

# **Power of Attorney/Deputyship Application Form**

AA Savings Accounts provided by Bank of Ireland UK

ALL SECTIONS MARKED WITH A \* MUST BE COMPLETED. Please write in BLOCK CAPITAL LETTERS with BLACK INK inside the boxes

If you are applying for a new account as a Power of Attorney, please review our website which contains all of the product information that you need to know about before applying, you must read the Terms and Conditions, Deposit Information Sheet and the Summary Box. This form can also be used for the appointment of a Power of Attorney after the account is open. Please also review the back of this form, where you will find some useful guidance notes.

account is open. Please also review the back of this form, where you will find some use	endi guidance notes.	
1. Account Details		
If you are applying for a new AA Savings product on behalf of the donor please fill in <b>Section 1A</b> and <b>Sections 2 - 7</b> , stating the account name and AA membership number (if applicable). If the donor already has an account with us and is adding you to the account to act on their behalf, please fill out <b>Section 1B</b> , stating their existing account number. You will also need to complete <b>Sections 3, 4 and 7</b> .		
Section 1A  Name of account being applied for*  Issue No.*  AA membership number (if applicable)	Section 1B Existing Account Number	
2. Donor's Details (please complete using Donor's current residential address – all correspondence will be redirected to the Representative)		
Title* Date of birth* Gender*  D D M M Y Y Male / Female M / F  First name(s)*	Country of birth*  Country of nationality*	
Middle Name  Surname*  Flat number/House number/House name*	Which of the following do you currently receive?* (Select all that apply).  A. Existing savings/lump sum  E. Rental income/money from property sale  B. Salary/bonuses  F. Inheritance/money from family/known person  C. Pension income/lump sum  G. State benefits  D. Investment income/lump sum  H. Gift (Please specify source below)	
Street*  Town and County*  Postcode*	From the answers above, which of these will be the main source of deposits you make to your new account?* (Write in the letter from the answer given).  Do you receive income from outside of the UK, EU, EEA, USA, Canada, Australia or New Zealand?*  If Yes, which country/Countries do you receive income from?	
How long have you been a UK resident?*  Less than 2 years  Between 2-3 years  3 years or more	(Write in all that apply).  What is your savings goal?* (Please tick only one option).	
Email address (55 characters maximum)*  Mobile phone number*  Home phone number*	Retirement House A rainy day For a big purchase (car, TV. etc) A special occasion (birthday/christmas) For my children/family Education Other (Please specify below)	
Mother's maiden name*	Are you a US citizen?* Yes No	
What is your employment status?*  Employed Self-empoloyed Unemployed  Retired Homemaker Student  Occupation and Employer's Industry?* (Only complete if Employed or Self-employed).	Are you a resident for tax purposes in any country other than the UK?*  If you have ticked "YES" to either of the last 2 questions please provide the following - without these you will not be able to open the account.  Tax Identification Number (Please write N/A if you do not have one)	
	3	

#### 3. Representative's Details Representative 1 Representative 2 Are you a solicitor/qualified person acting in a professional capacity?\* Are you a solicitor/qualified person acting in a professional capacity?\* If no, please specify your relationship to the Donor\* No No If no, please specify your relationship to the Donor\* Reason for acting on behalf of the donor, i.e: mental incapacity\* Reason for acting on behalf of the donor, i.e: mental incapacity\* Title\* Date of birth\* Title\* Date of birth\* Gender' Gender' Male / Female Male / Female First name(s)\* First name(s)\* Surname\* Surname\* Flat number/House number/House name\* Flat number/House number/House name\* Street\* Street\* Town and County\* Town and County\* Postcode\* Postcode\* How long have you been a UK resident? How long have you been a UK resident? Less than 2 years Between 2-3 years 3 years or more Less than 2 years Between 2-3 years 3 years or more Email address (55 characters maximum)\* Email address (55 characters maximum)\* Mobile phone number\* Mobile phone number\* Home phone number\* Home phone number\* Mother's maiden name\* Mother's maiden name\* What is your employment status?\* What is your employment status?\* Unemployed Employed Self-empoloyed Unemployed Employed Self-empoloyed Retired Homemaker Student Retired Homemaker Student Occupation and Employer's Industry?\* (Only complete if Employed or Self-employed). Occupation and Employer's Industry?\* (Only complete if Employed or Self-employed). Country of birth\* Country of birth\* Country of nationality\* Country of nationality\* Which of the following do you currently receive?\* (Select all that apply). Which of the following do you currently receive?\* (Select all that apply). A. Existing savings/lump sum E. Rental income/money from property sale A. Existing savings/lump sum E. Rental income/money from property sale F. Inheritance/money from family/known person B. Salary/bonuses F. Inheritance/money from family/known person B. Salary/bonuses C. Pension income/lump sum G. State benefits C. Pension income/lump sum G. State benefits H. Gift (Please specify source below) D. Investment income/lump sum H. Gift (Please specify source below) D. Investment income/lump sum Do you receive income from outside of the UK, EU, EEA, USA, Do you receive income from outside of the UK, EU, EEA, USA, Canada, Australia or New Zealand? Canada, Australia or New Zealand?\* If Yes, which country/Countries do you receive income from? (Write in all that apply). If Yes, which country/Countries do you receive income from? (Write in all that apply). Are you a US citizen?\* Yes No Are you a US citizen?\* Yes No Are you a resident for tax purposes in any Are you a resident for tax purposes in any Yes No Yes No country other than the UK? country other than the UK? If you have ticked "YES" to either of the last 2 questions please provide the If you have ticked "YES" to either of the last 2 questions please provide the following - without these you will not be able to open the account. following - without these you will not be able to open the account. Tax Identification Number Tax Identification Number Tax residency (Please write N/A if you do not have one) Tax residency (Please write N/A if you do not have one) 2 2 3 3

