# Pension Fund Account **Application Form**



Please complete all sections of the Application Form using BLOCK CAPITALS. Text in italics gives you information to help you complete this form. If you need further assistance, please contact us. Please ensure that you have read the Data Protection Notice in Section 7 of this Application Form before completing your details and signing.

When you open an account, we may ask for additional information to confirm your identity. Bank of Scotland plc, in common with other financial services providers, has account opening procedures which reflect current legal and regulatory requirements (and best practice industry guidance) aimed at preventing money laundering and terrorist financing. In the event that these

requirements are not satisfied but, nevertheless, money is paid into your account, Bank of Scotland plc may suspend operations on the account until identity is established. This is for your protection as well as ours, and is not intended to cause you inconvenience.

Bank of Scotland plc does not give advice to any person regarding the suitability of any Account for investment purposes in connection with the Scheme. It is the sole responsibility of the trustee(s) to obtain suitable

professional advice that the Account is suitable for the Scheme's purposes. Bank of Scotland plc will not be liable in any circumstances where it is subsequently discovered that the Scheme could not open or operate any Account.

Name of Account(s)

Please enter the name in which you want us to open the Account(s) (must be less than 40 characters).

## IKECHUKWU IBEKWE ENOMI CBEKWE

Please continue on a separate sheet where necessary.

Name of your Scheme

IPLUX LTD SSAS PENSION

Statement Address Details

Address (include postcode)

Daws House 33-35 Daws Lane

Mailing Name

Pension Practitioner .Com

Salutation

Date your Scheme was set up (DD/MM/YY)

26/02/2013

Is the Scheme registered with (or approved by) HM Revenue & Customs and eligible to receive interest gross?

(the "Scheme")

No

If 'yes', we must have received a copy of the confirmation of registration of the Scheme with HM Revenue & Customs and have been provided with the Pension Scheme Tax Reference before we pay interest gross.

Scheme Registration Number

A0124208

If 'no', or if we do not receive this supporting evidence, we will pay interest net.

Contact E-mail address

IKE. IBEKWE@ IPWXLTD. COM

Contact Telephone number

0780 790 5501

Country

London

**NW7 4SD** 

United Kingdom

You can give us additional contact names and addresses if you wish. Please use a separate sheet.

2.1

Please insert details of all the trustees of the Scheme in the space provided below (including any "Additional Trustees" or "Reserve Trustees" appointed under the rules of the Scheme, who become trustees on the death of any trustee who is an individual). Please also provide details of the Authorised Signatories. If a trustee is a limited company the bank may request further information.

Please continue on a separate sheet where necessary.

Trustee/signatory 1

Mr

Miss

Ms

Other (please specify)

Title Mr

Your last name

IBEKNE

Your first names

IKECHUKWU

Gender

Date of Birth (DD/MM/YY)

MALE

06/08/1970

Nationality

BRITISH

Dual Nationality (if applicable)

Trustee/signatory 2

Mrs X Miss

Ms

Other (please specify)

Your last name

IBEKWE

Your first names

ENOHI

FEMALE

Date of Birth (DD/MM/YY)

23/10/1972

Nationality

BRITISH

Dual Nationality (if applicable)

Permanent address (include postcode)

22 NORTH ANDERSON DRIVE ABERDEEN AB155DA

Please also provide the date the individual moved to this address - if less than 3 years ago, please also complete the previous address section (DD/MM/YY)

20/08/2006

Country

UK

Permanent address (include postcode)

CAME

Please also provide the date the individual moved to this address - if less than 3 years ago, please also complete the previous address section (DD/MM/YY)

SAME

Previous address

Country

SAME

Date moved to this previous address (DD/MM/YY)

A complete 3 year address history must be provided (use separate sheet if necessary)

Date (DD/MM/YY)

Previous address

Position(s)(e.g, Trustee, Professional Trustee, Member Trustee, Authorised Signatory etc)

Member Trustee

If more than one position is held (e.g. Member Trustee and Authorised Signatory), please note each position here

Member Trustee and Authorised Signatory

Date moved to this previous address (DD/MM/YY)

A complete 3 year address history must be provided (use separate sheet if necessary)

Date (DD/MM/YY)

Position(s) (e.g, Trustee, Professional Trustee, Member Trustee, Authorised Signatory etc)

MEMBER TRUSTEE

If more than one position is held (e.g. Member Trustee and Authorised Signatory), please note each position here

