Gibraltar Savings Bank

Registered Debentures Application Form - Organisations

I/We accept the terms and conditions of investment as specified in the Prospectus and General Conditions and hereby apply to purchase the following Gibraltar Savings Bank Registered Debentures/Bonds:

Investment	Interest rates per annum	Amount (multiples of £100)
☐ 3-Year Fixed Term Monthly Income Debentures	Fixed @ 2%	
☐ 5-Year Fixed Term Monthly Income Debentures	Fixed @ 3%	

1. Details of the Organisation

Organisation name: _____ Nature of Business _____

Should the organisation own any Registered Debenture/Bonds please enter Account No.

2. Details of the authorised signatories

A.1 Forename(s) | Surname(s) | Date of Birth | Status/Rank | Telephone:

ID or Passport Number | Address: | Email:

A.2 Forename(s) | Surname(s) | Date of Birth | Status/Rank | Telephone:

ID or Passport Number | Address: | Email:

A.3 Forename(s) | Surname(s) | Date of Birth | Status/Rank | Telephone:

ID or Passport Number | Address: | Email:

A.4 Forename(s) | Surname(s) | Date of Birth | Status/Rank | Telephone:

ID or Passport Number | Address: | Email:

Please specify the number of signatures required to authorise any transaction. A minimum of two signatures are required. ☐

**We understand and accept that the GIBRALTAR SAVINGS BANK will consider itself discharged of its liabilities if any monies payable hereunder are paid as specified above.*

3. Details of the beneficial owners, directors &/or shareholders

A.1 Forename(s) | Surname(s) | Date of Birth | *Capacity | Telephone:

ID or Passport Number | Address: | Email:

A.2 Forename(s) | Surname(s) | Date of Birth | *Capacity | Telephone:

ID or Passport Number | Address: | Email:

A.3 Forename(s) | Surname(s) | Date of Birth | *Capacity | Telephone:

ID or Passport Number | Address: | Email:

A.4 Forename(s) | Surname(s) | Date of Birth | *Capacity | Telephone:

ID or Passport Number | Address: | Email:

**Capacity within the organisation.*

2. Deposit details

☐ Savings Bank notice of withdrawal: £

☐ Cheque: £

☐ Debit Card: £

☐ Bank Transfer: £

Bank / Ordinary Deposit Account Details

Account No:

Cheque No:

Sortcode:

For GSB Use Only

Receipt/J.V Number: _____ Holder Number: _____

Date of Purchase: _____ Certificate Number: _____

3. Interest Payment Instructions

Please pay interest accruing in my/our Registered Debentures as follows:

Bank/Building Society Name:

Account No: Sortcode:

Account Name:

Please enter details in full - (applicant must be the account holder)

4. Source of Investment *(Please specify)*

Please note that you may be asked to supply documentary evidence to verify the source of funds. Such evidence will be required, in any case, where the investment, or series of investments, is greater than £10,000.

5. Exchange of Information for Non Residents

Please note that if you are not resident in Gibraltar, details of your holding of debentures may be subject to exchange of information, in accordance with the applicable legislation or international exchange of information agreements in force from time to time. As a result, when you are investing for the first time, in addition to this debenture application form, an Entity Self-Certification Declaration Form must be completed.

6. Data Protection - How we use your information

We treat all the information you give us about you and others as private and confidential. We respect your right to privacy and understand the importance of protecting the personal information that we hold. See our privacy notice for full details – available at www.gibraltar.gov.gi under Treasury Department, Gibraltar Savings Bank or by calling us.

7. Signatures

Signatory 1 Signature _____ **Signatory 2** Signature _____

Signatory 3 Signature _____ **Signatory 4** Signature _____

All signatories must sign