

Please use black ink - if the account is for more than two applicants please use an additional form.

Under Society Rules, the first named account holder will be entitled to receive Notices of General Meetings and to vote as appropriate on behalf of the joint account holders.

TYPE OF ACCOUNT

AMOUNT OF INITIAL INVESTMENT £

How did you hear about us? .....

**Applicant 1**  
Mandatory Information

Title .....

Forename(s) .....

Surname .....

Address .....

.....

.....

Postcode .....

Previous Address (if less than 5 years at current address)  
.....

.....

Postcode .....

Date of Birth .....

NI Number .....

Occupation .....

Employer .....

Nationality .....

Other MHBS account numbers  
.....

Telephone Numbers

Evening .....

Daytime .....

Mobile .....

Email .....

**Applicant 2**  
Mandatory Information

Title .....

Forename(s) .....

Surname .....

If address is same as applicant 1, please tick the box

Address .....

.....

.....

Postcode .....

Previous Address (if less than 5 years at current address)  
.....

.....

Postcode .....

Date of Birth .....

NI Number .....

Occupation .....

Employer .....

Nationality .....

Other MHBS account numbers  
.....

Telephone Numbers

Evening .....

Daytime .....

Mobile .....

Email .....

We would like you to be the first to hear about the latest Market Harborough Building Society rates, products and services. We promise not to bombard you with information but will occasionally send updates about products and services that we think you will be interested in. Just tell us how you like to be contacted.

Please contact me by post  by telephone  by email

Rest assured, we take your privacy very seriously so we will not share our members' details with any commercial organisations and, if at any time you feel you are receiving too much information or wish to stop marketing communication from the Society, please give us a ring and we can change your contact preferences instantly. **Louise Bunce, Head of Sales & Marketing**

**OFFICE USE ONLY**

Opening date ..... Account number

**How would you like your interest to be paid?**

Please pay my interest                      Annually                       Monthly (Not available on all account types)

Your interest will be added to your account unless specified below

Please transfer to an alternative MHBS account number                     

Please pay into an external bank account number                     

Bank name ..... Sort code  -  -

Account name ..... Reference number .....

If you think you may be eligible to receive interest without the payment of tax, please tick the appropriate box                      App.1                       App.2

If you have a mortgage please provide the name of your lender

.....

For a no obligation discussion on your current mortgage options please tick the box

Before you open an account with the Society, we are required by law to check your identity. In order to verify the information you provide we may make searches about you with a credit reference or Fraud Prevention Agency; this will include information from the Electoral Roll. The agencies will record the details of the search whether or not your application proceeds. Other organisations may share these searches in order to prevent fraud. Scoring methods may be used as part of this process. We may ask you to supply at least one original document as confirmation of your identity, address, or both, which we will use along with any electronic checks we may perform. Any documents provided to us will be recorded and copied for audit purposes as part of our Anti Money Laundering requirements.

For your own benefit and protection you should read the Society’s general savings account Terms and Conditions, and the specific Terms and Conditions relating to the product type you have chosen. If you do not understand any point please ask for further information.

**Declaration**

**I/We understand that information provided by me/us may be held and processed by Market Harborough Building Society, for administration purposes, statistical analysis and market research, and may be shared within Market Harborough Building Society or with third parties to protect the Society and its customers against fraud, or to satisfy the requirements of Codes of Practice and statutory regulation.**

**Signed**

Applicant 1

Applicant 2

.....  
Date

.....  
Date

If you require all signatures for withdrawals and changes to account information please tick the box

**IF YOU REQUIRE THIS INFORMATION IN LARGE PRINT, BRAILLE OR ON AUDIO FORMAT, PLEASE LET US KNOW.**

Welland House, The Square, Market Harborough, Leicestershire, LE16 7PD  
Tel: 01858 412250 Fax: 01858 412254  
Email: CustomersFirst@mhbs.co.uk Website: www.mhbs.co.uk

**OFFICE USE ONLY**

Branch..... Face to Face                      Y/N

**APPLICANT 1**  
Customer number .....  
Existing account holder?                      Y/N  
Branch originator ID.....  
Data processor ID .....  
Date .....

**APPLICANT 2**  
Customer number .....  
Existing account holder?                      Y/N  
Branch originator ID.....  
Data processor ID .....  
Date .....

ID checked ..... Data checked .....  
Date .....