

Head Office: 15 Queen Square, Bath, BAT ZHN. Tel: (01225) 423271		
Application to open SSAS Account in the name of:	PTJ Pension Scheme	
Address for correspondence: C/o Pension Practitioner, Office 12, Venture Wales Building, Pentrebach Merthyr Tydfil		
	Postcode: CF48 4DR	
Scheme number: N/A		
HMRC Reference number: 00798844RJ	Date of registration: 16/04/2013	
the account), Paul Booth (Member Trustee Please provide a copy of the names and sample signato Scheme's trustees.	ory to the account), Ivan Bennett (Member Trustee and signatory to e only) and Tracy Jane Booth (Member Trustee only) ries of all those who will be authorised signatories of the	
Members details:		
Member 1	Member 2	
Name: Ann Bennett	Name: Ivan Bennett	
Address: 137 Hodge Clough Road	Address: 137 Hodge Clough Road	
Oldham	Oldham	
Lancashire	Lancashire	
Postcode: OL1 4PX	Postcode: OL1 4PX	
Date of birth: 14 Sep 1969	Date of birth: 09 Oct 1966	
National Insurance Number: NS383788B	National Insurance Number: NM244890C	
Member 3	Member 4	
Name: Paul Booth	Name: Tracy Jane Booth	
Address: 3 Bentgate Close	Address: 3 Bentgate Close	
Newhey	Newhey	
Rochdale, Lancashire Postcode: OL16 4NB	Rochdale, Lancashire Postcode: OL16 4NB	
	Postcode: OL16 4NB Date of birth: 01-Mar-1964	
Date of birth: 07-Jul-1964 National Insurance Number: NB803783B	National Insurance Number: NE420499D	
	I.	
Tax Residency: Please confirm that all members are resident for tax purposes only in the UK and are citizens only of the UK Yes No. If no, please request and complete a separate tax residency form.		
4. The Scheme members wish to open the following account: (Indicate as appropriate)		
Instant access x 6 month Fixed Term Deposit		
90 Day notice 12 month Fixed Term Depo	osit	
The exercise of any options under the Terms and Conditions of the plan must be authorised by the requisite		
number of trustee authorised signatories set out in the Scheme's governing documentation or, where a number is not stipulated, by at least one authorised signature. Where there is a change to authorised signatories please notify Bath Building Society in writing giving the date of change.		
Instructions for withdrawal must be authorised by ONE of TWO signatories. Please provide details of the names		
and sample signatories below of all those who will be authorised signatories of the Scheme's trustees.		
Declaration:		
In signing below I (each of us if more than one is applying	g) confirm I/we understand that the personal information and	
account details may be:	•	
Used to open my account; provide the services I request; dea	al with enquiries I make or authorise to be made regarding	
my account.		
Used for market research purposes, developing products and maintaining a customer profile.	l services, statistical business analysis, and creating and	
Disclosed to appropriate regulatory authorities (including regulators of voluntary codes of practice), auditors, any other		
body having legal right to the information, or anyone I appo	-	
Disclosed to third party processors to transmit and collect m	oney, investigate complaints, distribute statements and rate	

change notices, resolve IT issues, develop and test new software, and for auditing purposes.

Used to check my identity to ensure Bath Building Society meets money laundering regulations.

Used to make a search with a credit reference agency that will supply Bath Building Society with information, including information from the Electoral Register, for the purpose of verifying my identity and address. The agencies will record details of the search whether or not my application proceeds. The searches will not be seen or used by lenders to assess my ability to obtain credit. Credit searches and other information that is provided to us and/or the credit reference agencies, about me and anyone with whom I am linked financially may be used by Bath Building Society and other companies if I, or other members of my household, apply for other facilities including insurance applications and claims. This information may also be used for debt tracing and the prevention of money laundering as well as management of my account. Further checks of this type may be carried out throughout the course of my account.

Used to identify me when I communicate with the Society about my account.

The Society has not provided me with advice in relation to my choice of account. I have made a choice relating to my personal circumstances.

Confirmation:

I/we confirm that I/we have read and agree to the Terms and Conditions for the relevant account.

I/we agree to be bound by the Society's Rules (copies provided on request) and the Share and Deposit Account General Terms and Conditions.

I/we have read a copy of the Bath Building Society Privacy Notice and am/are aware that a full version is available on request or by visiting www.bathbuildingsociety.co.uk

I/we consent to Bath Building Society accessing, processing and storing any personal information I/we provide for the purposes of providing me/us with payment services, such as faster payments, standing orders etc.

x I/We acknowledge that I/we have read the FSCS Information sheet and Exclusion Sheet

Signed on behalf of the Small Self Administered Scheme members and with their authority by:		
Name Ann Bennett	Signed	Date
Name Ivan Bennett	Signed	Date
Name N/A	Signed	Date
Name N/A	Signed	Date