

PERSONAL DETAILS – SECOND AUTHORISED OFFICIAL/DIRECTOR

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

Position held within organisation

Passport Number (non residents only) Country of Issue (non residents only)

If Dual Nationality, other Passport Number (non residents only) Country of Issue (non residents only)

If Dual Nationality, Country of Origin (non residents only)

Town of Birth Country of Birth

Any other name you are, or have been known by

Are you: Married To be married Single Widowed Divorced Separated Other

Date of Birth Sex: Male Female Number of dependant children

Address

(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

Mother's maiden name (passwords for security) School name (passwords for security)

Home Tel No. incl STD

Mobile Tel No. incl STD

Personal Email Address

Please provide details of your previous address(es) if less than 3 years at your current address

(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

Second previous address

Grid for second previous address

(Non UK residents, please state your country of residence)

Grid for country of residence

Grid for country of residence

Grid for country of residence

Grid for country of residence

Grid for country of residence

Postcode/Zipcode

Date moved to address

MMYYYY date format

If you have had more than two previous addresses within the last three years please attach details on a separate sheet of paper.

Your Home Details

Are you: Owner occupier, Joint owner, Living with parents, Tenant furnished, Tenant unfurnished, Council tenant, Other

If you own your home please give: Estimated value of your home, Mortgage Outstanding, Name of Lender

Employment

Only complete if you have other paid employment.

Are you a Director of this Organisation?, Employment status, Employment type, Temporary Employment, Other

Occupation

Employer's Name

Business Address

Business Address

Business Address

Postcode/Zipcode, Employer's Tel No. Incl STD

Work Email Address

Nature of Employer's Business

Nature of Employer's Business

Date employment commenced

Total Annual Income before tax and deductions, Net Monthly Income

How do you receive your salary? Cheque, Cash, Direct to Bank

When are you paid? Daily, Weekly, Fortnightly, Monthly

Have you ever: Made a composition with creditors including an Individual Voluntary Arrangement?, Had a property repossessed?

(If yes is the answer to any of the following, please provide details on a separate sheet of paper) Had a court order for debt registered against you?, Broken any credit agreements?

Been associated with a business or organisation that has failed to keep up repayments on a mortgage, credit card or other financial arrangement or had a court order for a debt registered against it?

Have you ever been declared bankrupt? Yes, No

Existing customer details

If you are an existing customer of Al Rayan Bank, please provide your account details.

Account Number, Account Number, Account Number

DECLARATION AND SIGNATURE

I have read, understand and agree to the statements made in the Data Protection and Marketing section on page 11 and Declaration 1 and 2 on pages 13 and 14 respectively of this application form.

Signed, Date

PERSONAL DETAILS – THIRD AUTHORISED OFFICIAL/DIRECTOR

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

Position held within organisation

Passport Number (non residents only) Country of Issue (non residents only)

If Dual Nationality, other Passport Number (non residents only) Country of Issue (non residents only)

If Dual Nationality, Country of Origin (non residents only)

Town of Birth County of Birth

Any other name you are, or have been known by

Are you: Married To be married Single Widowed Divorced Separated Other

Date of Birth Sex: Male Female Number of dependant children

Address

(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

Mother's maiden name (passwords for security) School name (passwords for security)

Home Tel No. incl STD

Mobile Tel No. incl STD

Personal Email Address

Please provide details of your previous address(es) if less than 3 years at your current address

(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

PERSONAL DETAILS – FOURTH AUTHORISED OFFICIAL/DIRECTOR

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

Position held within organisation

Passport Number (non residents only) Country of Issue (non residents only)

If Dual Nationality, other Passport Number (non residents only) Country of Issue (non residents only)

If Dual Nationality, Country of Origin (non residents only)

Town of Birth Country of Birth

Any other name you are, or have been known by

Are you: Married To be married Single Widowed Divorced Separated Other

Date of Birth Sex: Male Female Number of dependant children

Address

(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

Mother's maiden name (passwords for security) School name (passwords for security)

Home Tel No. Incl STD

Mobile Tel No. incl STD

Personal Email Address

Please provide details of your previous address(es) if less than 3 years at your current address

(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

Second previous address

Grid for second previous address

(Non UK residents, please state your country of residence)

Grids for non-UK residents and postcode/zipcode with date moved to address

If you have had more than two previous addresses within the last three years please attach details on a separate sheet of paper.

Your Home Details

Form for home details including owner/tenant status, estimated value, and mortgage information

Employment

Only complete if you have other paid employment.