4. Correspondence		
Please advise who's contact	details are to be used for correspondence (please select	one): Representative 1 Representative 2
5. Initial deposit (new accounts only)		
Amount of initial deposit*	£ p (Min £1	00)
Method of payment* (Please tick one box)	Transfer from an eligible  AA Savings account (Fill in account details below)	Linked Account
Transfer from an eligible AA	Savings account (excluding AA ISA)  Account Type	Account holder's name
6. Linked Account Details (new accounts only)		
To keep the donor's money safe we will link their AA savings account to a UK Bank or Building Society account in their name.  All deposits must be made from this account. We are unable to accept deposits from any other account.  All withdrawals will be sent back to this account.		
Account holder's name*		Sort Code*
Bank or building society*		Account Number*
Reference		
7. Declaration and Your Signature		
Before signing and applying for this product, please ensure you have reviewed the website, Terms and Conditions, Summary Box and the FSCS Deposit Information Sheet.  Your data: We are required by money laundering regulations to verify your identity and address, which we will do by searching files at credit reference agencies. If false or inaccurate information is provided and fraud is detected, details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information. We and other organisations may also access and use this information to prevent fraud and money laundering; for example, when: checking details on applications for credit and credit-relisted accounts or facilities; recovering debt; checking details on proposals and claims for all types of insurance, and; checking details of job applicants and employees. Please contact us at Fraud Prevention Unit, Group Services, 2nd Floor, 27-33 Baggot Plaza, Dublin 4 if you want to receive details of the relevant fraud prevention agencies. We and other organisations may access and use from other countries the information recorded by fraud prevention agencies. If you supply false or inaccurate information or if fraud is suspected this will be recorded by the credit referencing agency and shared with other similar organisations. When credit referencing agencies receive a search from us they will place a search footprint whether or not this applicant proceeds. We will give credit reference agencies other information about the day-to-day running of your account. We may use the information held by credit reference agencies to check identity for anti-money laundering and fraud purposes – this does not affect your credit history. We can provide, on request, a copy of the information that credit references have about you, or copies of their leaflets that explains how credit referencing works.  Please read all the information you have been given and the Terms and Conditions carefully as it is important that you understand them. If yo		
Date / /		Date / / / / / / / / / / / / / / / / / / /
What to do next		
Return the completed applications or a certified original co		nent appointing you as a Representative. This should be the original

### **Useful guidance notes**

We want to make the process of acting on behalf of someone else as simple as possible. These guidance notes are designed to help you, but please contact us if you need further help. As you'd expect we can only give information on our processes and cannot provide advice.

What is needed to Open / Operate an Account as a Power of Attorney:

- · This registration form
- Identification for all parties (Donor and Attorneys) please note we'll always try and electronically identify people using Credit Reference Agencies. If we are unable to do this we'll write to you asking for suitable ID&V
- · An original or certified copy of the relevant Power of Attorney/authority document

Before the Account can be opened / operated we'll need to have received acceptable documents and identification.

### **ENGLAND & WALES**

Lasting Power of Attorney – This document will need to be registered with the Office of Public Guardian before it can be used. Once registered please send to: Freepost AA SAVINGS along with this registration form.

Enduring Power of Attorney - Please send to: Freepost AA SAVINGS along with this registration form.

If the Donor no longer has mental capacity to manage their own affairs we would remind you that it is the responsibility of the Attorneys to register the Power of Attorney with the Office of Public Guardian before attempting to act on behalf of the Donor. If there is any doubt about whether the Donor has sufficient mental capacity you should seek the advice of a medical professional.

## **SCOTLAND**

Continuing Power of Attorney - This document will need to be registered with the Office of Public Guardian before it can be used. Once registered please send to: Freepost AA SAVINGS along with this registration form.

Combined Power of Attorney – this document combines Continuing Power of Attorney with the authority for the Attorney to make decisions about the Donor's welfare. This document will need to be registered with the Office of Public Guardian before it can be used. Once registered please send to: Freepost AA SAVINGS along with this registration form.

#### NORTHERN IRELAND

Enduring Power of Attorney - Please send to: Freepost AA SAVINGS along with this registration form.

If the Donor no longer has mental capacity to manage their own affairs we would remind you that it is responsibility of the Attorneys to register the Enduring Power of Attorney with the Office of Care and Protection before attempting to act on behalf of the Donor. If there is any doubt about whether the Donor has sufficient mental capacity you should seek the advice of a medical professional.

### **Further information**

Please note – other forms of authority are available. If you are intending to act under authority of a document that is not referred to above, please complete this form, provide identification and a certified copy of the relevant document and we'll contact you if we need any further information.

Further information about Power of Attorney and your responsibilities can be found at:

England & Wales – https://www.gov.uk/power-of-attorney/overview

https://www.gov.uk/government/organisations/office-of-the-public-guardian

Scotland – http://www.publicguardian-scotland.gov.uk/power-of-attorney

Northern Ireland – http://www.courtsni.gov.uk/en-GB/Services/OCP/Pages/default.aspx https://www.nidirect.gov.uk/articles/managing-your-affairs-and-enduring-power-attorney