

Pension Scheme Account Opening Request

Email to (preferred option): Partnership.Support@metrobank.plc.uk
Post to: The Manager, Partnership Support, Metro Bank PLC, One Southampton Row, London, WC1B 5HA (if enclosing a cheque, please use this option)

ype of Pension Sch e.g. SIPP, SSAS)	eme	Full Name of Pension Scheme			
SSAS		Brebur Ltd Pension Scheme			
Full Name of Pension	n Provid	ar			
Pension Pra	actitio	oner.Com, Daws House, 33-	35 Daws Lane	, London, NW7 4S	D
Full Name and Address of Professional Trustee (if different to Pension Provider)		Full Name and Address of Scheme Administrator (if different to Professional Trustee)			
N/A			N/A		
Are statements requ	number (Yes V No of the Pension Scheme?	If yes please provi	quired? by premiums/contributions? de Full Name and Address of Elion number (if applicable)	Yes No
	-	ND TRUSTEES			
First Scheme Me	mber	ID TRUSTEES	Email Address		
First Scheme Me	mber		Email Address Current Address	1 Pinfold Lane, M	
First Scheme Me Title (Mr, Mrs, Miss) First Name	Mr Jam		10 0:00 00:00	1 Pinfold Lane, M Methley, Leeds,	
First Scheme Me Title (Mr, Mrs, Miss) First Name Middle Name(s)	Mr Jam Mic	nie	10 0:00 00:00		
First Scheme Me Title (Mr, Mrs, Miss) First Name Middle Name(s) Surname	Mr Jam Mic Bre	nie hael	Current Address	Methley, Leeds,	
First Scheme Me Title (Mr, Mrs, Miss) First Name Middle Name(s) Surname Date of Birth	Mr Jam Mic Bre	nie hael nton 08/1976	Current Address Date moved in Are statements rec	Methley, Leeds,	LS26 9AA
2. MEMBER First Scheme Me Title (Mr, Mrs, Miss) First Name Middle Name(s) Surname Date of Birth Gender Nationality	Mr Jam Mic Bre	nie hael nton 08/1976	Date moved in Are statements recommend in this individual and its thing individual and its thin indiv	Methley, Leeds, quired? Member Trustee? n Authorised Signatory?	Yes No Yes No
First Scheme Me Title (Mr, Mrs, Miss) First Name Middle Name(s) Surname Date of Birth Gender Nationality	Mr Jam Mic Bre 05/0	nie hael nton 08/1976 e	Date moved in Are statements recommend in the statement of the statement	Methley, Leeds, quired? Member Trustee? In Authorised Signatory? required? You'r Access is available	US26 9AA ☐ Yes ✓ No ✓ Yes ☐ No
First Scheme Me Title (Mr, Mrs, Miss) First Name Middle Name(s) Surname Date of Birth Gender	Mr Jam Mic Bre 05/0 Mal	nie hael nton 08/1976 e	Date moved in Are statements recommend in the statement of the statement	Methley, Leeds, quired? Member Trustee? n Authorised Signatory? required?	Yes No Yes No

•	S DETAILS (continue	/			
Second Scheme					
Title (Mr, Mrs, Miss)	Mr	Email Add	iress		
First Name	Thomas	Current A	ddress*	Hoober Cottage	
Middle Name(s)				Rotherham, S62	2 /SA
Surname	Burke	Date move	ed in		
Date of Birth	05/03/1964	Are staten	nents req	uired?	Yes 🗸 No
Gender	Male	Is this indi	vidual a S	Scheme Member?	✓ Yes No
Nationality	British	Is this indi	vidual a N	Nember Trustee?	✓ Yes No
Country of Birth	UK	ls this indi	vidual an	Authorised Signatory?	✓ Yes No
Home Telephone Number Mobile Number			ote View (e phone i	equired? Only Access is available number and email address	✓ Yes No
MODILE NUMBER					
Third Scheme Me					
Title (Mr, Mrs, Miss)	Mrs	Email Add	ress		
First Name	Katherine	Current Ad	1 Pinfold Lane, Mic Methley, Leeds, LS		
Middle Name(s)				wictiney, Leeds,	L020 9AA
Sumame	Brenton	Date move	ed in		
Date of Birth	13/04/1975	Are staten	nents requ	uired?	Yes No
Gender	Female	Is this indi	vidual a S	Scheme Member?	✓ Yes No
Nationality	British	ts this indi	vidual a N	fember Trustee?	✓ Yes No
Country of Birth	UK	Is this indi	vidual an	Authorised Signatory?	✓ Yes No
Home Telephone Number		Is Online I (Please no and mobil	te View (equired? Only Access is available number and email address	✓ Yes No
Mobile Number		are require			
Forth Scheme Me	ember				
Title (Mr, Mrs, Miss)	Mrs	Email Add	ress		
First Name	Debra	Current Ac	idress*	Hoober Cottage	, Hoober,
Middle Name(s)				Rotherham, S62	2 7SA
Sumame	Burke	Date move	ed in		
Date of Birth	18/03/1966	Are statem	nents requ	uired?	Yes V No
Gender	Female	Is this indi	vidual a S	Scheme Member?	Yes No
Nationality	British	Is this indi	vidual a N	fember Trustee?	Yes No
Country of Birth	UK	Is this indi	vidual an	Authorised Signatory?	✓ Yes No
Home Telephone Number			te View (equired? Only Access is available number and email address	✓ Yes No
Mobile Number		are require		wid gillen addices	

