Corporate/Commercial Banking Additional Parties Form



Please note – when filling out this form, please use the tab and arrow keys to move between the relevant fields. Ensure you do not use the return or enter keys.

Your Information

We collect and process various categories of personal and financial information throughout your relationship with us, to allow us to provide our products and services and to run our business. For more information about how we use your personal information, the types of information we collect and process and the purposes for which we process personal information, please read our Privacy Notice provided on our website at https://www.rbsinternational.com/global/privacy-notice.html

We may update this from time to time and would encourage you to visit our website regularly to stay informed of the purposes for which we process your information and your rights to control how we process it.

The Bank is legally required to verify your identity and make enquiries about your business before it can consider opening an account. The information requested in this form is necessary to undertake those enquiries. It may be necessary for the Bank to obtain further information from you. You must notify all parties named in this form that their information will be used for the purpose of establishing a banking relationship.

Please use this form to provide details of any additional beneficial owners and/or key principals.

1. Customer information	on profi	le																							
Name of customer (in full)																									
Account title																					_		_		
IBAN or Account Number																									
Sort code																									
GIIN (Global Intermediary	Identity	No.) if	applic	cable																					
2. Contact details																									
Please provide a contact no	ame, nu	mber o	ınd em	ail ad	dress	, in co	ise o	f a qu	ery.																
Name																									
Position held																									
Telephone number																									
Email address																									
Please confirm if the custor proceedings for debt?	mer has	tax ar	rears o	or lego	al proc	eedir	ngs d	curren	tly o	utsta	ndin	ig or	has e	ever	bee	n ins	olvei	nt, b	ankr	rupt	or h	ad a	ny c	court	:
	Yes	No	X																						
If yes please provide details	s on a se	parate	sheet																						

3. Beneficial owners (u	se additional copies of this sheet as required)						
Title	Mrs Miss Ms Other If other, please specify						
First name(s)							
Middle name(s) where applicable							
Surname							
Former name(s) such as m	naiden name, and any other name(s) used						
Date of birth							
Gender Identity	Male X Female X Other X If other, please specify*						
*For Isle of Man account h verification purposes.	olders, the stated Gender Identity must match your government issued identity (e.g. passport/driving licence) used for						
Occupation							
% ownership/control (whe	re not direct ownership please confirm via which entity)						
	. % %						
Principal residential address (inc country)							
Postcode							
Country of birth							
Place (Town/City) of Birth							
Government issued person	nal identification number or unique identifier (e.g. passport, driving licence etc.)						
Nationality							
Document type							
ID number							
Expiry date							
National Insurance Number (or equivalent)							
Other nationalities/ citizenships							
Does the beneficial owner	have more than 2 nationalities/citizenships?						
	Yes No X						

If 'Yes', please provide the additional information to your usual contact at the Bank.

Tax residency – please l reference numbers or la	list below the countries in which the beneficial owner is resident for tax purposes and provide the corresponding tax ocal equivalent.					
Country	Tax reference number					
Is the key principal tax r	resident in more than 2 countries?					
	Yes X No X					
If 'Yes', please provide t	he additional information to your usual contact at the Bank.					
	ation of the revised Beneficial Ownership (BO) structure detailing all Relevant and Ultimate BOs. You can provide this in chart or in a BO declaration letter.					
4. Key principals						
	ovide details for all directors, members, partners, beneficiaries, trustees and corporate entities connected to the clude e.g. General Partner, Corporate Director, Company Secretary.					
	entities are not regulated we will require additional information on the individual directors/beneficial owners and your sk will be able to advise you of our requirements.					
	re: Please provide a revised signed and dated organisational/structure chart showing the group structure and the es if necessary, and the ultimate controlling party or parties.					
Please provide copy of la	atest Partnership agreement / Limited Partnership Agreement if this has changed with the introduction of new parties.					
Please check box to indi	cate attached X					
4.1 Please complete	this section where the key principal is an individual (use additional copies of this sheet as required)					
Title	Mr X Mrs X Miss X Ms X Other X If other, please specify					
First name(s)						
Middle name(s) where applicable						
Surname						
Former name(s) such as maiden name, and any other name(s) used						
Capacity, e.g. director, to	rustee, company secretary, etc.					
Principal Residential address						
Postcode						
Date of birth						
Gender Identity	Male X Female X Other X If other, please specify*					

*For Isle of Man account holders, the stated Gender Identity must match your government issued identity (e.g. passport / driving licence) used for verification purposes.

