



FCMB Bank (UK) Limited

Business Banking Application Form

FCMB Bank (UK) Limited
81 Gracechurch Street
London
EC3V 0AU

Guidelines for Completing this Application Form

Corporate Classification

A corporate sized business is any business that exceeds the below Micro and SME criteria for employees and turnover.

Micro, Small to Medium (SME) Company Classification

A Small to Medium Enterprise (SME)

An SME has a turnover of less than **€2m (or £ equivalent)**, and fewer than **10 employees**, or gross assets of less than **£12.5m**

Your Application Pack

Before filling or submitting this application, please make sure all the below items are included with this application.

Tick the boxes below to confirm you have been provided with;

1. Business General Terms and Conditions
2. FSCS Information Sheet & Exclusions
3. Key Product Features
4. Tariff Guide
5. Data Privacy Statements

Speak to your Relationship Manager if you have questions about any of these items.

Product Type

Please indicate the product type, and the currency denomination and ensure you have received and reviewed the respective Product Features

Current Account	GBP	USD	EUR
Instant Savings Account (for SMEs Only)	GBP	USD	EUR
35 Days' Notice Accounts	GBP	USD	EUR
65 Days' Notice Accounts	GBP	USD	EUR
95 Days' Notice Accounts	GBP	USD	EUR
Fixed Deposit Account	GBP	USD	EUR

Before you fill this application, please provide details of your company's profile as requested below (in £GBP);

The company's annual Turnover:

The value of the company's assets:

The number of the company's employees:

Submitting Your application

For Micro and or SME sized business

By Post, Email or Walk-In
Personal and Business Banking
FCMB Bank (UK) Limited
81 Gracechurch Street
London
EC3V 0AU
pbb@fcmbuk.com

For Corporate sized business

By Post, Email or Walk-In
Corporate and Institutional Banking
FCMB Bank (UK) Limited
81 Gracechurch Street
London
EC3V 0AU
cib@fcmbuk.com

or Walk-In
Lagos Liaison Office
FCMB Bank (UK) Limited
38 Adeola Hopwell Street
Victoria Island,
Lagos, Nigeria

Call us if you have questions

United Kingdom: 44 (0) 207 220 1054
Nigeria: 234 (0) 1 271 3926

Application Requirements

The below requirements apply to directors, shareholders, controllers, partners, sole traders and signatories

Proof of Identity (UK Residents)

We require an original, or *certified copy of any one of the below documentations.

- Valid International Passport
- Valid Photo Card Driving License
- Firearms Certificate
- Residency Permit Card

Proof of Address (UK Residents)

We require an original, or *certified copy of any one of the below documentations.

- Council Tax Invoice (No more than 3 months old)
- Valid Photo Card Driving Licence (if not already provided as Proof of Identity).
- Bank / Building Society Statement (No more than 3 months old)
- Recent utility bill (issued within the last 3 months) excluding mobile phone bills.
- HMRC Tax notification (no more than 3 months old).

Proof of Identity and Address (Non-UK Residents)

- Valid International Passport or
- Driving Licence (Photo card)
- Bank / Building Society Statement (No more than 3 months old) and or
- Recent utility bill (in your name issued within the last 3 months) excluding mobile phone bills.

Please speak to your Relationship Manager if you have questions

*Acceptable certified documents, must be certified "to be a true certified copy of the original", stamped, signed dated (within 3 months) and the certifiers name included by either a Lawyer / Solicitor, Notary Public or a Senior Officer of FCMB Nigeria.

