



Fixed Rate Saver

Application Form

How to complete the form	1		
Please use a BLACK pen	2 Mark boxes like this — If you make a mistake, d and mark the correct bo	o this LETTERS	e BLOCK CAPITAL A 2 and leave one ween each word
Sort Code	Account number		
About you:			
Applicant 1		Applicant 2 (if applicable)	
Title (Mr, Mrs, Miss, Ms, other)		Title (Mr, Mrs, Miss, Ms, other)	
First name		First name	
Other name		Other name	
Surname		Surname	
Home address		Home address	
Post code		Post code	
Marketing Options: From time to time, AIB Group would third parties. Please tell us below if these preferences, you may contact	you are happy for us to contac		
Applicant 1			
By phone Yes No	By post Yes No	By email Yes No	
Applicant 2 By phone Yes No	By post Yes No	By email Yes No	

Tax Reporting – Customer Information Notice

Financial institutions in the UK are required under legislation to seek answers to certain questions for the purpose of identifying those accounts, the details of which are reportable to HM Revenue & Customs ('HMRC') who may exchange these details with other tax authorities in relevant jurisdiction(s). This legislation incorporates the United States Foreign Account Tax Compliance Act (FATCA) and the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard (CRS).

All relevant sections of this form must be completed. If customers do not provide all of the information requested, we may not be able to proceed with opening the new account until the relevant information is provided.

Please note that we are unable to offer tax advice. For tax related questions and/or further information please contact your professional tax advisor or HMRC at https://www.gov.uk/government/collections/automatic-exchange-of-information-agreements. Customers must promptly advise us if their tax residence changes.

Are you a US Citizen? Yes No	Are you a US Citizen? Yes No
(if you have answered yes to the US Citizen question please include the United States as one of the countries below)	(if you have answered yes to the US Citizen question please include the United States as one of the countries below)
Where are you a tax resident? (Where you are tax resident in any jurisdiction other than the UK, you are required to provide the corresponding Tax Identification Number (TIN) (if any) for each jurisdiction)	Where are you a tax resident? (Where you are tax resident in any jurisdiction other than the UK, you are required to provide the corresponding Tax Identification Number (TIN) (if any) for each jurisdiction)
Tax Identification Number (TIN)	Tax Identification Number (TIN)
Savings Instruction:	
Reason for opening an account	
Anticipated turnover £ p.a.	
Source of initial deposit	
Ongoing source of funds	
Amount Term	
Terms	available: 6, 12 & 24 months.
I/We authorise AIB (NI) to debit the following account	
Sort code Account number	Amount
IMPORTANT	

IMPORTANT:

If you know what you would like to do with your funds at the end of your investment term (Maturity), you can complete this section now. Alternatively, you can change your Maturity instructions at any time during the term of your account until close of business on the Business Day before your account is due to mature.

Please ensure that your Maturity instructions are accurate and complete. If your Maturity instructions are inaccurate or incomplete, or the funds in your account fall below the required minimum balance, or there is a conflict in your Maturity instructions, we may open up a Select Deposit Account for you and transfer the balance of your account to the new account.

Auto-reinvestment - If you do not give us Maturity instructions, at Maturity, your funds will be automatically reinvested in your Account for a further term at the applicable interest rate (subject to retaining the required minimum balance in your account).

Part 1: At maturity I/we wish to choose (please tick)

, , , , , , ,	
1. Full Reinvestment	
Reinvest all funds for the same term	nvest all funds for a different term*
* Ple	ase complete Part 2 – Reinvestment Details
2. Partial Withdrawal	
a) Withdraw a specified amount and reinvest the balance*	
	2. Deliverate part line and Deat 2. Decreased Deat 1.
Amount of *Please complete Part	2 – Reinvestment Details and Part 3 – Payment Details
b) Withdraw Interest and reinvest the balance*	
*Please complete Part 2 – Reinvestment Details and Part 3 – Payment Details	
c) Withdraw Interest and a specified amount and reinvest the bala	nce*
In addition to Interest, I would like to withdraw a specified amount	of
*Please complete Part 2 – Reinvestment Details and Part 3 – Payment Details	
NB: Minimum reinvestment balance is £5,000	
3. Full Withdrawal and Close	
	a Camplete Part 2 Payment Patails
Withdraw all funds and close my account Pleas	e Complete Part 3 – Payment Details
Part 2: Reinvestment Details *At Maturity, if your instruction is to reinvest all or a por	tion of the funds, please tick period of investment:
Please select from the following terms 6 Months	12 Months 2 Years
Part 3: Payment Details	
Please transfer my funds to the following AIB (NI) account	
Account Name	
Sort code Account number	
Signing Instruction:	
I/We, the customer(s) named above	
1. Hereby request you open and keep a Fixed Rate Saver in my/our r Fixed Rate Saver Terms & Conditions and have been given the opp	
by them (Note: Please take the time to read the Terms & Condition	
understand any point please ask for further information).	
Understand that completion of this application does not impose as Saver in my/our names.	n obligation upon First Trust Bank to open a Fixed Rate
3. Accept that if I/we do not amend my/our Maturity instruction befo	re the Maturity date that my/our funds will be reinvested
for the same or lesser term at the applicable interest rate for reinve	
4. Have considered my/our short term needs and have retained suffi	· ·
5. Understand that no withdrawals before the Maturity date are pern	
6. Understand that should interest rates rise I/we will not be able to a	avail of such rise until maturity.
7. I/We acknowledge receipt of the Financial Services Compensation S	Scheme (FSCS) Depositor Information Sheet / Exclusion List.
For Joint Account holders, the signing instruction is "either of us".	
WARNING TO JOINT ACCOUNT HOLDERS: If you instruct the Bank to funds in the Account may be withdrawn or reinvested without the known	
Applicant 1 signature	Date
	Day Month Year
Applicant 2 signature	Date
	Day Month Year
	Say Mondi Ical

