

SECTION B – PERSONAL DETAILS – FIRST AUTHORISED OFFICIAL – TO BE COMPLETED IN ALL CASES

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

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

If Dual Nationality Passport Number (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 dependent children

Address

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

Postcode/Zipcode

Date moved to address

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. If you have had more than two previous addresses, please attach details on a separate sheet of paper.

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

Postcode/Zipcode

Date moved to address

Chairperson & Secretary should initial and date each page:

Initial Date

Ver1.05/05 2 of 12

Second previous address

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

Postcode/Zipcode

Date moved to address M M Y Y Y Y

Your Home Details

Are you: Owner occupier Joint owner If you own your home please give:
 Living with parents Tenant furnished Estimated value of your home £ Mortgage Outstanding £
 Tenant unfurnished Council tenant Name of Lender
 Other

Employment

Only complete if you have other paid employment.

Employment status: Senior Management Management/Professional Supervisor Skilled Semi Skilled Unskilled Junior Other

Employment type: Employed Self-employed professional Self-employed non-professional Homemaker Student Retired Part time
 Temporary Employment Unemployed Other

If you are in employment/self-employed please complete

Employer's Name

Business Address

Postcode/Zipcode Employer's Tel No. Incl STD

Work Email Address

Nature of Employer's Business

Occupation

Date employment commenced D D M M Y Y Y Y

Have you ever been declared bankrupt? Yes No

Existing customer details

If you are an existing customer of Islamic Bank of Britain, 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 of this application form.

Signed Date

PERSONAL DETAILS – SECOND AUTHORISED OFFICIAL

Additional users to the account will be subject to KYC/Identification checks pursuant to money laundering legislation.

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

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

If Dual Nationality Passport Number (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 dependent children

Address

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

Postcode/Zipcode

Date moved to address

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. If you have had more than two previous addresses, please attach details on a separate sheet of paper.

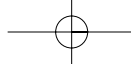
(Non UK residents, please state your country of residence)

Postcode/Zipcode

Date moved to address

Chairperson & Secretary should initial and date each page:

Initial Date



Second previous address

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

Postcode/Zipcode

Date moved to address M M Y Y Y Y

Your Home Details

Are you: Owner occupier Joint owner If you own your home please give:
 Living with parents Tenant furnished Estimated value of your home £ Mortgage Outstanding £
 Tenant unfurnished Council tenant Name of Lender
 Other

Employment

Only complete if you have other paid employment.

Employment status: Senior Management Management/Professional Supervisor Skilled Semi Skilled Unskilled Junior Other

Employment type: Employed Self-employed professional Self-employed non-professional Homemaker Student Retired Part time
 Temporary Employment Unemployed Other

If you are in employment/self-employed please complete

Employer's Name

Business Address

Postcode/Zipcode Employer's Tel No. Incl STD

Work Email Address

Nature of Employer's Business

Occupation

Date employment commenced D D M M Y Y Y Y

Have you ever been declared bankrupt? Yes No

Existing customer details

If you are an existing customer of Islamic Bank of Britain, please provide your account details.

Account Number

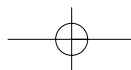
Account Number

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 of this application form.

Signed Date



PERSONAL DETAILS – THIRD AUTHORISED OFFICIAL

Additional users to the account will be subject to KYC/Identification checks pursuant to money laundering legislation.

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

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

If Dual Nationality Passport Number (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 dependent children

Address

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

Postcode/Zipcode

Date moved to address

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. If you have had more than two previous addresses, please attach details on a separate sheet of paper.

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

Postcode/Zipcode

Date moved to address

Chairperson & Secretary should initial and date each page:

Initial Date

Second previous address

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

Postcode/Zipcode

Date moved to address M M Y Y Y Y

Your Home Details

Are you: Owner occupier Joint owner If you own your home please give:
 Living with parents Tenant furnished Estimated value of your home £ Mortgage Outstanding £
 Tenant unfurnished Council tenant Name of Lender
 Other

Employment

Only complete if you have other paid employment.

Employment status: Senior Management Management/Professional Supervisor Skilled Semi Skilled Unskilled Junior Other

Employment type: Employed Self-employed professional Self-employed non-professional Homemaker Student Retired Part time
 Temporary Employment Unemployed Other

If you are in employment/self-employed please complete

Employer's Name

Business Address

Postcode/Zipcode Employer's Tel No. Incl STD

Work Email Address

Nature of Employer's Business

Occupation

Date employment commenced D D M M Y Y Y Y

Have you ever been declared bankrupt? Yes No

Existing customer details

If you are an existing customer of Islamic Bank of Britain, 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 of this application form.

Signed Date

PERSONAL DETAILS – FOURTH AUTHORISED OFFICIAL

Additional users to the account will be subject to KYC/Identification checks pursuant to money laundering legislation.

Personal

Title Mr Mrs Ms Miss Dr Other (Please state)

First Name

Middle Name

Surname/Last Name

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

If Dual Nationality Passport Number (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 dependent children

Address

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

Postcode/Zipcode

Date moved to address

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. If you have had more than two previous addresses, please attach details on a separate sheet of paper.