Fitth Scheme Member Title (Mr., Mr.s., Miss) First Name Current Address* Current Address* Date moved in Date of Birth Ano statements required? yes No Is this individual a Scheme Member? yes No Nationality Is this individual a Member Trustee? yes No Is Online Banking required? yes No Is Online Banking required? yes No Mobile Number Sixth Scheme Member Title (Mr., Mrs., Miss) Email Address First Name Current Address* Surname Date moved in Date moved in Email Address Current Address* Surname Date moved in Date moved in Date moved in Surname Date moved in Date moved in Surname Date moved in Date moved in Surname Date moved in Date moved in Date moved in Surname Date moved in Date moved in Surname Date moved in Date moved in	2. TRUSTEES DETAILS (continued)		
First Name Current Address*	Fifth Scheme Member		
Middle Name(s) Sumame Date of Birth Are statements required? Yes No Is this individual a Scheme Member? Yes No Nationality Is this individual a Member Trustee? Yes No Is Online Banking required? Yes No Is Online Banking required? Yes No Sixth Scheme Member Title (Mr., Mrs., Miss) Email Address First Name Date moved in Are statements required? Yes No Sixth Scheme Member Title (Mr., Mrs., Miss) Email Address Current Address' Sumame Date moved in Are statements required? Yes No Is this individual a Scheme Member? Yes No Sumame Date moved in Sumame Date moved in Sumame Date of Birth Scheme Member? Yes No Nationality Is this individual a Scheme Member? Yes No Nationality Is this individual a Member Trustee? Yes No Is this individual a Member Trustee? Yes No Is this individual a Member Trustee? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? Yes No	Title (Mr, Mrs, Miss)	Email Address	
Date moved in Date moved in Pate of Birth Ano statements required? Yes No No Nationality Is this individual a Scheme Member? Yes No No Nationality Is this individual a Member Trustee? Yes No No Is Online Banking required? Yes No Is Online Banking required? Yes No No No No No No No N	First Name	Current Address*	
Date of Birth	Middle Name(s)		
State Stat	Sumame	Date moved in	
Nationality st this individual a Member Trustee? Yes No	Date of Birth	Are statements required?	Yes No
Nationality stris individual an Authorised Signatory? Yes No	Gender	Is this individual a Scheme Member?	Yes No
Is Online Banking required? Yes No	Nationality	ts this individual a Member Trustee?	Yes No
Sonline Banking required? Yes No		ts this individual an Authorised Signatory?	Yes No
Number Mobile Number Sixth Scheme Member Title (Mr, Mrs, Miss) Email Address Current Address* Middle Name(s) Surname Date moved in Date of Birth Are statements required? Yes No Gender Is this individual a Scheme Member? Yes No Nationality Country of Birth Is online Banking required? Yes No Is this individual an Authorised Signatory? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? Yes No		Is Online Banking required?	Yes No
Sixth Scheme Member Title (Mr, Mrs, Miss) First Name Middle Name(s) Surname Date of Birth Are statements required? Is this individual a Scheme Member? Yes No Nationality Sundana Statis individual a Member Trustee? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? Yes No No Solutional Scheme Member? Yes No Solutional Scheme Member Trustee? Yes No		and mobile phone number and email address	
First Name Current Address Current Address Middle Name(s) Date moved in Date of Birth Are statements required? Is this individual a Scheme Member? Yes No Nationality Locuntry of Birth No Is this individual an Authorised Signatory? Yes No Is this individual an Authorised Signatory? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? (Please note View Only Access is available	Mobile Number		
First Name Middle Name(s) Surname Date moved in Are statements required? Yes No Gender Is this individual a Scheme Member? Yes No Nationality Is this individual a Member Trustee? Yes No ts this individual an Authorised Signatory? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? Yes No (Please rate View Only Access is available)	Sixth Scheme Member		
Middle Name(s) Surname Date moved in Are statements required? Yes No Gender Is this individual a Scheme Member? Yes No Nationality to this individual an Authorised Signatory? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? Yes No Is Online Banking required? Yes No	Title (Mr, Mrs, Miss)	Email Address	
Surname Date moved in Are statements required? Yes No Gender Is this individual a Scheme Member? Yes No Nationality to the individual a Member Trustee? Yes No ts this individual an Authorised Signatory? Yes No Is Online Banking required? Yes No Reces note View Only Access is available	First Name	Current Address*	
Date of Birth Are statements required? Is this individual a Scheme Member? Yes No Nationality Is this individual a Member Trustee? Yes No Yes No Is this individual an Authorised Signatory? Yes No Is this individual an Authorised Signatory? Yes No Is Online Banking required? (Please note View Only Access is available	Middle Name(s)		
Gender Is this individual a Scheme Member? Yes No Nationality Is this individual a Member Trustee? Yes No Ves No	Surname	Date moved in	
Sender Is this individual a Scriente Wellick! Yes No	Date of Birth	Are statements required?	Yes No
Nationality Is this individual an Authorised Signatory? Yes No Country of Birth Is Online Banking required? (Rieses note View Only Access is available)	Gender	Is this individual a Scheme Member?	Yes No
Country of Birth Is this individual an Authorised Signatory? Yes No Is Online Banking required? (Research View Only Access is available)	Nationality	is this individual a Member Trustee?	Yes No
Is Online Banking required? Yes No		ls this individual an Authorised Signatory?	Yes No
Number ond amail address		(Please note View Only Access is available	Yes No
are required.)	Number	and mobile phone number and email address	
Mobile Number	Mobile Number		