The below are a list of our minimum requirements for on-boarding businesses

Company Information

We will require additional documentation or proof relating to

- Certificate of Incorporation
- Partnership Agreement
- Trust Deed
- Companies House registration documents (Memo & Art)
- Registration forms (for appointments)
- Details of any Trading As names
- Registration date
- Business start date
- Registration number
- Business correspondence address and or Trading address
- Business registered address
- Contact details
- Previous banking information
- Nature of the business' activity(ies)
- Number of employees, turnover and assets
- Country of operations
- Tax Identification Number / Tax Registration Number
- Authorised signatories
- Last 3 Year Financial statements
- Board resolution (see section 3)
- Register of shareholders
- Corporate structure and ultimate beneficial owners
- Register of directors
- The company's latest bank statements (covering the last 3 months)

Section 1 - Business Details

Please provide as much information about the business and its structure in this section

Please confirm if the business activity includes

Tick the relevant box below confirming this business is a

Limited Company:

Sole Trader / Proprietorship:

Partnership:

Public Liability Company:

Charity / Trust / Religious Org:

Non-Governmental Organisation:

Financial Institution:

Import:

Export:

Both:

Neither:

Business Name (Sole Trader / Proprietorship):

Entity Name (Registered):

Entity Trading Name (if any):

Entity Registration Number:

Country of Registration:

Date of Registration:

Business Start Date:

Registered Address:

Trading Address:

Correspondence Address:

Nature of the Business' Activity:

List all countries which the Business operates or conducts transactions with, or prospecting to do business with, (including any import and or export arrangements) and or remit or receive funds from:

We would like to know the value of transactions you anticipate, will flow through the account

Please provide in \$USD (where applicable):

How much is the anticipated annual turnover? :

How many transactions per month would this equate to? :

What is the maximum anticipated amount per transaction? :

Please provide reasons for wanting to open an account with FCMB Bank (UK) Limited:

Ultimate Beneficial Owners

Please list the the Ultimate Beneficial Owners and or Principal Shareholders with more than 10% ownership or share allocation

Full Individual Name or Entity Name	Title / Position	Share%
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
		Total Share %:

Accountant Information

Firm Name:

Contact Name:

Firm Address:

Firm Email:

Firm Contact Number:

Current Banker's Information

Bank Name:

Bank (Branch) Address:

Time with the Bank:

Controllers* and Directors

Please list the controllers and / or directors

Full Name (including middle names)

Title / Position / Capacity

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.

Controllers* or Controlling Person is a natural person who exercises control over an entity

Business Declaration

Regulations based on the OECD Common Reporting Standard ("CRS") and Foreign Account Tax Compliance Act ("FATCA") require FCMB Bank (UK) Limited to collect and report certain information about an account holder's tax residency. If your tax residence (or the account holder, if you are completing the form on their behalf) is located outside the United Kingdom, we may be legally obliged to pass on the information in this form and other financial information with respect to your financial accounts to Her Majesty's Revenue and Customs (HMRC) or the tax authorities in the country where your company may be located.

FCMB Bank (UK) Limited are not qualified to give tax advice. If you have any questions about the form, these instructions, or defining your tax residency status, please speak to your tax adviser or local tax authority. You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested, on the OECD automatic exchange of information portal.

TIN / GIIN Number

The company's Tax Identification Number (TIN) and or Global Intermediary Identification Number (GIIN) and or any other Tax Identification number (If applicable).

Country of Domicile **Tax Number (TIN/GIIN/UTR):**

Declaration and Signature:

I understand that the entity, _____ is making an application to FCMB Bank (UK) Limited for banking services. I confirm that the details contained above are true and complete to the best of my belief and information.

Should any of the details change, or should my involvement in the entity change in any material way, I shall inform FCMB Bank (UK) Limited immediately. I further understand that FCMB Bank (UK) Limited may make a credit reference search and/or searches on other data bases for fraud prevention, anti-money laundering and sanctions/embargos for the purpose of assessing this application for opening account. I am aware that the credit reference/fraud prevention agencies may record any searches, and other lenders may use this record when assessing a credit application from me or any member of my household. By signing this application I give my consent to these searches being made by FCMB Bank (UK) Limited or its authorised entity.

I understand that the information supplied by me is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with FCMB Bank (UK) Limited "the Bank" setting out how the Bank may use and share the information supplied by me.

I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be reported to Her Majesty's Revenue and Customs (HMRC) and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information with the United Kingdom.