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

Postcode/Zipcode

Date moved to address

Chairperson & Secretary should initial and date each page:

Initial Date

Second previous address

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

Postcode/Zipcode

Date moved to address M M Y Y Y Y

Your Home Details

Are you: Owner occupier Joint owner If you own your home please give:
 Living with parents Tenant furnished Estimated value of your home £ Mortgage Outstanding £
 Tenant unfurnished Council tenant Name of Lender
 Other

Employment

Only complete if you have other paid employment.

Employment status: Senior Management Management/Professional Supervisor Skilled Semi Skilled Unskilled Junior Other

Employment type: Employed Self-employed professional Self-employed non-professional Homemaker Student Retired Part time
 Temporary Employment Unemployed Other

If you are in employment/self-employed please complete

Employer's Name

Business Address

Postcode/Zipcode Employer's Tel No. Incl STD

Work Email Address

Nature of Employer's Business

Occupation

Date employment commenced D D M M Y Y Y Y

Have you ever been declared bankrupt? Yes No

Existing customer details

If you are an existing customer of Islamic Bank of Britain, 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 of this application form.

Signed Date

SECTION C – PRODUCTS AND SERVICES

Please indicate by ticking the box(es) which product(s) you are applying for.

Current Account Savings Account Term Deposit Account* Treasury Deposit Account* £1,000 cash reserve (Qard Hasan)

If you are enclosing a cheque(s) for deposit into your new account(s) please state amount £

These products are subject to our **Masjid/Madrasah 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 case of Savings Accounts and Term Deposit Accounts please also complete the supplementary Savings and Term Deposit Account Form.

*To open a Term Deposit Account or Treasury Deposit Account you will need to open a Current Account and/or Savings Account.

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

Payment of gross profit share

You may be able to receive your profit share 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. Confirmation of your tax status may be required from your local tax office to satisfy us that profit may be paid gross. If you are eligible, please confirm how you wish to receive your profit by ticking the appropriate box below:

Net Gross

Your profit share will be paid into your savings account. If you would like your profit share to be paid into a different Islamic Bank of Britain account, please tell us when your account(s) have been opened.

SECTION E – HOW DID YOU HEAR ABOUT ISLAMIC BANK OF BRITAIN?

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

SECTION F – 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 Masjid/Madrasah

Title First Name
 Surname/Last Name
 Position Signature
X
 Your signature must not go outside the box.

Title First Name
 Surname/Last Name
 Position Signature
X
 Your signature must not go outside the box.

Title First Name
 Surname/Last Name
 Position Signature
X
 Your signature must not go outside the box.

Title First Name
 Surname/Last Name
 Position Signature
X
 Your signature must not go outside the box.

Chairperson & Secretary should initial and date each page:

Initial Date

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 wish to have more than four signatories please complete the 'Additional Signatories' form. For a copy of this form call 0845 6060 786, visit your local branch or download this form from our website www.islamic-bank.com

Please complete the 'User access level' form and return with this application form, stating the level of access required for each signatory to the account.

SECTION G – CORRESPONDENCE – ALL ACCOUNTS

Correspondence will be sent to the contact name given on page 1, at the Masjid/Madrasah address. If you would like to have your correspondence addressed to someone else, please specify below.

Name

Alternative correspondence address

Postcode/Zipcode

DATA PROTECTION & MARKETING SECTION

The information in relation to data protection provided below will apply to any individuals from whom personal data is obtained and processed in connection with this application or the operation of the account applied for

This is applicable for each individual authorised official

Your Information – credit reference and fraud prevention agencies

We will make searches about you at credit reference agencies who will supply us with information including credit information and information from the electoral register, for use in the assessment of credit products and for verifying your identity. The agencies will record details of the search type, credit or identification, whether or not this application proceeds. We may use credit scoring methods to assess this application and to verify your identity. Credit searches and other information which is provided to us and/or the credit reference agencies, about you, and those with whom you are linked financially may be used by Islamic Bank of Britain and other companies if credit decisions are made about you, or other members of your household. Any of this information may also be used for identification purposes, debt tracing and the preventing of money laundering as well as the management of your account.

We will check your details with a fraud prevention agency/agencies and if you give us false or inaccurate information and we suspect fraud, we will record this.

We and other organisations may use and search these records to:

- help make decisions about credit and credit related services, for you and members of your household;
- help make decisions on motor, household, credit, life and other insurance proposals and insurance claims, for you and members of your household;
- trace debtors, recover debt, prevent fraud, and to manage your accounts or insurance policies;
- check your identity to prevent money laundering, unless you furnish us with other satisfactory proof of identity.

By stating a financial association with another party, you are also declaring that you are entitled to:

- Disclose information about your joint applicant and/or anyone else referred to by you;
- Authorise us to search, link and/or record information at credit reference agencies about you and/or anyone else referred to by you.