. 3. CHOOSE YOUF	R ACCOUNT(S)	
VWe would like to open:	✓ A SIPP/SSAS Account Only	s a cheque book required
	A Fixed Term Savings Account and (please complete Section 4)*	d a SIPP/SSAS Account
*Please note a SIPP/SSAS	Account with Metro Bank is also require	d in order to open a Fixed Term Savings Account
4. YOUR FIXED TE	ERM DEPOSIT DETAILS	
Amount to be deposited		Term (months)
Funds to be deposited by:	Cheque made payable to the Pension S	Scheme
	Electronic transfer from another bank (account details to which funds are to the been opened)	be sent will be provided by Metro Bank once the SIPPISSAS Account has
5. MANDATE		
In this section you tell us	how many and which Authorised Sig	natories are required to operate this account.
Completion of this Mandat	te authorises Metro Bank to accept all in	nstructions given, or acts performed, in accordance with the "Our Service te on behalf of the Trustees of the Pension Scheme.
Please indicate the signing	instructions by ticking the appropriate bo	ox:
Member Trustee(s) and	d Professional Trustee(s) to sign together	
*If this option is selecte	ed please specify number of authorised signal	ories on behalf of Member Trustees
*If this option is selecte	ed please specify number of authorised signat	ories on behalf of Professional Trustees
✓ Professional Administr	ator(s) only to sign	
*If this option is selecte	ed please specify number of authorised signal	ories on behalf of Professional Trustees
*Please indicate below any	special instructions:	
Practitioner.Com deduct from my/o adviser charges/f	signatory list. I/We hereby our pension scheme bank a	itioner.Com signatory as per the Pension authorise Metro Bank PLC (The Bank) to ccount such management charges/fees and n time to time to the bank under the sole Pension Practitioner.Com.

6. DECLARATION AND SIGNATURE(S)

Fraud Prevention Agencles

If you give false or inaccurate information and fraud is identified or suspected, details may be passed to fraud prevention agencies and/or CRAs to prevent fraud and money laundering. Law enforcement agencies may access and use this information.

You authorise Metro Bank to disclose details of your account(s) to your professional adviser (as detailed below) and your pension provider as named on the application form, or their successors in title.

More information is available about how Metro Bank will use your information. You can find this at the beginning of the document "Our Service Relationship with Business Customers". More detailed information is also available in our "Guide to the Use of Your Information". Both of these documents are available on request. By signing this form you agree to Metro Bank using your information as set out above and in the ways described in the above literature. You can contact us in writing at Metro Bank PLC, One Southampton Row, London, WC1B 5HA or via email at enquiries@metrobank.plc.uk.

