

Autopilot International account – application form

Before completing this application form you must read the Autopilot International brochure and Terms and Conditions. These documents contain all the information you need to be aware of before opening your Autopilot International account. If you do not have the brochure or Terms and Conditions please contact your adviser.

Please complete in BLOCK CAPITALS and black ink.

Your information

For details of how we and others will use your information, please look for the padlock symbol and in the accompanying Terms and Conditions or contact your branch.

1. Personal details

1a. Main applicant

Title	Mr <input checked="" type="checkbox"/> Mrs <input checked="" type="checkbox"/> Miss <input checked="" type="checkbox"/> Ms <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> If other, please specify <input type="text"/>
Surname	<input type="text"/>
First name(s)	<input type="text"/>
Middle name(s)	<input type="text"/>
Gender	Male <input checked="" type="checkbox"/> Female <input checked="" type="checkbox"/>
Full residential address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>
Date of entry to above address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
If resident at above address less than 3 years please state previous address	
Previous address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>
Address for correspondence (Only complete if different to residential address)	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>
Telephone number (home)	<input type="text"/>
Telephone number (business)	<input type="text"/> extn <input type="text"/>
Mobile telephone number	<input type="text"/>
E mail address	<input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Country of permanent residence

Country of residence for tax purposes

Country of birth

Town of birth

Nationality

Occupation

Memorable word (Please choose a memorable word of no more than 15 characters. This may be used to confirm certain transactions)

1b. Second applicant

Title Mr Mrs Miss Ms Other If other, please specify

Surname

First name(s)

Middle name(s)

Gender Male Female

Full residential address line 1 (Only necessary if different to main applicant)

Address line 2

Address line 3

Address line 4

Postcode

Date of entry to above address MMYYYY

If resident at above address less than 3 years please state previous address

Previous address line 1

Address line 2

Address line 3

Address line 4

Postcode

Address for correspondence (Only complete if different to residential address)

Postcode

Telephone number (home)

Telephone number (business) extn

Mobile telephone number

E mail address

Date of birth DDMMYYYY

Country of permanent residence

Country of residence for tax purposes

Country of birth

Town of birth

Nationality

Occupation

Memorable word (Please choose a memorable word of no more than 15 characters. This may be used to confirm certain transactions)

2. Your deposit

Please confirm the issue number of the Autopilot International account in which you wish to deposit your funds. This can be found on the brochure cover or at the top of the Terms and Conditions.

Issue number

Please confirm your TOTAL deposit in Autopilot International

GBP USD EUR

Please select your payment method:

- Cheque (GBP deposits only) - cheques should be made payable to 'RBS International'
- Electronic transfer – please complete and return the customer payment instruction form attached at the end of this application

3. Account information

The following information is required for regulatory reasons and must be provided so that we can open your Autopilot International account.

About your account – please summarise the reason and purpose of opening this account.*

Source of funds – please provide a full statement as to the activity which generates funds for the account.*

Source of wealth – please provide a full statement of the activities which have generated your total wealth.*

* The Bank may require you to supply evidence to support the information you have provided.

If you are not locally resident in the jurisdiction where the account is to be domiciled, please provide an explanation for the account.

4. Residents of the European Union

Under current rules the return at maturity from your Autopilot International account will be paid gross and will not be affected by the EU Savings Tax Directive. However, if you are resident in the EU a retention tax of 20% will be deducted from any interest earned in the period from date of receipt until the start date of this account unless you can provide evidence to show that you are exempt from the measures of the EU Savings Tax Directive. Alternatively you may authorise us to exchange information with the tax authorities. Please note that tax rules and legislation can change at anytime and it is your responsibility to take advice on the effect of any such changes, the Bank can not and does not undertake to advise either of any changes or on the effect of them.

Please place a cross here if you would like to receive our Guide to the EU Savings Tax Directive.

This booklet also contains election forms to confirm your exemption or a preference to exchange information.

5. Declaration and signature(s)

To: RBS International ('the Bank')

I/We

- have read and accept the Terms and Conditions of the Autopilot International account and acknowledge those Terms and Conditions may be amended by the Bank from time to time;
- authorise you to take up any reference(s) which is/are necessary in connection with this application and declare that the information given above is true and correct;
- agree to provide further details if required;
- understand that you may decline this application without being required to state a reason;
- request and authorise you to accept instructions regarding this account signed by either or the survivor of us (for joint accounts only).
- understand that the return amount is determined by reference to the underlying index which may rise or fall during the term;
- understand that the deposit is intended to be held until maturity. An early closure request will be subject to the deduction of breakage costs and may mean that I/we receive less than the initial deposit amount.
- understand that there is no certainty the return at maturity will be over and above the original sum deposited..

