Bank of India(UK) Ltd account Holder?	Yes No	19. If existing Union Bank of India(UK) Ltd account Holder?	Yes No
	If yes please specify Account no		If yes please specify Account no	
20.	US Withholding Tax Declaration	I am not a US Person or US Citizen	20. US Withholding Tax Declaration	I am not a US Person or US Citizen
	For the purpose of the US Foreign Accounts Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes:	I am a US Person or US Citizen* (*Please ask to complete FATCA form)	For the purpose of the US Foreign Accounts Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes:	I am a US Person or US Citizen* (*Please ask to complete FATCA form)
4:	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify	US Citizen*	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify	US Citizen*
4:	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes:	US Citizen* (*Please ask to complete FATCA form)	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify	US Citizen* (*Please ask to complete FATCA form)
4:	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS	US Citizen* (*Please ask to complete FATCA form)	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes:	US Citizen* (*Please ask to complete FATCA form)
4:	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS EMPLOYMENT DETA	US Citizen* (*Please ask to complete FATCA form) ILS (PERSON-1)	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: EMPLOYMENT DETA	US Citizen* (*Please ask to complete FATCA form) LS (PERSON-2)
4:	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS EMPLOYMENT DETA Employed Full Time	US Citizen* (*Please ask to complete FATCA form) ILS (PERSON-1) Student	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: EMPLOYMENT DETA	US Citizen* (*Please ask to complete FATCA form) LS (PERSON-2) Student
4:	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS EMPLOYMENT DETA Employed Full Time Employed Part Time	US Citizen* (*Please ask to complete FATCA form) ILS (PERSON-1) Student Unemployed	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: EMPLOYMENT DETA Employed Full Time Employed Part Time	US Citizen* (*Please ask to complete FATCA form) LS (PERSON-2) Student Unemployed
Na Bu rei Na Bu	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS EMPLOYMENT DETA Employed Full Time Employed Part Time Self Employed	US Citizen* (*Please ask to complete FATCA form) ILS (PERSON-1) Student Unemployed Pensioner	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: EMPLOYMENT DETAI Employed Full Time Employed Part Time Self Employed	US Citizen* (*Please ask to complete FATCA form) LS (PERSON-2) Student Unemployed Pensioner
Na Bu re Na Bu Bu	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS EMPLOYMENT DETA Employed Full Time Employed Part Time Self Employed Homemaker ature of Employment/ usiness (If retired, prior to tirement) ame of Employer/ usiness Name of Employer/	US Citizen* (*Please ask to complete FATCA form) ILS (PERSON-1) Student Unemployed Pensioner	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: EMPLOYMENT DETAI Employed Full Time Employed Part Time Self Employed Homemaker Nature of Employment/ Business (If retired, prior to retirement) Name of Employer/ Business Name of Employer/	US Citizen* (*Please ask to complete FATCA form) LS (PERSON-2) Student Unemployed Pensioner
Na Bu re Na Bu Bu	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: PERSONAL DETAILS EMPLOYMENT DETA Employed Full Time Employed Part Time Self Employed Homemaker ature of Employment/ usiness (If retired, prior to tirement) ame of Employer/ usiness Name of Employer/ usiness Name of Employer/ usiness	US Citizen* (*Please ask to complete FATCA form) ILS (PERSON-1) Student Unemployed Pensioner	Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify if my situation changes: EMPLOYMENT DETA Employed Full Time Employed Part Time Self Employed Homemaker Nature of Employment/ Business (If retired, prior to retirement) Name of Employer/ Business Name of Employer/ Business Name of Employer/ Business	US Citizen* (*Please ask to complete FATCA form) LS (PERSON-2) Student Unemployed Pensioner