For bank use only			BANK Information only
Designated Referral Code	Sort Code	Account number (if applicable)	
Applicant 1			
Source of Income & Wealth			
Applicant 2 Source of Income			
& Wealth			
Account 1 Account Title			
Account Title			
Account Short Name			
Product Code			
Product Name			
Purpose & Reason for Opening			
Origin of Funds			
Turnover			
Account 2 Account Title			
Account Short Name			
Product Code			
Product Name			
Purpose & Reason			
for Opening			
Origin of Funds			
Turnover			

For bank use only BANK Information only

Other information If the answer to any of the following	questions is 'Yes' then a Personal Risk	Assessment must be comp	oleted.
Was the customer born or is a reside be high risk?	nt in a geographic area considered to	Yes	No
Was the customer NOT met face to f	ace?	Yes	No
Will payments be received from unkn	nown or un-associated third parties?	Yes	No
What is the anticipated term of the re	elationship?	One off transaction	Ongoing
Is Customer a Politically Exposed Per	rson/RCA?	Yes	No
Risk Classification		Standard	Non Standard
If existing customer is there a change (If Yes new PAT and Trigger event for	m attached)	Yes	No
Does the CDD flag on customer prof	ile match the risk assessment above?	Yes	No
Customer Type			
BoE Class			
Sector			
Sector Group			
Sector Sub Group			
Sector Code			
Is the customer an existing business	account holder	Yes	No No
Confirm that Summary Box been had	nded to customer (if applicable)	Yes	No No
ID/POA Held/Received		Yes	No No
Equifax Search Completed		Yes	No No
All documents provided to customer	including FSCS Information Sheet & Exc	clusions List Yes	No No
Select Account Required		Yes	No
Signed off by (Staff no)	ocation (Branch/Department) Signa	ture	Date
			Day Month Year

By signing this I confirm that all the above is correct and where necessary documents attached, confirm that they are accurate and complete.



Information correct as at October 2023

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Customer Information Section

You will need to read and retain these pages



Protected

Financial Services Compensation Scheme – Depositor Information Sheet



Basic information about the protection of your eli	gible deposits
Eligible deposits in AIB Group (UK) p.l.c. are protected by:	the Financial Services Compensation Scheme ("FSCS") ⁽¹⁾
Limit of protection:	£85,000 per depositor per bank ⁽²⁾ Your bank, AIB Group (UK) p.l.c., operates under license as AIB (NI) in Northern Ireland and Allied Irish Bank (GB) and Allied Irish Bank (GB) Savings Direct in Great Britain
If you have more eligible deposits at the same bank:	All your eligible deposits at the same bank are "aggregated" and the total is subject to the limit of £85,000. $^{(2)}$
If you have a joint account with other person(s):	The limit of £85,000 applies to each depositor separately. ⁽³⁾
Reimbursement period in case of bank's failure:	20 working days ⁽⁴⁾
Currency of reimbursement:	Pound sterling (GBP, £)
To contact AIB Group (UK) p.l.c for enquiries relating to your account	AIB Group (UK) p.l.c (trading as AIB (NI)) 92 Ann Street, Belfast, BT1 3HH 0345 6005 925 [†] aibni.co.uk [†] Call charges may vary – refer to your service provider
To contact the FSCS for further information on compensation:	Financial Services Compensation Scheme 10th Floor Beaufort House, 15 St Botolph Street, London, EC3A 7QU Tel: 0800 678 1100 or 020 7741 4100 Email: ICT@fscs.org.uk

Additional information

More information:

Scheme responsible for the protection of your deposit

Your eligible deposit is covered by a statutory Deposit Guarantee Scheme. If insolvency of your bank should occur, your eligible deposits would be repaid up to £85,000 by the Deposit Guarantee Scheme.