Metro Bank's decision to offer you this Pension Scheme Bank Account is based on the information set out in this application. By applying for this Pension Scheme Bank Account, you declare that the information set out in this application is, to the best of your knowledge and belief, correct and not misleading. If any of the Information provided in this application changes you must inform Metro Bank promptly in writing.

Your Pension Scheme Bank Account will be subject to the terms and conditions outlined in the documents "Our Service Relationship with Business Customers" and the "important information Summary" for this product. As you are applying for a joint account, you acknowledge that each of you is separately responsible for complying with the document "Our Service Relationship with Business Customers" and the "important information Summary". If any one of you does not comply, Metro Bank can take action against any or all of you alone or together.

Before signing this Pension Scheme Account Opening Request you should carefully read the document "Our Service Relationship with Business Customers" and the "Important Information Summary" for this product. If there is any term that you do not understand, please discuss it with a Metro Bank Partnerships Service Centre Specialist before signing.

I certify that I have reviewed the Pension Trust Deed in respect of the above named Pension Scheme and:

- The pension has been properly constituted
- The details shown above are complete and accurate
- The Trustees are empowered to open an account at Metro Bank PLC
- The Trustees are empowered to operate the account/to appoint representatives to operate the account
- To facilitate operations on the account the Trustees are empowered to utilise any electronic banking service available from Metro Bank PLC
- The Trust Deed will be available for inspections by the Bank, if required and that the copy will be retained for a period of 6 years after the account has closed
- The signatories on the account mandate (section 6) have been authorised and appointed by all the trustees or the trustees' representatives
- We permit Metro Bank PLC to make enquiries to HMRC to confirm this scheme is registered with them for tax relief and exemptions and we authorise HMRC to provide this information to Metro Bank PLC upon request

By signing this form we acknowledge receipt of details of the Financial Services Compensation Scheme Information Sheet.

We confirm that the Account is to be subject to the Pension Scheme Bank Account Important Information Summary and the Terms and Conditions as set out in *Our Service Relationship with Business Customers* Part 4 Section 40.

Professional Administrator(s) Signature Print name **Position** Signature Print name Date Position

Member Trustee(a)/Authorised Signatory(les) Print name Signature Cate 6 2 16 Print name THOWAS BURKE Date 6 2 16 Signature Date 8 2 16 Print name Date 8 2 16 Print name Date 8 2 16 Print name Print name Date 8 2 16 Print name Date 8 2 16 Print name Date 8 2 16 Date 8 2 16 Print name Date 8 2 16 Date 8 2 1		ontinued)	6. DECLARATION AND SIGNATURE(S) (continue
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Print name Signature Date 8 2 16 Print name Signature Date 8 2 16. Print name Signature Date 8 2 16. Print name Print name Date Print name Date Date Print name Date Date		Signature	Print name
Print name Signature DEBCA GURKE Print name Signature Signature Date 8 2 16 Print name Signature Date 8 2 16 Print name Date 9 2 16 Print name Date 9 2 16 Date 9			JAMIE BRONTON
THOUAS BURE Date 8 2 16 Print name Signature DEBRA BURKE Print name Signature Date 8 2 16. Print name Signature Date 8 2 16. Date 8 2 16. Print name Signature Date 8 2 16. Print name Date 8 2 16. Date 8 2 16.		Date 8/2/16	
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Print name MATHERINE BRENTON Date B 2 16			THOMAS BURKE
Print name DEBRA BURKE Date 8 2 16 Print name Signature Date 8 2 16. Print name Signature Date 8 2 16. Print name Signature Print name Date Date Address Daws House		Date 812/16	
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Print name DEBCA GURKE Date 8 2/16 Date 8 2/16. Print name Signature Oate Print name Signature Oate Print name Address Date 8 2/16.		18B	KATHERINE BRENTON
DEBRA BURKE Date 8 2/16. Print name Signature Date Print name T. PROFESSIONAL ADVISOR DETAILS Name of Company Pension Practitioner. Com Limited Address Daws House		Date 8/2/16	
Print name Signature Date Print name Signature Date Print name Signature Date Address Date		Signature	Print name
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Print name Signature Date Print name Print name Signature Date		Date 8 2/16.	
Print name Signature Date 7. PROFESSIONAL ADVISOR DETAILS Name of Company Pension Practitioner. Com Limited Address Daws House		Signature	Print name
Print name Signature Date 7. PROFESSIONAL ADVISOR DETAILS Name of Company Pension Practitioner. Com Limited Address Daws House			
7. PROFESSIONAL ADVISOR DETAILS Name of Company Pension Practitioner. Com Limited Address Daws House		Date	
7. PROFESSIONAL ADVISOR DETAILS Name of Company Pension Practitioner. Com Limited Address Daws House		Signature	Print name
7. PROFESSIONAL ADVISOR DETAILS Name of Company Pension Practitioner. Com Limited Address Daws House			
Name of Company Pension Practitioner. Com Limited Address Daws House		Date	
Name of Company Pension Practitioner. Com Limited Address Daws House			
Address Daws House			7. PROFESSIONAL ADVISOR DETAILS
Daws House		Limited	Name of Company Pension Practitioner. Com Limite
53-35 Daws Lane, London	<u> </u>	1	Daws House 33-35 Daws Lane, London
Past code		Telephone Number 08006344862	Post code NW7 4SD
Contact Name Brad Davis / Georgina Stuliglowa		liglowa	Contact Name Brad Davis / Georgina Stuliglows
Email info@pensionpractitioner.com		om	Email info@pensionpractitioner.com



