

## Instructions

- Please ensure that all details are completed in full and tick boxes where applicable.
- Boxes marked with an asterisk (\*) must be completed.
- Failure to complete these boxes will result in the form being returned.
- We require the passbook in order to change a name on an account.
- We will need to see a copy of a Marriage Certificate or Deed Poll to verify the change
- If an address change is needed, the relevant Change of Address Form will also need to be completed

| CURRENT DETAILS               | CUST ID: | CUST ONLINE ID: |
|-------------------------------|----------|-----------------|
| *Title (Mr/Mrs/Miss/Ms/other) |          |                 |
| *First name(s)                |          |                 |
| *Surname                      |          |                 |
| *Address                      |          |                 |
| *County                       |          |                 |
| *Postcode                     |          |                 |
| *Date of birth                |          |                 |
| *Country of Birth             |          |                 |
| NI number                     |          |                 |
| *Occupation                   |          |                 |
| *Tel (home)                   |          |                 |
| Tel (mobile)                  |          |                 |
| Email                         |          |                 |
| *Nationality                  |          |                 |
| *Country of Residence         |          |                 |

## **NEW DETAILS**

| *Title (Mr/Mrs/Miss/Ms/other) |  |
|-------------------------------|--|
| *First name(s)                |  |
| *Surname                      |  |

#### **Existing Accounts**

## Please list all account numbers that you are linked to:

## Are you registered with our online banking?

Yes 🗆 🛛 No 🗆



## Reason for name change

Please mark X in ONE box to indicate the reason / method for your name change:

| Marriage / Civil Partnership          | Marriage / Civil Partnership certificate |
|---------------------------------------|--|
| Divorce / Dissolved Civil Partnership | Decree Absolute / Dissolution Order      |
| Deed Poll / Statutory Declaration     | Deed Poll / Statutory Declaration        |
| Other                                 | Please Specify:                          |

## Tax Residency Self Certification (FATCA/CRS)

 1. Are you a citizen and tax resident of the UK only?

 Yes
 No

 If NO please complete the supporting FATCA declaration leaflet

## Important - Use of Your Information

#### Data Protection Legislation and the UK General Data Protection Regulation

Any information you provide, both presently and in the future, may be held on record by the Society. The record may be held as an electronic record. The Society may use this information for purposes of customer administration, research, and statistical analysis, and for fraud prevention for the benefit of the Society and its customers. This information will be held during the life of the account and may be kept for six years after the account is closed. Under current Data Protection legislation, you have the right to ask us to send you a copy of your records and the right to change any of your information that is incorrect. In certain circumstances, you may also have the right to ask us to stop using or delete your personal information. You also have the right of access to your personal records held by credit and fraud agencies. It is important that you understand how the personal information you give us may be used. We therefore strongly advise that you read our Full Privacy Notice, which you can find on our website, or you can ask us for a copy.

#### **Fraud Prevention**

To prevent or detect fraud, or to assist in verifying your identity, we may make searches of records held by fraud prevention agencies who will supply us with information. We also pass information to government departments and to financial and other organisations involved in fraud prevention to protect ourselves and our customers from theft or fraud. If you give us false or inaccurate information and we suspect fraud, we will record this. We, and other companies, may use this information if decisions are made about you or others at your address on credit or credit related services. It may also be used for tracing and claims assessment.

#### **Proof of identity searches**

In order to comply with money laundering regulations and to protect our customers from fraud, we are required by law to confirm the identity and address of every applicant and beneficiary. We are able to access credit reference agency databases, including information from the Electoral Register, to check that the details you have supplied us with are correct. This will show, as a search of the database but not as a credit score, so will not affect your credit rating. In the majority of cases, this will enable us to open your account in addition to any paper-based identification. We will advise you, if we require further proof of identification, these requirements will depend upon how and where you are opening your account.

## Use of your personal information

The Society would like to be able to contact you by telephone (including mobile), post, or email using the contact details which you provide in this form. You can choose whether to be contacted for marketing purposes by indicating your preferences by ticking the relevant boxes in the declaration section of this form. You can change or cancel your choices at any time by contacting us at the Stafford Railway Building Society, 4 Market Square, Stafford, ST16 2JH.



## **Agreement and Declaration**

#### Your declaration - In signing this amendment form, you confirm the following declaration:

- I declare that the information I/we have given on this form is true to the best of our knowledge and belief and undertake to inform the Society of any changes in my/our circumstances.
- I agree to be bound by the Rules of the Society, the Society's Savings Account Terms and Conditions and any specific conditions applicable to this account (a copy of which I/we have received).
- To be bound by the rules of the Society and the Charitable Assignment Scheme described above in the application form and in our savings T&C's.
- I agree to the section called "Important Use Of Your Information" including the Privacy Policy and agree to the Society using my information in the manner specified.
- That I have received a copy of the Society's Privacy Notice and have had the opportunity to read this and ask any questions.

| I confirm that the Society can contact me by telephone for marketing purposes<br>I confirm that the Society can contact me by post for marketing purposes.<br>I confirm that the Society can contact me by email for marketing purposes. |  |
|--|--|
| I do not want the Society to contact me for marketing purposes.  |  |

Please tick the box below to confirm you have received the Society's Privacy Notice within your pack.

Account holder

# PLEASE SIGN HERE FOR CHANGE OF NAME

For changes by marriage, divorce, civil partnership, or deed poll, please fill out both signature boxes below.

| Full name (previous): |
|-----------------------|
|                       |
|                       |
| Date:                 |
|                       |
|                       |
| Previous Signature:   |
|                       |
|                       |
|                       |
|                       |

| Full name (new): |  |  |  |  |
|------------------|--|--|--|--|
|                  |  |  |  |  |
| Date:            |  |  |  |  |
|                  |  |  |  |  |
| New Signature:   |  |  |  |  |
|                  |  |  |  |  |



| Office use only  |          |           |
|--|----------|-----------|
|  | Tick and | d initial |
| <b>Check</b> the name and salutation on <b>EVERY</b> account that the customer has to ensure that only those that should be changed have been and that none have been missed |          |           |
| Are there any mortgage accounts to be changed? Please check with the Mortgage department before taking form.   |          |           |
| Has the signature been verified?   |          |           |
| Check if the member has an online profile. If so, this will need updating.   |          |           |
| Electronic ID check been done?   |          |           |
| Electronic ID ref number   |          |           |
| Pass or Refer If refer has CUID marker been added Y/N,.  |          |           |
| Change completed by:   |          |           |
| Name   |          |           |
| Signature  |          |           |
| Date   |          |           |
| Checked by:  |          |           |
| Name   |          |           |
| Signature  |          |           |
| Date   |          |           |