Information held about you by the credit reference agencies may already be linked to records relating to one or more of your partners. For the purposes of this application you may be treated as financially linked and your application will be assessed with reference to any "associated records".

The information which we and other lenders provide to the credit reference agencies about you, your financial associates and your business (if you have one) may be supplied by credit reference agencies to other organisations and used by them to:

- Verify your identity if you or your financial associate applies for other facilities including all types of insurance applications and claims.
- Make credit decisions about you, your partner, other members of your household or your business.
- Trace your whereabouts and recover payment if you do not make payments that you owe.
- Conduct checks for the prevention and detection of crime including fraud and/or money laundering.
- Manage your personal, your partner's and/or business account (if you have one). Undertake statistical analysis and system testing.

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 Data Protection Act 1998.

You have the right of access to your personal records held by credit and fraud agencies. We will supply the names and addresses upon request. You may obtain this information by telephoning us on **0845 6060 786**.

You have a right, on payment of a fee, to receive a copy of the information we hold about you if you apply to us in writing.

Use of your information

The information on this form may be used by us or any other carefully selected organisation for statistical analysis or for marketing purposes such as identifying other products and services which may be of interest to you. These may be offered by letter, telephone, email, fax or other electronic media by the Bank, its associates or other carefully selected organisations and companies.

If you would like to receive information on our other products and services, please tick below:

Current Account Savings Account Term Deposit Account Home Finance Masjid Finance Treasury Deposit Account

For marketing purposes, please tick how you would like to be contacted Post Telephone Email SMS

If you do not wish to receive marketing information please tick this box

SECTION H – IDENTIFICATION

Identification

To open an account with Islamic Bank of Britain please refer to our Business 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 the Masjid/Madrasah. We will inform you of what information we

will require from you. Examples of identification include but are not limited to evidence of your Masjid/Madrasah's name and address and Committee minutes or equivalent document authorising the opening of the account.

For existing customers, we will only need verification of your name.

SECTION I – DECLARATION & SIGNATURE

Declaration 1

To be completed in all cases. The two signatures must be completed by different people.

- 1. It has been resolved that Islamic Bank of Britain be appointed to act as our bankers for the account applied for in this form.
- 2. Islamic Bank of Britain is authorised to accept this application form as binding on the Masjid/Madrasah, provided that the form is signed on our behalf.

Signed by:

Signature of Chairperson

Your signature must not go outside the box.

Date

- 3. We confirm that the above form is an accurate record of what was resolved at the meeting, held on

Date

- 4. We confirm that the authorised officials named in this application form have the relevant authority to act on behalf of the Masjid/Madrasah in the opening and operating of these accounts.

Signature of Secretary

Your signature must not go outside the box.

Date

Declaration 2

Only to be completed if the Masjid/Madrasah is a charity. The two signatures must be completed by different people.

- 1. I declare that the account(s) applied for is/are not a relevant deposit as defined in section 481 of the Income and Corporation Taxes Act 1988. (We may confirm your tax status with your local tax office to ensure that your profit share may be paid gross).

Authorised Signatory

Your signature must not go outside the box.

Capacity in which signed

Date

- 2. I declare that the Masjid/Madrasah is a charity and so is exempt under section 505(1) of the Income and Corporation Taxes Act 1988.
- 3. I undertake to inform you immediately, if the taxation status of the Masjid/Madrasah changes.

This declaration should be signed by a director, secretary or chairperson or by a person authorised to sign on behalf of the Masjid/Madrasah.

Authorised Signatory

Your signature must not go outside the box.

Capacity in which signed

Date

Declaration 3

To be completed in all cases. The two signatures must be completed by different people.

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 Masjid/Madrasah you represent and personally, on your own behalf.

- 1. 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 Islamic Bank of Britain with a copy of the Committee resolution or equivalent document.

- 2. We confirm that we have read and understood and agree to the information contained in this form.
- 3. We confirm that we understand that the account applied for will be governed by the Masjid/Madrasah Banking Terms and Conditions and any other special terms notified to you (a copy of which we have received) and we agree to be bound by those terms.
- 4. We confirm that the information contained in this application is true and correct.
- 5. We authorise Islamic Bank of Britain PLC to operate banking services in accordance with the mandate.

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

Your signature must not go outside the box.

Date

Signature of Secretary

Your signature must not go outside the box.

Date

For and on behalf of (insert name of Masjid/Madrasah)

SECTION J – 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 all relevant sections of the application form.
- 2. Ensure you have completed the 'User account access' form.

- 3. Ensure you have ticked to indicate which account(s) you are applying to open.
- 4. Ensure you have enclosed all necessary proof of identity documentation (please refer to the 'Business Proof of Identity' leaflet).
- 5. Sample letterhead (if you use a trading name).

For Bank use only

Branch Code

Branch Staff Name

Signature

Date

HO Processing Staff Name

Signature

Date

Manager Name

Signature

Date

Chairperson & Secretary should initial and date each page:

Initial Date