Financial Services Compensation Scheme

Information Sheet

Eligible deposits in Metro Bank PLC are protected by:	The Financial Services Compensation Scheme ("FSCS")1
Limit of protection:	£75,000 per depositor per bank²
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 £75,000.2
If you have a joint account with other person(s):	The limit of £75,000 applies to each depositor separately.3
Reimbursement period in case of bank's failure:	20 working days.4
Currency of reimbursement:	Pound sterling (GBP, $\mathfrak L$) or, for branches of UK banks operating in other EEA Member States, the currency of that State.
To contact Metro Bank PLC for enquiries relating to your account: To contact the FSCS for further information on compensation:	Metro Bank PLC One Southampton Row London WC1B 5HA 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
More information:	http://www.fscs.org.uk
Acknowledgement of receipt by the depositor:	

ADDITIONAL INFORMATION

Scheme responsible for the protection of your eligible 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 £75,000 by the Deposit Guarantee Scheme.

²General 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 at maximum £75,000 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 £75,000.

In some cases eligible deposits which are categorised as "temporary high balances" are protected above £75,000 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:

- (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.

Store Opening Hours: Monday - Friday 8am - 8pm • Saturday 8am - 6pm • Sunday 11am - 5pm Local UK Call Centre: 0345 08 08 500

metrobankonline.co.uk

Financial Services Compensation Scheme (continued)

ADDITIONAL INFORMATION (continued)

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

³Limit of protection for joint accounts

In case of joint accounts, the limit of £75,000 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 £75,000.

⁴Reimbursement

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 £75,000) 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. Again, there are specific exceptions to this obligation.

In the case of a depositor which is a large company, where the FSCS cannot make the repayable amount available within 7 working days, it will, from 3 July 2015 until 1 December 2016, ensure that you have access to your covered deposits within fifteen working days of a request containing sufficient information to enable it to make a payment, save where specific exceptions apply.

In the case of a depositor which is a small local authority, where the FSCS cannot make the repayable amount available within 7 working days, it will, from 3 July 2015 until 1 June 2016, ensure that you have access to your covered deposits within fifteen working days of a request containing sufficient information to enable it to make a payment, save where specific exceptions apply.

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.

EXCLUSIONS LIST

A deposit is excluded from protection if:

- (a) 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.
- (b) The deposit arises out of transactions in connection with which there has been a criminal conviction for money laundering.
- (c) 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
 - · public authority, other than a small local authority.

The following are deposits, categories of deposits or other instruments which will no longer be protected from 3 July 2015:

- deposits of a credit union to which the credit union itself is entitled
- deposits which can only be proven by a financial instrument² unless it is a savings product which is evidenced by a certificate of deposit made out to a named person and which exists in a Member State on 2 July 2014
- deposits of a collective investment scheme which qualifies as a small company³
- deposits of an overseas financial services institution which qualifies as a small company
- deposits of certain regulated firms (investment firms, insurance undertakings and reinsurance undertakings) which qualify as a small business or a small company⁵ – refer to the FSCS for further information on this category

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

Deposits by personal pension schemes, stakeholder pension schemes and occupational pension schemes of micro, small and medium sized enterprises are not excluded

^{*}Listed in Section C of Annex 1 of Directive 2014/65/EU

^aUnder the Companies Act 1985 or Companies Act 2006

⁴Sea footnote 3

^{*}See footnote 3