Form for employment details including status, type, occupation, and employer information

Form for financial details including annual income, net monthly income, and salary payment frequency

Existing customer details

If you are an existing customer of Al Rayan Bank, please provide your account details.

Form for existing customer account details

DECLARATION AND SIGNATURE

I have read, understand and agree to the statements made in the Data Protection and Marketing section on page 11 and Declaration 1 and 2 on pages 13 and 14 respectively of this application form.

Signed and Date fields

SECTION C – PERSONAL DETAILS – MAJOR SHAREHOLDERS

Major Shareholder

If your organisation is a limited company, please provide details of all other major shareholders (i.e. owners of more than 10% of the share capital) of the organisation. Do not provide details of shareholders already included in section B. To comply with Money Laundering Regulations, we will need to obtain identification from all major shareholders who will need to complete the 'Shareholder Authorisation Form'. Please provide details on a separate sheet if more than 4 major shareholders.

1. Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Surname/Last Name

Nationality If Dual Nationality, other nationality

Address

Postcode/Zipcode

Daytime Tel No. Incl STD Director: Yes No % of shares held

2. Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Surname/Last Name

Nationality If Dual Nationality, other nationality

Address

Postcode/Zipcode

Daytime Tel No. Incl STD Director: Yes No % of shares held

3. Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Surname/Last Name

Nationality If Dual Nationality, other nationality

Address

Postcode/Zipcode

Daytime Tel No. Incl STD Director: Yes No % of shares held

4. Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Surname/Last Name

Nationality If Dual Nationality, other nationality

Address

Postcode/Zipcode

Daytime Tel No. Incl STD Director: Yes No % of shares held

I confirm that the information given above is correct at the date of application

Signed by:

Signature of Director

X

Signature of Company Secretary/Director

X

Your signature must not go outside the box.

Date

Your signature must not go outside the box.

Date

SECTION D – PRODUCTS AND SERVICES

Please indicate by ticking the box which product you are applying for:

Current Account Everyday Saver (Issue 2) 60 Day Notice Account Charities' Notice Savings Account Fixed Term Deposit Account* Treasury Deposit Account*

If you are enclosing your cheque please state amount £

These products are subject to our **Business Banking Terms and Conditions** and where applicable **Special Conditions**.

You should make sure you have received them and that you understand them and agree to be bound by them before you apply. In cases of Fixed Term Deposit Accounts and Treasury Deposit Accounts, please also complete the applicable instruction forms.

*Please note, to open a Fixed Term Deposit Account or a Treasury Deposit Account you will need to have or open a Current Account/Savings Account.

SECTION E – PAYMENT OF PROFIT ON YOUR SAVINGS ACCOUNT(S)

Payment of gross profit

You may be able to receive your profit gross provided that you are eligible under Inland Revenue regulations and provided that the account is not a relevant deposit as set out in Section 481 of the Income and Corporation Taxes Act 1988. We may confirm your tax status with your local tax office to satisfy us that profit may be paid gross. If you are eligible, please confirm you wish to receive your gross profit by ticking the box below:

Gross

Your profit will be paid into your savings account. If you do not want your profit paid into this account please let us know which Al Rayan Bank account you would like this paid into, when your account(s) have been opened.

SECTION F – HOW DID YOU HEAR ABOUT AL RAYAN BANK?

Received info through post Radio advert Newspaper advert Word of mouth TV advert Recommendation by family/friend Through the Masjid
Press release Internet search Website Other



DATA PROTECTION AND MARKETING SECTION

Any information which you provide to us will be added to our database and used to administer your account, for statistical analysis, for debt collection and fraud prevention.

We may provide your data to third parties who are involved in the delivery of our products and services, however, we will not provide your information to third parties for marketing purposes. You may request in writing, upon payment of a fee, a copy of the details held about you by Al Rayan Bank PLC.

Keeping you informed

From time to time we'd also love to tell you about our Islamic financial services, products and any new offers that we think you'd be interested in based on the information we hold about you. If you would like to hear from us about these please tick the appropriate box(es) below so we know how you would prefer us to contact you.

Newsletter Email Post SMS Phone

If you would prefer not to hear from us with Al Rayan Bank marketing information and offers, please tick here:

You can change your preferences at any time, by writing to us at Al Rayan Bank, PO Box 12461, Birmingham, B16 6AQ. Al Rayan Bank PLC is registered as a Data Controller on the public register of Data Controllers as maintained by the Information Commissioner [Registration number Z8666062]. If you would like more information about how we use your information please visit our website at alrayanbank.co.uk/privacy.