Time with Employer/ business (Month/Year)		Time with Employer/ business (Month/Year)		
Gross Annual Income		Gross Annual Income		
5 : PERSONAL DETAILS				
EMPLOYMENT DETA	ILS (PERSON-3)	EMPLOYMENT D	PETAILS (PERSON-4)	
Employed Full Time	Student	Employed Full Time	Student	
Employed Part Time	Unemployed	Employed Part Time	Unemployed	
Self Employed	Pensioner	Self Employed	Pensioner	
Homemaker	Other	Homemaker	Other	
Nature of Employment/ Business (If retired, prior to retirement) Name of Employer/ Business Name of Employer/ Business		Nature of Employment/ Business (If retired, prior to retirement) Name of Employer/ Business Name of Employer Business		
Address Postcode		Address Postcode		
Telephone Number		Telephone Number		
Time with Employer/ business (Month/Year)		Time with Employer/ business (Month/Year)		
Gross Annual Income		Gross Annual Income		
6 : ADDITIONAL INFORMATION REGARDING OTHER ACCOUNTS				
Do you have an Account with an		No		
Name of Account				
Account Number				
Sort Code				
Bank Name				
COMPANY REQUIREMENTS				
Cheque Book (Only for GBP Current Ac	count) Yes		No	
Internet Banking (View Only)	Yes		No	
GENERAL AGREEMENT AND	GENERAL AGREEMENT AND AUTHORISATION			
I/we declare, confirm and agree: - that all particulars and information given in this application form (and all documents referred to or provided herewith) are true, correct, complete,				

- that all particulars and information given in this application form (and all documents referred to or provided herewith) are true, correct, complete, up-to-date in all respects and I/we have not withheld any information. I/we understand that certain particulars given by me/us are required for regulatory reasons. I/we also agree to provide any further information that Union Bank of India (UK) Ltd may require: and
- that I/we have had no insolvency proceedings initiated against me/us, nor have I/we ever been adjudicated insolvent. I/we have no Court Judgements registered against me/us: and

- I/We agree, undertaken and authorise Union Bank of India (UK) Ltd to exchange share or part with all the information, data or documents relating to my/our applications to credit reference agencies.
- I/We agree that any account opened immediately or on a future date will be subject to the Bank's Terms and Conditions (A copy of which has been provided/available on www.unionbankofindiauk.co.uk) and as amended from time to time.
- I/We agree to comply with the Bank's rules with regard to the conduct of the accounts. I/We resolve to provide to the Bank in writing any changes in personal details including addresses or circumstances that may change from time to time.
- *I/We acknowledge the receipt of Financial Services Compensation Scheme's (FSCS) Information Sheet & Exclusion List.
- I/We undertake that I/we will not claim any interest on any of our fixed deposit/s made from time to time after the maturity date unless and until we have made a specific request to renew the deposit. I/we hereby authorise Union Bank of India (UK) Ltd to renew the fixed deposit/s made from time to time, on maturity for an identical period in the absence of any specific notice to the contrary.
- I/We declare that I/we have read and understood the Bank's Terms and Conditions, information about tariff of charges, summary of information about the Products and agree to abide by them.
- By signing below, I/we have read and understood this General Agreement and consent to the Bank to process data for the purpose stated, including sending the data to the Bank's offices in India.
- Under the Data Protection Act 2018, there are restrictions placed on data processors (Union Bank of India (UK) Ltd) regarding the transfer of data outside the EEA. The data provided by me/us or already in the Bank's records will be provided to the Back Office Operations Department (part of the Bank) in India for processing purposes and may be communicated to the Bank's parent bank in India, who may, for regulatory or statistical purposes, provide information to the Indian Regulatory Authorities. Information may be used for credit search. I/We understand that no information will be disclosed outsid the Bank. The Bank will disclose the information it holds if the Bank is allowed by law and if I/we give permission/authority to the Bank, if the Bank's interest means that it must give the information (for example, to prevent fraud) or if there is a public duty to do so. I/We have the right to request the data held about me/us. The Bank may charge an administration fee to meet its costs of providing me/us with the data.
- In order to verify your identity electronically (this is only to confirm identity and not a credit check), we will ask for your details (such as your name, address, date of birth and details will be passed on to external organization/s in order to electronically match your information with information on their databases. These organisations will assess and advise us whether all or some Information you provid(ed) matches their records.
- If false or inaccurate information is provided and fraud is identified, details will be passed on to fraud prevention agencies to prevent fraud and money laundering. Further details explaining how the information held by fraud prevention agencies may be used can be obtained by from our website www.unionbankofindiauk.co.uk.

www.unionbarkomulauk.co.uk.				
- Union bank of India (UK) Limited would like to keep you informed about any special offers you may be entitled to or about products and services available from the Bank that we think may interest you. If you want information on other products and services, please tick the following box: Yes				
From time to time we would like to contact you with details of other products and services we provide. If you consent to us for this purpose please tick to say how you would like us to contact you:				
Post Email Telephone Text messages Automated Call				
However, we will continue to update you on required changes regarding servicing your account specify with us. Unless you have said otherwise, by continuing with this application, you agree to us contacting you using any of the methods.				

