



Bank of St. Helena Ltd.

[www.sainthelenabank.com](http://www.sainthelenabank.com)

# NEW LIFE SAVINGS ACCOUNT APPLICATION FORM



@sainthelenabank



Bank of St Helena Ltd

**Head Office: Market Street · Jamestown · St Helena Island · STHL 1ZZ**

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Established and regulated in St Helena under the Financial Services Ordinance, 2008 and 2017, the Financial Services Regulations, 2017, the Company Ordinance, 2004 and the Company Regulations, 2004

## BEFORE YOU APPLY

### Terms and Conditions

Customers applying for a Bank of St Helena Ltd Account MUST agree to and meet, where required, the relevant Terms and Conditions of the Account and all Services utilised in the operation of the Account.

### Supporting documentation

When you apply for a Bank of St Helena Account, the Bank is required to verify your identity and residential address. Applicants are therefore required to provide supporting documentation as proof.

### About the Bank of St Helena New Life Savings Account

Bank of St Helena New Life Accounts are available to help save for at retirement age. The investment is paid out when you reach 60 or 65 years, depending on the opted account maturity. Deposits can be made in any amount at any time.

Applicants must be 18 or over to apply.

Annual interest of 4% is accumulated on New Life Savings Accounts (rates subject to change).

### Completing the Savings Account Opening Form

*Please be advised this Application can be completed and submitted online.*

For assistance with an Account Openings please contact the Customer Service Section. Completed application forms should be returned, via any Bank of St Helena Branch, to the Customer Service Section, Bank of St Helena, Market Street, Jamestown, St Helena Island.

**SECTION 1: CHOSEN AGE FOR ACCOUNT EXPIRATION:**

Aged 60 Years		Aged 65 Years	
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**SECTION 2: ACCOUNT HOLDER DETAILS**

2.1. PERSONAL DETAILS	
Title:	
First Name:	
Middle Name:	
Last Name:	
Gender:	
Date of Birth:	
Marital Status: (please tick)	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorce <input type="checkbox"/> Widowed
Nationality:	
Please detail any Dual Nationality:	

2.2. PRIMARY ADDRESS	
House Name and/or Number	
Address Line 1	
Address Line 2	
Address Line 3	
Post Code	
Country	

2.3. DETAILS OF ANY PREVIOUS ADDRESS WITHIN THE LAST 3 MONTHS	
House Name and/or Number	
Address Line 1	
Address Line 2	
Address Line 3	
Post Code	
Country	

2.4. COMMUNICATION (PLEASE COMPLETE ALL FIELDS THAT ARE APPLICABLE)			
<b>Contact Name:</b> (name of the individual to receive bank communications, if different to the account holder listed in section 2.1. customers should note third party individuals receiving account information or documentation must be authorised to do so)			
<b>Telephone</b>	<b>Home:</b>	<b>Work:</b>	<b>Mobile:</b>
<b>Email:</b>			
<b>Communications Preference</b> - Please select your preferred form of contact from the Bank*:			
<input type="checkbox"/> Telephone	<input type="checkbox"/> Mobile	<input type="checkbox"/> Email*	<input type="checkbox"/>

\*Please note some Bank information will be sent to you via email (e.g. Online Banking outages, new St Helena Pay businesses)

### 2.5. EMPLOYMENT AND INCOME DETAILS

Employed	<input type="checkbox"/>	Unemployed	<input type="checkbox"/>
Self-Employed	<input type="checkbox"/>	Other (please specify)	

Employer / Organisation Name:			
If Contracted, please detail length of Contract and end date:			
Address Line 1:			
Address Line 2:			
Address Line 3:			
Post Code:			
Country:			
Job Title:			
Salary (please tick if appropriate)	<input type="checkbox"/>	Pension: (please tick if appropriate)	<input type="checkbox"/>
Any other Source of Income (please tick if appropriate)	<input type="checkbox"/>		

### 2.6. SUPPORTING DOCUMENTATION

#### Proof of identification

Individuals holding St Helenian Status are required to provide a valid passport or a copy of their birth certificate and verification of current and past postal address (if applicable).

Individuals without St Helenian Status will be required to provide a current Passport for photo identification, verification of current and past postal address (if applicable) and proof of long term stay on either St Helena or Ascension Island e.g. Letter of Employment, Contract, etc.

Please note where an applicant's name differs to that shown on a Birth Certificate or Valid Passport, proof of name change must be provided. E.g. Marriage Certificate or Gazette Publication.