IMPORTANT - YOUR PERSONAL INFORMATION

Credit decisions and also the prevention of fraud and money laundering

We may use Credit Reference Agencies (CRAs) and Fraud Prevention Agencies (FPAs) to help us make decisions. A short guide to what we do and how we, CRAs and FPAs will use your information is detailed below. If you would like to read the full details of how your data may be used, please visit our website at www.alrayanbank.co.uk phone 0800 4086 407 or ask one of the staff in our branches. By confirming your agreement to proceed you are accepting that we may each use your information in this way.

A condensed guide to the use of your personal and business information by ourselves, CRAs and FPAs

1) When you apply to us to open an account, we will check the following records about you and your business partners:

a) Our own.

b) Personal and business records at CRAs. When CRAs receive a search from us, they will place a search footprint on your business credit file that may be seen by other lenders. They supply to us both public (including the electoral register) and shared credit and fraud prevention information.

c) Records at FPAs.

d) If you are a director, we will seek confirmation from credit reference agencies that the residential address you provide is the same as that shown on the restricted register of directors' usual addresses at Companies House.

We will make checks such as assessing this application for credit, and verifying identities to prevent and detect crime and money laundering. We may also make periodic searches at CRAs and FPAs so as to manage your account with us.

2) Information on applications will be sent to CRAs and will be recorded by them. This will include information on your business and its proprietors. CRAs may create a record of the name and address of your business and its proprietors, if there is not one already. Where you borrow from us, we will give details of your accounts and how you manage it/them to CRAs.

3) If you borrow and do not repay in full and on time, CRAs will record the outstanding debt. This information may be supplied to other organisations by CRAs and FPAs to perform similar checks, and to trace your whereabouts and recover debts that you owe. Records remain on file for 6 years after they are closed, whether settled by you or defaulted.

4) If you have borrowed from us and do not make payments that you owe us, we will trace your whereabouts and recover debts.

5) If you give us false or inaccurate information and we suspect or identify fraud, we will record this and may also pass this information to FPAs and other organisations involved in crime and fraud prevention. Law enforcement agencies may access and use this information.

6) We and other organisations also access and use this information to prevent fraud and money laundering. For example, when:

• Checking details on applications for credit and credit-related or other facilities;

• Managing credit and credit related accounts or facilities;

• Recovering debt;

• Checking details on proposals and claims for all types of insurance;

• Checking details of job applicants and employees.

7) We and other organisations may access and use from other countries the information recorded by fraud prevention agencies.

8) Your data may also be used for other purposes for which you give your specific permission or, in very limited circumstances, when required by law or where permitted under the terms of the prevailing data protection legislation.

9) Your information may be held and processed outside of the European Union and you give us explicit permission to do so.

How to find out more?

You can contact the CRAs currently operating in the UK; the information they hold may not be the same so it is worth contacting them all. They will charge you a small statutory fee.

• CallCredit, Consumer Services Team, PO Box 491, Leeds, LS3 1WZ or call 0330 024 7579 or visit www.callcreditstatereport.co.uk

• Equifax Ltd, Customer Service Centre, PO Box 10036, Leicester LE3 4FS or log on to www.equifax.co.uk

• Experian Ltd, Customer Support Centre, PO Box 9000, Nottingham, NG80 7WF or email consumer.helpservice@experian.com

Please contact us on 0800 4086 407, if you want to receive details of the relevant fraud prevention agencies.

Trustee/Director/Chairperson/Secretary/Treasurer (as applicable) should initial and date each page: Initial Date

SECTION G – MANDATE

Please indicate who you would like to operate the account. Only those persons named below will be able to sign on behalf of the organisation. If you have not supplied a certified copy of your passport, please supply a passport size photograph of yourself.

Title First Name

Surname/Last Name

Position

Date

Signature

X

Your signature must not go outside the box.

Title First Name

Surname/Last Name

Position

Date

Signature

X

Your signature must not go outside the box.

Title First Name

Surname/Last Name

Position

Date

Signature

X

Your signature must not go outside the box.

Title First Name

Surname/Last Name

Position

Date

Signature

X

Your signature must not go outside the box.

Please process transactions on the account(s) applied for on this application form on the instructions of:

Any one signature Any two signatures More than two signatures (please specify how many)

If you require a compulsory signature, please state the name of compulsory signature:

Title First Name

Surname/Last Name

Position

Date

Signature

X

Your signature must not go outside the box.

Copy documents must be certified as true copies by the Trustee/Director/Chairperson and the Secretary/Treasurer or equivalent. If your organisation is a limited company, copy documents must be certified as true copies by a minimum of one director and one secretary. Please refer to the 'Businesses, Charities, Mosques & Madrasahs Proof of Identity' leaflet for more information.