Country of birth	
Place (Town/City) of Birth	
Occupation	
Government issued person	al identification number or unique identifier (e.g. passport, driving licence etc.)
Nationality	
Document type	
ID number	
Expiry date	
National Insurance Number (or equivalent)	
Other nationalities/ citizenships	
Does the key principal have	e more than 2 nationalities/citizenships?
	Yes No X
If 'Yes', please provide the o	additional information to your usual contact at the Bank.
Tax residency – please list l numbers or local equivalen	below the countries in which the individual is resident for tax purposes and provide the corresponding tax reference nt.
Country	Tax reference number
Is the individual tax resider	nt in more than 2 countries?
	Yes X No X
If 'Yes', please provide the o	additional information to your usual contact at the Bank.
4.2 Please complete this	s section where the key principal is a corporate entity (use additional copies of this sheet as required)
Entity name (full name)	
Entity name (rail name)	
Capacity, e.g. corporate di	rector, corporate trustee, etc.
GIIN (Global Intermediary I	Identity No.) if applicable
Principal business address	
Postcode	

Registered address (if diff	erent from the principal business address)	
Postcode		
Telephone number (inc STD)		
Formation date		
Country of registration/formation		
Registration number		
Tax residency – please lis reference numbers or loc	at below the countries in which the Corporate Entity is resident for tax purposes and provide the corresponding tax cal equivalent.	
Country	Tax reference number	
Is the Corporate Entity ta	x resident in more than 2 countries?	
	Yes No X	
If 'Yes', please provide the	e additional information to your usual contact at the Bank.	
5. Marketing informa		
prefer not to receive this	like to keep you informed about products, services and offers that we believe may be of interest to you. If you would information by any or all of the methods below, please place a cross in the relevant boxes (if you leave these boxes t you are happy to be contacted by these methods):	
Letter X Ph	none X Email X Text X	
RRS International will no	t share your information with third parties for their own marketing purposes without your permission	

RBS International will not share your information with third parties for their own marketing purposes without your permission.

Communications about your account

Notwithstanding your marketing choices above, we will contact you with information relevant to the operation and maintenance of your account by a variety of means including online banking, mobile banking, email, text message, post and/or telephone.

6. Your agreement

Please note – this section must be signed by the Authorised Signatories identified in the Signing Rules in the Bank Mandate with the highest level of signing authority. These Authorised Signatories must have authority from the Customer to sign for unlimited amounts.

The Account Terms are available at rbsinternational.com/terms and the Privacy Notice is available at rbsinternational.com/privacynotice. These are important. Please save or print a copy and read the document(s) carefully.

Alternatively, please ask your usual contact at the Bank for a copy of any of our documentation.

By signing below:

- you agree to the Account Terms.
- you confirm the details provided are correct and agree to notify us of any changes.
- you will notify any parties named in this form that the information will be used by us for the purpose of establishing a banking relationship.

Authorised Signatory	
Name (in full)	
Position held	
Date	
Authorised Signatory	
Name (in full)	
Position held	
Date	

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RBS International is a participant in the Jersey Banking Depositor Compensation Scheme. The Scheme offers protection for eligible deposits of up to $\pounds50,000$. The maximum total amount of compensation is capped at $\pounds100,000,000$ in any 5 year period. Full details of the Scheme and banking groups covered are available on the Government of Jersey website www.gov.je/dcs, or on request.

RBS International is a participant in the Guernsey Banking Deposit Compensation Scheme. The scheme offers protection for 'qualifying deposits' up to £50,000, subject to certain limitations. The maximum total amount of compensation is capped at £100,000,000 in any 5 year period. Details are available from: Website: www.dcs.gg. Telephone: +44 (0)1481 722756. Post: P.O. Box 380, St Peter Port, GY1 3FY. Deposits made in a Guernsey Branch will not be covered by any equivalent scheme in any jurisdiction outside of the Bailiwick of Guernsey.

RBS International is a member of the Isle of Man Depositors' Compensation Scheme (DCS) as set out in the Depositors' Compensation Scheme Regulations 2010. To understand your eligibility under the scheme you may wish to visit https://www.iomfsa.im/consumer-material/isle-of-man-depositors-compensation-scheme-dcs/.

Under the scheme (s) customers are entitled to make only one claim per licensed entity regardless of the number of brands or trading names contained within that licensed entity and customers are entitled to make one claim only per licensed entity in the jurisdiction where the deposits are held.

Not all accounts will be covered by these schemes, and further details of these schemes are available on request.

In the UK Eligible deposits are protected up to a total of £85,000 by the Financial Services Compensation Scheme, the UK's deposit guarantee scheme. Any deposits you hold above the limit are unlikely to be covered. Please ask for further information or visit www.fscs.org.uk.

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