Credit reference agencies

We may obtain information about you from credit reference agencies to verify your identity.

Fraud prevention agencies

If false or inaccurate information is provided and fraud is identified or suspected, details may be passed to fraud prevention agencies. We may also obtain information about you from fraud prevention agencies.

Keeping you informed

We would like to keep you informed by letter and by phone about products, services and additional benefits that we believe may be of interest to you. If you don't want us to do this, please place a cross in one or both boxes.

Letter Phone

We would also like to keep you informed via the e-mail address and mobile number you may have provided earlier in this form. May we keep you informed by electronic means, such as e-mail and mobile messaging?

Yes No

Giving your consent

By signing this application you are agreeing that we may use your information in the way described in this form (including the 'Keeping you informed' section) and in the associated Terms and Conditions.

All applicants sign here

Main applicant

Signed

Second applicant

Signed

Date _____

Date _____

What to do next

Firstly please check that all sections of this application form have been completed. Have ALL applicants...

1. Fully completed sections 1 to 5
2. Signed and dated the application form
3. Either (i) provided a cheque payable to RBS International or (ii) completed the customer payment instruction form attached at the end of this application
4. Provided the identity and proof of address required FOR EACH APPLICANT. Please note that if you are unable to provide original documents (e.g because you are applying by post) copies must be certified in accordance with the guidelines outlined.

The completed application and supporting documentation should be returned to your financial adviser or to us at:

**RBS International Autopilot International, Wealth Management Services, PO Box 125,
23-25 Broad Street, St Helier, Jersey, JE4 8QG**

If you require any further information simply contact your financial adviser or call us on:

+ 44 (0) 1624 637513

or

+ 44 (0) 1534 282296

For Independent Financial Adviser use only	
Full name of regulated firm	<input type="text"/>
Address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Address line 4	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/>
Full name of IFA	<input type="text"/>
Contact telephone number	<input type="text"/>
E mail address	<input type="text"/>
Name of regulator	<input type="text"/>
Signed by (IFA)	<input type="text"/>
	Date _____

Customer payment instruction form

Please complete this form to authorise an electronic funds transfer from an existing account to your Autopilot International account with RBS International. The completed form should be returned together with your application and will be processed by us once your account has been opened. Copies of this form may be taken if you wish to transfer funds from more than one account. Please note that funds must be transferred to us in the same denomination as your chosen option(s).

SECTION ONE – APPLICANT(S) TO COMPLETE

Details of the existing account to be debited

Name of your bank	<input type="text"/>		
Address of your bank line 1	<input type="text"/>		
Address line 2	<input type="text"/>		
Address line 3	<input type="text"/>		
Address line 4	<input type="text"/>		
Postcode	<input type="text"/>	<input type="text"/>	
Sort code	<input type="text"/>	Account number	<input type="text"/>
Account name(s)	<input type="text"/>		<input type="text"/>
Amount of transfer	GBP	<input type="text"/>	Amount in words <input type="text"/>
	USD	<input type="text"/>	<input type="text"/>
	EUR	<input type="text"/>	<input type="text"/>
	Date of birth	Initial	Surname
Unique reference number	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION TWO – INSTRUCTION TO BANK

Please accept this instruction as authority to transfer funds to RBS International in order for them to open an Autopilot International account. Please ensure all payments include the unique reference number quoted above as this acts as the beneficiary details. All charges for remitter's account. If you have any queries regarding this form please call us on +44(0)1624 637127 or write to us at RBS International, Strategic Deposit Unit, PO Box 13, Douglas, Isle of Man, IM86 1XF.

GBP	EUR	USD
Sort code: 16-58-80 Account number: 51007074 Account name: Strategic Deposit account Beneficiary reference: Please quote the unique reference number above	Beneficiary Bank: RBS International IBAN BIC: RBOSIMDX IBAN: GB96RBOS16588051007074 Account name: Strategic Deposit Account Beneficiary reference: Please quote the unique reference number quote above	Beneficiary bank: RBS International IBAN BIC: RBOSIMDX IBAN: GB96RBOS16588051007074 Account Name: Strategic Deposit Account Beneficiary reference: Please quote the unique reference number above

Main applicant

Signed

Date _____

Second applicant

Signed

Date _____