- If I/We have opted for Internet Banking Services, then I/we declare that I/we have read, Understood and agree to the Terms and Conditions applicable to Internet Banking in relation to the operation of my/our Account as available via the website www.unionbankofindiauk.co.uk and as listed in the accompanying Terms and Conditions and that I/we will adhere to all the applications Terms and Conditions.

INSTRUCTIONS FOR OPERATIONS AND CONFIRMATION OF GENERAL AGREEMENT				
A/C No: Singly Jointly Anyone Others				
S.No	Name	Designation	Signatures	
1.			Date	
2.			Date	
3.			Date	
4.			Date	
5.			Date	

FOR OFFICE USE :					
Name	e:	Designation:		Signature:	
Name of the official in whose presence the documents were signed and documents verified : MLRO and/or Compliance Sign off I hereby declare that this account opening form is complete in all respect and relevant documents have been obtained and verified.					
Branch	Manager/ Head of Operations:				
RESC	DLUTION FOR ACCOUNT OP	ENING FOR ASSOCIA	TIONS/CHARITIES/	TRUSTS	ANNEXURE-1
Union	Bank of India (UK) Ltd			Date :	
We hereby certify that the following resolutions of the Board of Trustees of					
Resolv	ved that :				
 That a banking account(s) in the name of the Charity/Trust be opened with Union Bank of India (UK) Ltd ('the bank'), and that the following resolutions shall apply to all accounts of the Charity/Trust with the Bank now or in the future. The bank be authorised subject to the Terms and Conditions of the Charity/Trust account (a) To honour and comply with all cheques and other orders or instructions signed on behalf of the Charity/Trust, singly/jointly* by the following authorised signatories: 					
Signin	g rules:				
	uthorised signatory				
-	vo authorised signatories her (please specify)				
, ary 0 a	(please speemy)				
Auth	orised signatories*:				
S.No	Name	Position he	ld in the Organization	Signat	ures
1.					
2.					
3.					
4.					
(b) T	o accept the signatory as fully empowe	ered to act on behalf of and b	oind the Charity/Trust/Asso	ociation In any other transactions	with the Bank.

- (c) It was further resolved that Union Bank of India (UK) Ltd be requested to open additional accounts as and when required by the Charity/Trust/ Association. The Bank may also be instructed from time to time regarding any changes to the authorised signatories to the account.
- (d) It was further resolved that Union Bank of India (UK) Ltd be authorised to accept facsimile instructions or scanned copy of instructions by email given on behalf of the Charity/Trust/Association by the authorised signatories as mentioned above it was further resolved to excute an Instruction indemnity in favour of Union Bank of India (UK) Ltd to allow the authorised signatories to give instructions to the Bank by fax or through email.
- (e) It was further resolved that the Charity/Trust/Association do avail the 'Corporate Internet Banking Service' over Internet Channel with Union Bank of India (UK) Ltd at their Branches and the Charity/Trust/Association accepts such 'Terms of Service' for Corporate Internet Banking laid down by the bank from time to time for the purpose. Resolved further that each of the officials as empowered by the Charity/Trust/Association to operate the Charity/Trust/Association's accounts with the bank either singly or jointly as the case may be, is hereby authorised to apply for and avail of the 'Corporate Internet Banking' facility offered by the bank and do all they have been authorised, electronically, using their user name and password.

The Bank is to be supplied with:

- (a) A copy of the Articles of Association Certified by the Charity/Trust/Association as true, complete and up to date;
- (b) The Charity/Trust/Association's Certificate of Incorporation (to be copied and duly returned);
- (c) Copies of the latest audited Balance Sheet and Annual Reports where applicable.
- (d) Copies of any resolutions concerning the foregoing which may be passed from time to time:
 - 1. The Charity/Trust/Association agrees that any indebtedness or liability incurred by the Charity/Trust/Association under this authority shall in the absence of any express written agreement by the Bank to the contrary be due and payable on demand.
 - 2. The Bank be and is by this resolution authorised to provide the Charity/Trust/Association's auditor from the time being and from time to time with such information as the Charity/Trust/Association's auditors may request from time to time until notice in writing to the contrary is received b the Bank.