- I certify that I am authorised to sign for the Account Holder in respect of all the account(s) to which this form relates.
- I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.
- I undertake to advise the Bank within 30 days of any change in circumstances which affects the tax residency status of the Account Holder identified in this form or causes the information contained herein to become incorrect. This includes any changes to the information on Controlling Persons and to provide the Bank with a suitably updated self-certification and Declaration within 60 days of such change in circumstances

Full Name:

Position:

Date:

Signature:

Note:: If you are signing as a Power of Attorney, please attach a certified copy of the power of attorney or an Original

Section 2 - Personal Details

This section must be completed by ALL Directors and Principal Shareholders of the entity.

FATCA and Information Exchange: Individual Self-Certification and Declaration

UK regulations require the collection of information regarding an account holder's tax residency and citizenship. Therefore, please complete the relevant questions below and provide the information requested. Please note that we may be required to share this information about you with the relevant tax authorities.

Regulations based on the OECD Common Reporting Standard ("CRS") and Foreign Account Tax Compliance Act ("FATCA") require FCMB Bank (UK) Limited to collect and report certain information about an account holder's tax residency. If your tax residence (or the account holder, if you are completing the form on their behalf) is located outside the United Kingdom, we may be legally obliged to pass on the information in this form and other financial information with respect to your financial accounts to Her Majesty's Revenue and Customs (HMRC) or the tax authorities in the country where your company may be located.

As a Bank, we are not allowed to give tax advice. If you have any questions about the form, these instructions, or defining your tax residency status, please speak to your tax adviser or local tax authority. You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested, on the OECD automatic exchange of information portal.

Personal Details

Title: _____ **Surname:** _____ **Other Name(s):** _____

Date of Birth (dd/mm/yy): _____ **Gender:** _____ **Nationality:** _____

Town of Birth: _____ **Country of Birth:** _____

Country(ies) of Citizenship: _____

Contact Email: _____

Contact Number(s): _____

Please provide details originals or a clear certified copy of your identity document with its photo card

Passport No: _____ **Expiry Date::** _____ **Issuing Country:** _____

Driving License No:/L: _____ **Expiry Date:** _____ **Issuing Country:** _____

Residential Address

We will require an in-date proof of your Residential Address in your name and within 3 months (See the front page of this Application for our requirements).

Domicile Address

Your domicile address is a location where you may live part-time or full-time, it is your legal address, but located in the jurisdiction where you pay taxes.

Residential Address 1

Domicile Address

Time at address: _____

If you have spent less than 3 Years at this address, please use the below continuation to provide address your address history up to the last 3 Years

Time at address: _____

Residential Address (Continuation) 1

Residential Address (Continuation) 2

Time at address: _____

Time at address: _____

[Continue on the next page](#)

Declaration of US citizenship or US residence for tax purposes

Please tick either (A) or (B) or (C) and complete as appropriate.

A - I confirm that I am a US citizen and/or resident in the US for tax purposes (green card holder or resident under the substantial presence test) and my US federal taxpayer identifying number (US TIN) is as follows:

B - I confirm that I was born in the US (or a US territory) but I am no longer a US citizen as I have voluntarily surrendered my citizenship as evidenced by the attached documents.

C - I confirm that I am not a US citizen or resident in the US for tax purposes.

Complete this section, if you have non-US tax residences.

Declaration of tax residence (other than US)

I hereby confirm that I am, for tax purposes, resident in the following countries (indicate the tax reference number type and number applicable in each country).

Country of Domicile: **Tax Identification Number (TIN):**

Please tick a reason from the below box, if you are unable to provide a Tax Identification Number (TIN) or any further information on your TIN status

- **Reason A** - The country where the account holder is tax resident does Not issue TINs to its residents
- **Reason B** - The account holder is otherwise unable to obtain a TIN or equivalent number
- **Reason C** - No TIN is required.

If you have selected Reason B, please provide further information for selecting this reason

Please confirm your Controlling Person's Status by ticking the appropriate box.

