



**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 investors should provide proof of identity as described overleaf**

## DECLARATION

1. I/We have read and agree to the Terms and Conditions.
2. I/We understand that no withdrawals will be permitted except those specified in the Terms and Conditions.
3. 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.
4. The information supplied on this application is true to the best of my/our knowledge.
5. The account I/We have opened with Raphaels Bank will not be used for business purposes.
6. I am the sole/We are the joint beneficial owner(s) of any monies deposited with Raphaels Bank.
7. If the account is opened in more than one name, any ONE signature will be accepted to operate the account unless I/We instruct otherwise.
8. I am/We are aware that Raphaels Bank may be required under statutory obligation to apply for references before opening the account. I/We understand that this could include electoral and/or credit reference agency searches and I/We authorise you to make any such searches.

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

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

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



# Sapphire Account

## PROOF OF IDENTITY AND ADDRESS

### FOR NEW SOLE APPLICATIONS

The applicant must provide the following:

#### List A

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.

**AND**

#### List B

A **photocopy** of **one** of:

- Current signed passport
- Current full UK Driving Licence (old style).  
(Provisional driving licenses are not acceptable)
- Benefit book or original letter from benefits agency
- Residence permit
- Current UK Photo-Card Driving Licence
- Inland Revenue Tax Notification no more than 3 months old
- Disabled drivers pass
- EU member state ID card.

### JOINT APPLICATIONS

As above for one applicant, in addition the second applicant must provide an item from **List B**.

If we cannot verify your identity from electronically available information we may need additional documentary proof of your identity and/or address. In such a case we will inform you of exactly which document(s) we require.

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