



Type of power

Enduring Power of Attorney

Lasting Power of Attorney for Property and Financial Affairs (LPA)

Court of Protection Deputyship Order (COP)

Online Access Code (if applicable)

Details of first attorney

Title

Forename

Surname

Date of birth

Place of birth

Nationality

Sex (male/female)

Mothers maiden name

Email address

Contact Telephone number

Permanent residential address

Postcode

Details of second attorney

Title

Forename

Surname

Date of birth

Place of birth

Nationality

Sex (male/female)

Mothers maiden name

Email address

Contact Telephone number

Permanent residential address

Postcode

Mental Capacity

Does the Account Holder/Donor have mental capacity?*

Yes No

*If yes - Email Address

*If yes - Home Telephone

*If yes - Mobile Telephone

*If yes - Mothers Maiden Name

If you have lived at this address less than six months please provide us with your previous address

Address

Postcode

Can you confirm that you are a resident for tax purposes in only the UK? Yes No

Are you a US citizen? Yes No

If you have lived at this address less than six months please provide us with your previous address

Address

Postcode

Can you confirm that you are a resident for tax purposes in only the UK? Yes No

Are you a US citizen? Yes No



Proof of your identity and address

If you are opening a new account, we need to see one document for proof of name and address of the attorney and the donor. If you are changing an existing account, we will only need to do the checks on the attorney/ attorneys. Please always use the same document only for proof of name or address, not both.

Proof of name

- Current valid passport
- Current valid full UK or Northern Ireland photocard driving license
- Original Full valid Northern Ireland driving licence
- Original National Identity Card for EU Nationals
- Original Court Documentation (Enduring Power of Attorney / Lasting Power of Attorney / Court Order)

Proof of address

- Original Confirmation of entitlement to state or local authority benefits (including tax credit, child benefit, housing benefit, educational grants, winter fuel bill etc. dated within 12 months)
- Original pension statement / correspondence (dated within 6 months)
- Original HMRC tax notifications valid for the current tax year eg. tax assessment, notice of coding
- Original UK bank or building society statement / correspondence (dated within 6 months)
- Original mortgage statement from a recognised lender (dated within 12 months)
- Original Local Authority council tax demand valid for the current year
- Original gas / electric / landline telephone bill (dated within 3 months)
- Original letter from Matron / Manager of a nursing home, long term care unit or residential for the elderly (dated within 3 months)

To avoid the risk of loss of any original documents in the postal system, we would recommend that (unless where indicated you should send an original) you send us photocopies of documents as opposed to originals. We may accept other documents if you are unable to supply a document from the list above. Please call our customer services team on 0345 6056 050 for further details.

If we ask you to send more information

If we don't receive satisfactory evidence of your address and / or identity within 14 days of receiving this application, we'll send back any money you've sent us as part of it. Your money will be returned without interest and paid into the account from which it was deposited from.

Your Personal Information

Credit reference agency and fraud checks

In order to enter into an agreement with you, and for us to discharge our legal responsibilities, we need to verify your application and undertake credit reference agency, fraud prevention and anti-money laundering checks by evaluating your application for an account using credit reference and fraud prevention agencies. Please refer to our enclosed Privacy Policy for further information about how we use your personal data when you apply for an account with us.

We're here to help, 7 days – if you have any questions, please e-mail hello@rcibank.co.uk or call us on **0345 6056 050**. Braille, large print and audio versions available on request.

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Your declaration

The information given in this application is correct and I understand that the application is subject to the agreement (including the Terms and conditions, Account information summary and Managing your accounts), which I have read and accept / we understand and agree that I / we have a duty to act in accordance with the Power of Attorney/ Court of Protection Order and the principals of the Mental Capacity Act 2005 and Mental Capacity Code of Practice.

As the appointed Attorney(s)/ Deputy(s) for the account holder named in Section A of this form, I / each of us agree:

- That I am not bankrupt.
- To tell the Society if bankruptcy proceedings are taken against me.
- To act on the accounts according to the terms of the Power of Attorney/ Court of Protection Order I am registering.
- To tell the Society if I or the account holder changes address.
- To repay the Society for any costs incurred by directly following my instructions.
- To follow the terms and conditions of the accounts.
- To notify the Society if the status of the donor's mental capacity changes.

By signing below I confirm that I have read, understood and agree to be bound by the above statements.

Signature of first attorney	<input type="text"/>
Date	<input type="text"/>
Signature of second attorney	<input type="text"/>
Date	<input type="text"/>

*Where the Account Holder / Donor has mental capacity we require their signature confirming their consent to the Power of Attorney being registered against their account(s) and the attorney(s) acting for them online.

I consent to my attorney(s) being registered against my account(s) and acting for me and where my account(s) is/are online account(s) I understand and agree that my attorney(s) will have full and free access to my account(s)

Account Holder / Donor Signature	<input type="text"/>
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Now that you have completed this form in full, please take a few moments to check carefully that you have correctly filled in this application and are sending us the documents we need to open this RCI Bank account. We will need the documents to check you and the donor's identity and address to be able to open the account for you.

Please note: failure to complete the form in full and / or provide the requested documents may lead to your application being declined.

Right to cancel

You can cancel your agreement with us within 14 calendar days from receipt of your welcome letter. If you want to cancel your account, you can do this by writing to hello@rcibank.co.uk, or by post to 'FREEPOST: RCI Bank' (that's all, no stamp or address details needed), the Freedom Savings account can also be cancelled online.