- 3. The Charity/Trust/Association agrees to provide to the Bank in writing any changes in details or circumstances that may change from time to time.
- 4. The Charity/Trust/Association Secretary shall, as and when necessary, supply to the Bank a list of the current directors/trustees and, if applicable, other officials authorised to sign with specimen signatures on such lists signed by the Secretary.
- 5. The Charity/Trust/Association hereby confirms that no general charge on the assets of the Charity/Trust/Association has been created in favour of any bank or financial Institution/and or the Charity/Trust/Association has obtained the necessary approval of the bank/financial institution for opening and operating a current account with the bank, a copy of which is attached.
- 6. The Charity/Trust/Association hereby confirms that none of the directors are or have been disqualified under the Charity/Trust/Association Director Disqualification Act 1986 or any similar overseas legislation covering the disqualification of directors or other officers of a Charity/Trust/Association.
- 7. In this resolution the expressions 'Directors' or 'Trustees' and 'Secretary' shall be construed as Director(s) or Trustee(s) and Secretary for the time being of the Charity/Trust/Association and shall, in the case of Director(s) include alternate Director(s) and in the case of Secretary shall include any joint Secretary, Assistance Secretary or Temporary Secretary.
- 8. We certify that the signatures set down within Section B of this account opening form are those of all the Trustees, Directors, the Secretary and of any other Officers of the Charity/Trust/Association authorised to sign, that such signatures are the genuine signatures of such persons and that such signatures operate as the specimen signatures of each of such persons.

Yours faithfully,

	. Garo laminany
CHAIRMAN/TRUSTEE/PRESIDENT:	
Signature Name	
SECRETARY:	
Signature Name	
ANNEXURE-2	
Union Bank of India (UK) Limited Telecommunications Author	risation
I/we authorize Union Bank of India (UK) Limited (the Bank) to accelute authorized by me/us subject to the following, which I understand a	ept and act upon instructions given through telephone, fax or email by me/us or any pers and acknowledge:
• There are inherent risks in sending instructions by telephone, fa	x and email.
Any email instructions must be sent from the registered email act	dress held by the Bank.
• When instructions are given to the Bank by telephone, fax or en	nail, the Bank will verify my/our identity by a telephone call to a number the Bank holds

• If the Bank is unable to contact me/us to verify the instructions, the Bank may not act on our instructions and any payments requested may be delayed or not made.

on record for me/us. During this call the Bank will ask questions based on information known to the Bank about me/us and the transactions on my/our

- This telecommunications authorization will be applicable for any future accounts that I/we may open with the Bank.
- I/We understand that in addition to the above terms, this service is also governed by the Business Banking Terms and Conditions.

account. On confirmation of this information the Bank will act on my/our instructions including payment of money from my/our account.

NAME OF THE COMPANY/ORGANISATION	
ADDRESS OF THE COMPANY/ORGANISATION _	
NAME OF THE AUTHORISED SIGNATORY 1:	
SIGNATURE	DATE:
NAME OF THE AUTHORISED SIGNATORY 2:	
SIGNATURE	DATE

CERTIFICATE

I/We certify that:				
WE HEREBY CERTIFY that, after considering Union Bank of India (UK) Limited General and Account Specific terms and conditions,				
placed before it, Board of Directors/the Executive Committee/Trustees, passed the resolution set out in section in a duly convened				
meeting, on, at which quorum was present, and that such Resolution has been duly recorded in the Minute Boo				
of the (Trust/Charity/Association/Club/Charity)				
The resolution set out in section was passed at a meeting at which quorum was present	nt.			
In respect of this application and any additional signatories page:				
All signatures are genuine. The information is correct and I have initialled all correction	s. Total number of authorised signatories in section on			
this form is Signed by				
(Trustee/Secretary/Chairman of the meeting and Secretary Trust/Association/Club/Cha	arity)			
Signature	Full Name			
	Official position			
	Date			
Signature	Full Name			
	Official position			
	Date			