Should you have any queries or wish to amend this form please telephone 0800 4086 407. Telephone calls may be monitored and or recorded.

Secretary/Treasurer/Trustee/Director

Title

First Name

Surname

Signature

X

Your signature must not go outside the box.

Date

Declaration 2

Please confirm that the following statements are true. Please note that, by signing this form you are making the following statements on behalf of the organisation you represent and personally, on your own behalf.

- We confirm that the resolutions set out in the mandate are an accurate record of what was resolved at the meeting. We agree to supply Al Rayan Bank with a copy of the Committee/Board or equivalent body resolution.
- We confirm that we have read and understood and agree to the information contained in this form.
- We confirm that we understand that the account applied for will be governed by the **Business Banking Terms and Conditions** and any other special conditions which may apply (a copy of which we have received) and we agree to be bound by those terms.
- We confirm that the information contained in this application is true and correct.
- We authorise Al Rayan Bank to operate banking services in accordance with the mandate.
- We confirm that the authorised officials named in this application form have the relevant authority to act on behalf of the organisation in the opening and operation of these accounts.

This is our application agreement upon which we intend to rely. For your own benefit and protection, you should read all the terms and conditions carefully before signing this application. If you do not understand any point please ask for further information.

PLEASE DO NOT SIGN THIS FORM UNTIL YOU HAVE TAKEN INDEPENDENT ADVICE FROM A SOLICITOR OR ACCOUNTANT IF YOU ARE IN ANY DOUBT ABOUT AGREEING TO THE TERMS

Signed by:

Signature of Chairperson/Trustee/Director

X

Your signature must not go outside the box.

Date

Signature of Secretary/Treasurer/Trustee/Director

X

Your signature must not go outside the box.

Date

For and on behalf of

(insert name of organisation)

SECTION J – IDENTIFICATION

Identification

To open an account with Al Rayan Bank please refer to our 'Businesses, Charities, Masjids & Madrasahs Proof of Identity leaflet in relation to an individual's identity and supply the relevant documents to prove your identity and your address. Pursuant to money laundering legislation, we are also required to obtain evidence of identification in relation to Registered Charities, Clubs, Societies & Study Groups. We will inform you of what information we require from you.

Examples of identification evidence necessary where the organisation is a Registered Charity (registered only in England & Wales) include, but are not limited to the following; obtaining evidence of:

- Proof of Charity – Registered Charity number from the Charity Commission
- Proof of Charity address – Inland Revenue tax exemption documents
- Proof of identity for Trustees – please refer to the 'Businesses, Charities, Masjids & Madrasahs Proof of Identity' leaflet

Examples of identification evidence necessary where the organisation is a Club, Society, Study Group and Unincorporated Associate and Charities in Scotland and Northern Ireland

- Proof of Club/Society is not required
- Proof of identity for Trustees (a minimum of two is required) – please refer to the 'Businesses, Charities, Masjids & Madrasahs Proof of Identity leaflet

To complete our verification procedures and to comply with money laundering regulations please ensure you enclose the relevant documents and proof of identity we cannot process your application without this information.

Please refer to the 'Businesses, Charities, Masjids & Madrasahs Proof of Identity' leaflet for more information

SECTION K – WHAT TO DO NEXT

To complete our verification procedures and to comply with money laundering legislation please ensure you enclose the relevant documents and proof of identity, we cannot process your application without this information.

Tick to confirm

- | | | | |
|--|--------------------------|---|--------------------------|
| 1. Ensure you have completed and signed all relevant sections of the application form. | <input type="checkbox"/> | 4. Ensure you have enclosed all requested proof of identity documentation (please refer to the 'Businesses, Charities & Masjids Proof of Identity for guidance).* | <input type="checkbox"/> |
| 2. Ensure you have completed the 'User account access' form. | <input type="checkbox"/> | 5. Sample letterhead (if you use a trading name). | <input type="checkbox"/> |
| 3. Ensure you have ticked to indicate which account(s) you are applying to open. | <input type="checkbox"/> | 6. Completed Supplementary form if you are opening a Savings or Term Deposit Account. | <input type="checkbox"/> |

*The Bank may request further documents in order to process your application.

For Bank use only

Branch code

Branch staff name

Signature

Date

HO Processing staff name

Signature

Date

Manager name

Signature

Date

Al Rayan Bank PLC is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.
Our firm reference number is 229148. Incorporated and registered in England and Wales. Registration No. 4483430.
Registered office: 44 Hans Crescent, Knightsbridge, London, SW1X 0LZ.