

GUERNSEY COMMUNITY SAVINGS LBG

New Customer Introduction Form – Agency (FINAL 15.6.20)

Name of referring agency (eg Social Security, Probation Service etc)	
Full Name of Introduced Customer	First Name: Middle Name(s): Surname:
Residential Address	
Post Code	
Email (if available/known)	
Mobile Phone (if available/known)	
Date and Place of Birth	
Nationality	
Occupation if known (including name of employer if applicable). If self-employed provide details	

Referring Agency/Introducer's Contact Details	
Address	
Individual's Name/Position	
Contact Telephone	
Email	

On behalf of the Referring Agency/Introducer ("Agency") we hereby confirm that to the best of our knowledge and belief the above introduced person is deemed suitable to open an account with Guernsey Community Savings ("GCS") for the limited purpose of access to the basic banking and debit card services GCS is able to arrange.

The information provided above accurately reflects the information held by us on this individual and is provided purely for your information when considering a New Customer Application from this named person. We understand that the proposed customer will discuss account opening and operational matters with a GCS Customer Service Officer and will undertake to abide by any terms and conditions GCS may impose on the operation of the account at any time.

We are advised that Guernsey Community Savings LBG is registered with the Guernsey regulator, the Guernsey Financial Services Commission ("GFSC"), as a Non-Regulated Financial Services Business, and as such is subject to all controls required to prevent customer accounts being used for money laundering, terrorism financing and all forms of criminal activity. As part of these controls we understand that the customer will be required to provide GCS with relevant documents to verify their identity (such as a passport, photo driving licence, etc) and their residential address (for instance, a utility bill showing their address). Whilst this is a matter for GCS to discuss with the customer directly, we will be pleased to assist where possible. We undertake to keep GCS apprised of any changes to the information contained within this Introduction Form and of other information relevant to the maintenance of an account with GCS by the introduced customer without delay so far as such changes or information are within our knowledge from time to time.

Note: full details of actual requirements will be discussed with the GCS Customer Service Officer when the account opening is being considered.

We can advise that the introduced customer has authorised us to share their above personal information with GCS for the sole purpose of operating this and any other accounts they may open from time to time. We understand and acknowledge that GCS will hold this personal data securely and in accordance with all of the provisions of the Data Protection (Bailiwick of Guernsey) Law, 2017 as amended from time to time.

Signature _____

Full Name _____

Date _____