(PLEASE INDICATE BELOW WHICH DOCUMENTATION HAS BEEN PROVIDED)

Proof of identity (Applicable for all Account Holders)	
Birth Certificate	<input type="checkbox"/>

Valid Passport	<input type="checkbox"/>
Certification of Status (if applicable)	<input type="checkbox"/>
Other e.g. Marriage Certificate ( <i>PLEASE SPECIFY</i> )	<input type="checkbox"/>

<b>Confirmation of address</b> (All Account opening customers)	
Utility bill (for current and past address)	<input type="checkbox"/>
Tax bill	<input type="checkbox"/>
Other ( <i>PLEASE SPECIFY:</i> )	<input type="checkbox"/>

### 2.7. OTHER BANK ACCOUNTS

Please List Other Accounts (if any now or previously held) with Bank of St Helena Ltd held individually, jointly or for a Minor.

*Please tick to indicate other accounts on which you would like card services. Should customers wish to have Cards associated with any of these accounts, please note that a one-off fee, per card associated account, will apply.*

Account Name	Account Number	Card Account (✓)

### 2.8. EXPECTED LEVEL OF CREDIT

Please specify the anticipated amount to be deposited at any one time into the savings account e.g. £20 per month.

<b>Average credit amount:</b>	<input type="text"/>
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## SECTION 3: ACCOUNT PACKAGE

Your Premium Account Package will allow you access to the account via your Online Banking feature. Allowing you to monitor the account at your convenience.

Please specify here details of your existing **INDIVIDUAL** account package below:

ACCOUNT PACKAGE	DETAILS
Account Number	<input type="text"/>
Account Name	<input type="text"/>
Package	<input type="text"/>
	Online Banking <input type="checkbox"/>
Include this new Account in Online Banking	<input type="checkbox"/>

**Customers with Online Banking will not receive print or emailed statements.**

<b>REGULAR STATEMENTS</b>	<i>(BY TICKING AN OPTION BELOW, YOU INDICATE THAT YOU WISH TO RECEIVE A REGULAR STATEMENT ON YOUR NEW LIFE ACCOUNT, AND DO NOT HAVE ONLINE BANKING)</i>	
Bank Statements will primarily be distributed using the email you have provided in Section 2.4. Please tick one of the following:		
• Email Statement to the email listed in section 2.4		<input type="checkbox"/>
• I do not have an email address (further options will be discussed)		<input type="checkbox"/>
• Collection from a Bank of St Helena Branch		<input type="checkbox"/>

(Please note additional statements are subject to fees charged automatically to the primary account. See the Bank's Rates, Fees and Charges for more information). Customers will not receive a Statement if this section is incomplete.

**SECTION 4: DECLARATION**

<b>I hereby confirm that:</b>		
1. the above details are correct and complete;		<input type="checkbox"/>
2. I have read and accepted the applicable Terms & Conditions for this account, and will operate the account in accordance with these Terms & Conditions, as set by the Bank of St Helena Ltd.		<input type="checkbox"/>
3. I understand and agree that should I opt for the Bank of St Helena Ltd.'s Online Banking Service that I have read and accept the applicable Terms & Conditions for Online Banking and any subsequent products or services, and will operate the Online Banking Account in accordance with these Terms & Conditions as set by Bank of St Helena Ltd.		<input type="checkbox"/>
4. I will promptly notify the Bank of any changes in the above details.		<input type="checkbox"/>
<b>Name:</b>		
<b>Date:</b>		
<b>Signature:</b>		

MEASURES TO PREVENT CRIMINAL ACTIVITY: Bank of St. Helena Ltd reserves the right to conduct business in a manner which allows it to meet local and international obligations with regard to the prevention of criminal activities, including money laundering. Therefore, please note that: you may be asked to explain, and provide evidence to support that explanation, any transaction you request the bank to conduct on your behalf, or any transaction the bank has conducted on your behalf; the bank may decline to conduct a transaction on your behalf, without giving a reason; and the bank may be required to report any transaction you request it to conduct, whether or not it has agreed to conduct it, to the appropriate authorities, as required in the applicable legislation. The bank will attempt to minimise the impact of these requirements on its conduct of your transactions, and requests your cooperation in the operation of these procedures.

**SECTION 5: FOR BANK USE ONLY**

Application Received	Signature		Date	
Application Entered	Signature		Date	
Recommendation for Account				
Approval of Application by Senior Management Team Member		Date		
		Signature		

AML Screening Number Allocation Account Opening	AML Screening			
	Client Number			
	Account Number			
	Date			
	Signature			
Processing Checklist	Chart of Account		Date	
	Overdraft		Signature	
	Online Banking			
Standing Order	Seq #		Date	
	Initial		Signature	

Account Verified by Customer Service Manager	Date			
	Signature			
Customer Contacted	Date			
	Signature			
Account Activated	Date			
	Signature			
Application Completed	Date			

Identity Verification (tick as appropriate):		
<input type="checkbox"/>	Existing customer - give Account number(s)	
<input type="checkbox"/>	By documents (attach copies)	

**ACCOUNTS WILL NOT BE ACTIVATED UNTIL SIGNED, ORIGINAL DOCUMENTATION IS RECEIVED BY THE BANK.**



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