



**ACCOUNT TERM**    Six months     Twelve months

I/We enclose a personal cheque made payable to 'Raphaels Bank - Your Name' for:  
e.g. 'Raphaels Bank - Mr A Smith'



(min.£5,000 max.£250,000)

## PERSONAL INFORMATION

### FIRST APPLICANT

Title	Surname
First Names	
Address*	
Post Code	
Tel. (eve)	
Tel. (day)	
Occupation	
Date of Birth	
Mothers Maiden Name	
National Insurance No.	

### SECOND APPLICANT

Title	Surname
First Names	
Address*	
Post Code	
Tel. (eve)	
Tel.(day)	
Occupation	
Date of Birth	
Mothers Maiden Name	
National Insurance No.	

Do you already hold an account with Raphaels Bank  Yes  No    If so please quote account number

\*If you have been at your address for less than 3 years, please supply your previous address overleaf.

**Only new depositors need to provide proof of identity as described overleaf**

## DECLARATION

- I/We have read and agree to the Sapphire Account Terms and Conditions ("T&Cs")
- I/We understand that no withdrawals will be permitted except those specified in the T&Cs.
- I am / We are permanent UK resident(s), subject to UK tax legislation (Channel Islands and Isle of Man excluded) and I/We undertake to advise Raphaels Bank of any changes in this status.
- The information supplied on this application is true to the best of my/our knowledge.
- I am the sole/We are the joint beneficial owner(s) of any monies deposited with Raphaels Bank.
- If the account is opened in joint names, any ONE signature will be accepted to operate the account unless I/We instruct otherwise.
- I/We are aware that Raphaels Bank will be carrying out electronic verification of My/Our identity. Should My/Our check fail, I/We are aware that further documents will be requested and should be provided in order to continue with the application.

By signing this declaration you confirm that you have read, understood and agree to be bound both by the T&Cs and everything else set out in this application.

Signature of 1st Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of 2nd Applicant \_\_\_\_\_ Date \_\_\_\_\_



# Sapphire Account

## ADDITIONAL REQUIREMENTS

### FOR ALL APPLICATIONS

The applicant must provide the following:

A personal cheque signed by the investor made payable to 'Raphaels Bank - Your Name' and drawn on an account with an authorised UK credit institution in the sole or joint name of the investor.

If further documents are requested, a certified copy of one of the following should be certified and sent to Raphaels Bank. Documents, if requested, must be certified by a solicitor, accountant or bank official.

- Current signed passport
- Current full UK Driving Licence (Provisional driving licences are not acceptable)

Additionally proof of address, of not more than 3 months old, must be certified in the format of:

- Council tax bill
- Utility bill

## PREVIOUS ADDRESS If you have been at your address for less than 3 years, please supply your previous address here.

Address

Post Code

Without suitable identification Raphaels Bank cannot guarantee to open the account and may have to return your money to you. Please ensure that where applicable all items are no more than three months old.

Please do not send unnecessary or original documentation to Raphaels Bank as we cannot be held responsible for such documentation sent by post and this may delay processing your application.

All certified copies of any documents will be held by the bank and will not be returned to the investor(s).

### PLEASE RETURN COMPLETED FORMS TO:

**Aylesbury Office** Raphaels Bank, Walton Lodge, Walton Street, Aylesbury, Buckinghamshire, HP21 7QY T: 01296 436 661 F: 01296 423 041

## FOR BANK USE ONLY

Issue number:

Gross rate:

NET Rate:

AER:

### Head Office