(2) General limit of protection

If a covered deposit is unavailable because a bank is unable to meet its financial obligations, depositors are repaid by a Deposit Guarantee Scheme. This repayment covers a maximum of £85,000 per bank. This means that all eligible deposits at the same bank are added up in order to determine the coverage level. If, for instance a depositor holds a savings account with £80,000 and a current account with £20,000, he or she will only be repaid

This method will also be applied if a bank operates under different trading names. AIB Group (UK) p.l.c. also trades under AIB (NI) in Northern Ireland and Allied Irish Bank (GB) and Allied Irish Bank (GB) Savings Direct in Great Britain. This means that all eligible deposits with one or more of these trading names are in total covered up to £85,000.

In some cases eligible deposits which are categorised as "temporary high balances" are protected above £85,000 for six months after the amount has been credited or from the moment when such eligible deposits become

legally transferable. These are eligible deposits connected with certain events including:

http://www.fscs.org.uk

- (a) certain transactions relating to the depositor's current or prospective only or main residence or dwelling;
- (b) a death, or the depositor's marriage or civil partnership, divorce, retirement, dismissal, redundancy or invalidity;
- (c) the payment to the depositor of insurance benefits or compensation for criminal injuries or wrongful conviction.

More information can be obtained under http://www.fscs.org.uk

(3) Limit of protection for joint accounts

In case of joint accounts, the limit of £85,000 applies to each depositor.

However, eligible deposits in an account to which two or more persons are entitled as members of a business partnership, association or grouping of a similar nature, without legal personality, are aggregated and treated as if made by a single depositor for the purpose of calculating the limit of £85,000.

(4) Reimbursement

The responsible Deposit Guarantee Scheme is the Financial Services Compensation Scheme, 10th Floor Beaufort House, 15 St Botolph Street, London, EC3A 7QU, Tel: 0800 678 1100 or 020 7741 4100, Email: ICT@fscs.org.uk. It will repay your eligible deposits (up to £85,000) within 20 working days until 31 December 2018;

within 15 working days from 1 January 2019 until 31 December 2020; within 10 working days from 1 January 2021 to 31 December 2023; and within 7 working days from 1 January 2024 onwards, save where specific exceptions apply. Where the FSCS cannot make the repayable amount available within 7 working days, it will, from 1 June 2016 until 31 December 2023, ensure that you have access to an appropriate amount of your covered deposits to cover the cost of living (in the case of a depositor which is an individual) or to cover necessary business expenses or operating costs (in the case of a depositor which is not an individual or a large company) within 5 working days of a request. If you have not been repaid within these deadlines, you should contact the Deposit Guarantee Scheme since the time to claim reimbursement may be barred after a certain time limit. Further information can be obtained under http://www.fscs.org.uk.

Other important information

In general, all retail depositors and businesses are covered by Deposit Guarantee Schemes. Exceptions for certain deposits are stated on the website of the responsible Deposit Guarantee Scheme. Your bank will also inform you of any exclusions from protection which may apply. If deposits are eligible, the bank shall also confirm this on the statement of account.

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Financial Services Compensation Scheme – Exclusions List



Protected

A deposit is excluded from protection if:

- (1) The holder and any beneficial owner of the deposit have never been identified in accordance with money laundering requirements. For further information, contact your bank, bank building society or credit union.
- (2) The deposit arises out of transactions in connection with which there has been a criminal conviction for money laundering.
- (3) It is a deposit made by a depositor which is one of the following:
 - credit institution
 - financial institution
 - investment firm
 - insurance undertaking
 - reinsurance undertaking
 - collective investment undertaking
 - pension or retirement fund⁽¹⁾
 - public authority, other than a small local authority.
- (4) It is a deposit of a credit union to which the credit union itself is

- (5) It is a deposit which can only be proven by a financial instrument⁽²⁾ unless it is a savings product which is evidenced by a certificate of deposit made out to a named person and which existed in the *UK*, *Gibraltar* or a Member State of the EU on 2 July 2014.
- (6) It is a deposit of a collective investment scheme which qualifies as a small company. $^{(3)}$
- (7) It is a deposit of an overseas financial services institution which qualifies as a small company.⁽⁴⁾
- (8) It is a deposit of certain regulated firms (investment firms, insurance undertakings and reinsurance undertakings) which qualify as a small business or a small company⁽⁵⁾ refer to the FSCS for further information on this category.
- (9) It is not held by an establishment of a bank, building society or credit union in the UK or, in the case of a bank or building society incorporated in the UK, it is not held by an establishment in Gibraltar

For further information about exclusions, refer to the FSCS website at www.FSCS.org.uk

- (1) Deposits by personal pension schemes, stakeholder pension schemes and occupational pension schemes of micro, small and medium sized enterprises are **not** excluded
- (2) As listed in Part I of Schedule 2 to the Financial Services and Markets Act 2000 (Regulated Activities) Order 2001, read with Part 2 of that Schedule
- ⁽³⁾ Under the Companies Act 1985 or Companies Act 2006
- (4) See footnote 3
- (5) See footnote 3