- a Controlling Person of a legal person – control by ownership
- b Controlling Person of a legal person – control by other means
- c Controlling Person of a legal person – senior managing official
- d Controlling Person of a trust – settlor
- e Controlling Person of a trust – trustee
- f Controlling Person of a trust – protector
- g Controlling Person of a trust – beneficiary
- h Controlling Person of a trust – other
- i Controlling Person of a legal arrangement (non-trust) – settlor-equivalent
- j Controlling Person of a legal arrangement (non-trust) – trustee-equivalent
- k Controlling Person of a legal arrangement (non-trust) – protector-equivalent
- l Controlling Person of a legal arrangement (non-trust) – beneficiary-equivalent
- m Controlling Person of a legal arrangement (non-trust) – other-equivalent

Please sign the applicable Declarations on the next page

Application Declaration

I understand that the entity _____, is making an application to FCMB Bank (UK) Limited for banking services. I confirm that the details contained herein above are true and complete to the best of my belief and information. Should any of the details change, or should my involvement in the entity change in any material way, I shall inform FCMB Bank (UK) Limited immediately.

I further understand that FCMB Bank (UK) Limited may make a credit reference search and/or searches on other data bases for fraud prevention, anti-money laundering and sanctions/embargos for the purpose of assessing this application for opening account. I am aware that the credit reference/fraud prevention agencies may record any searches, and other lenders may use this record when assessing a credit application from me or any member of my household.

By signing this application I give my consent to these searches being made by FCMB Bank (UK) Limited or its authorised entity.

Full Name:

Position:

Date:

Signature:

Individual Self-Declaration

- I understand that the information supplied by me is covered by the full provisions of the Business General Terms and Conditions governing the Account Holder's relationship with FCMB Bank (UK) Limited "the Bank" setting out how the Bank may use and share the information supplied by me.
- I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be reported to Her Majesty's Revenue and Customs (HMRC) and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information with the United Kingdom.
- I certify that I am the Controlling Person, or am authorised to sign for the Controlling Person, of all the account(s) held by the entity Account Holder to which this form relates.
- I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.
- I undertake to advise the Bank within **30 days** of any change in circumstances which affects the tax residency status of the Account Holder identified in this form or causes the information contained herein to become incorrect. This includes any changes to the information on Controlling Persons and to provide the Bank with a suitably updated self-certification and Declaration within **60 days** of such change in circumstances.

Full Name:

Position:

Date:

Signature:

Note: If you are signing as a Power of Attorney, please attach a certified copy of the power of attorney or an Original

Controllers* or Controlling Person is a natural person who exercises control over an entity

Section 3 - Board Resolution

Appointment of Banker and Mandate to FCMB Bank (UK) Limited

(the company) at a meeting held on _____, where it was resolved

that FCMB Bank (UK) Limited (the Bank); is appointed as the Company's bankers and authorised to cancel all existing mandates (if any) on the Company's behalf, except in relation to items and instructions dated prior to the Bank's receipt of this authority in which case; the previous authority will apply.

1. FCMB Bank (UK) Limited (the Bank) is authorised to open an account in the name of the Company and to debit the Company's accounts with cheques, payment orders and bills of exchange; and to comply with instructions including those relating to safe custody items, whether or not the Company's accounts become overdrawn or overdrafts are increased by doing so. Such items or instructions must be signed on the Company's behalf by (tick the applicable combination below and in accordance with the Signatory list provided below).

A- any one signatory

B - any two signatories

C - other (specify below)

Specify others if C is selected (Provide details below including, Full name, Position and sign off arrangements)

2. The Bank has the right to refuse to allow, permit to increase, overdrafts on the Company's accounts, and may require additional documentation from the Company for some services or facilities.

3. Tick here to request for the internet banking services for the Account opened / to be opened for the company.

4. The Company accepts the Bank's Business General Terms and Conditions, and stipulation laid down by the Bank from time to time for the purpose. It was resolved, that such appointment and authorisation having regard of all relevant matters, is in the best commercial interest of the Company. It is also agreed by the Company that, any debt incurred to the Bank, or other liability incurred in the course of business with the Bank under this mandate shall, in the absence of written agreement by the Bank to the contrary, be repayable on demand. The Company will supply and keep updated with the Bank as and when necessary with list of persons authorised to sign, given receipts and act on behalf of the Company, and that the Bank may rely upon such lists (**Annexure A**).

5. These resolutions be communicated to the bank and remain in force until changed by a resolution passed by the board of directors and a copy, certified by the Chairman and Secretary, is received by the Bank.

6. The Company will ensure it transacts, manages and maintains dealings with the Accounts opened for business dealings.

7. This authority is to apply to all existing and future accounts that the Company maintains with the Bank until varied by the Company.

We confirm that the above is an accurate statement of the resolution(s) passed at the meeting.

Chairman / Director

Full Name:

Date:

Signature:

Company Secretary / Director

Full Name:

Date:

Signature:

Annexure - A

Authorised Signatory List

Title:
Full Name:
Date of Birth:
Position:
Contact Number:
Email Address: Specimen Signature & Date

Title:
Full Name:
Date of Birth:
Position:
Contact Number:
Email Address: Specimen Signature & Date

Title:
Full Name:
Date of Birth:
Position:
Contact Number:
Email Address: Specimen Signature & Date

Title:
Full Name:
Date of Birth:
Position:
Contact Number:
Email Address: Specimen Signature & Date

Title:
Full Name:
Date of Birth:
Position:
Contact Number:
Email Address: Specimen Signature & Date

This must be accompanied by the Board Resolution (section 3)

Indemnity Form For Fax, Electronic or Telephone Communications

(Optional)

At a meeting of the Board of Directors of

(the "Company"), held on

It was resolved that:-

1. FCMB Bank (UK) Limited, (referred to as the "Bank" hereafter) be requested and authorised to accept and act upon instructions delivered orally by telephone or by facsimile or other electronic means (including by way of email) and purporting to be given for and on behalf of the Company from the following individuals: (insert details below)

Title	Full name(s)	Surname	View Only	Instruct Only
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In consideration of the Bank agreeing to rely upon instructions delivered as aforesaid, it was further resolved that the Company enter into a funds transfer instruction (the "Funds Transfer Instruction") in favour of the Bank and that the Company expressly discharge the Bank from any liability arising from having carried out such instructions pursuant to the Funds Transfer Instruction.

2. The Company assumes all the risks implied by giving instructions under the Funds Transfer Instruction in the manner described at resolution 1 above and, in particular, to the risk of error in transmission, mistake or identification errors, and fully discharge the Bank from any liability for the same.

3. The Company accepts that the Bank at its sole discretion may from time to time use electronic devices to record any or all telephone instructions. In the event of any dispute as to the content or veracity of any instruction, it was further resolved that the Company acknowledge and accept that the contents of any such recording shall be conclusive and that the Bank's understanding of any oral instructions, including any tape thereof shall be binding upon the Company.

We confirm that the above is an accurate statement of the resolution(s) passed at the meeting.

Chairman / Director

Full Name:

Date:

Signature:

For

Company Secretary / Director

Full Name:

Date:

Signature:

Checklist

Please review the checklist to ensure you have understood this application requirements, filled the sections and provided the supporting documentation

1. Completed all applicable **Business Details** sections (review page 4)
2. Provided details of the **Share holding structure** (review page 5)
3. Provided **details of all Controllers and Directors** (review page 6)
4. Completed the **Business Declarations** (review page 7)
5. Completed the individual application **Declarations** for the owners and controllers (review page 10)
6. Completed the individual **Tax Declarations** for the owners and controllers (review page 10)
7. Provided **Proof of Address** for all owners and controllers (review supporting documentation)
8. Included, **Proof of Identity** for all owners and controllers (review supporting documentation)
9. Signed the **Business General Terms and Conditions** (review attached terms and conditions)
10. Received, read and understood the **FSCS Information Sheet and Exclusions** (review attached Application pack items)
11. Completed the **Board Resolution** and the **Signatory List** (review page 11 and 12)
12. Included supporting documentation e.g 3 Year Financial, Certificate of Incorporation, Memorandum and Articles of Association, Register of Shareholders and directors (review supporting documentation)