MEMBER TRUSTEE AND AUTHORISED SIGNATORY

### 5 Data Protection Notice (in this Section 5 only, 'We' refers to Bank of Scotland plc

- Your information will be held by Bank of Scotland plc which trades as Bank of Scotland, part of the Lloyds Banking Group.
- The Lloyds Banking Group includes us and a number of other companies using brands including Lloyds TSB, Halifax and Bank of Scotland, and their associated companies. More information on the Group can be found at www.lloydsbankinggroup.com.
- Your personal information will be shared within the Lloyds Banking Group so that we and any other companies in our Group can look after your relationship with us. By sharing this information it enables us to better understand your needs, run your accounts, and provide products in the efficient way that you expect.
- We may ask you to provide physical forms of identity verification when you open your account. Alternatively, we may search credit reference agency files in assessing your application. The agency also gives us other details and information from the Electoral Register to verify your identity.

The agency keeps a record of our search, whether or not your application proceeds. Our search is not seen or used by lenders to assess your ability to obtain credit.

- Under the Data Protection Act you have the right of access to your personal data. The Act allows us to charge a fee of £10 for this service.
   If anything is inaccurate or incorrect, please let us know and we will correct it.
- It is important that you understand how the personal information you give
  us will be used. Therefore, we strongly advise that you read our Privacy
  Statement, which you can find at http://www.lloydsbankwholesale.com/
  Privacy-Statement/ or you can ask us for a copy.
- By signing this application, you agree to your personal information being used in the ways we describe in our Privacy Statement. Please let us know if you have any questions about the use of your personal information.

## 6 Certificate of Authority and Signatures

Before signing below, please check all the information provided in this form and make sure you have received and read the documents forming your agreement with us for the account(s).

ALL Trustees must sign (not Authorised Signatories who are not Trustees)

We certify that we are entitled, under the terms of the Trust Deed(s) governing the Scheme, to sign this form and to operate the Account(s) in accordance with the Signing Authority Mandate and in accordance with the Account terms and conditions. We agree to indemnify Bank of Scotland plc against any loss

suffered as a result of any operation of the Account(s) in accordance with this form and/or the Account terms and conditions which is in breach of the terms of the Trust Deed(s).

Trustee 1

Name

IKE CHUKWU IBEKWE

Signature

Date (DD/MM/YY)

02/03/2013

Alberra

For and on behalf of the Professional / Corporate Trustee before this witness

N/A

Witness' signature

Datas Wilson and Name

ADEBOLA OGUNREMI

Witness' Address

12 LOCHINCH DRIVE COVE ABERDEEN, ABI2 3RY Trustee 2

Nam

ENOME EBEKWE

Signature

7 UV

Date (DD/MM/YY)

08/03/2013

For and on behalf of the Professional / Corporate Trustee before this witness

NIA

Witness' signature

Print Witness' Name

ADEBOLA DGUNREMI

Witness' Address

12 LOCH IN CH DRIVE COVE ABERDEEN. AB12 3RY

# Pension trust mandate



(the "Mandate")

To: Bank of Scotland plc (the "Bank")

Wa

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and, where applicable,

(the "Individual Trustee(s)")

N/A

(the "Corporate Trustee(s)")

(together the "Trustees") of the

IBUX LTD SSAS PENSION

(the "Scheme")

confirm to the Bank our agreement to the Terms and Conditions set out in Section 3, that the following has been agreed by us in our capacity as Trustees of the Scheme and the Bank should act in accordance with the following until the receipt by the Bank of notice to the contrary signed in accordance with paragraph 5 of Section 1:

### **SECTION 1**

1 We request that a banking relationship between us (in our capacity as Trustees of the Scheme) and the Bank be established.

2

- 2.1 We instruct the Bank to pay, honour and debit to any account(s) (whether in credit or overdrawn or becoming overdrawn in consequence of such debit) all cheques, drafts, payment instructions or requests or any other orders or receipts for money made, or purporting to be made, on behalf of the Scheme, provided they are signed or accepted or issued either (i) in writing signed in accordance with paragraph 4.1 of Section 1 or (ii) by electronic or other mechanical means in accordance with all relevant instructions which have been provided to the Bank by the Trustees (in their capacity as trustees of the Scheme).
- 2.2 In relation to the accounts in the name of the Scheme referred to in paragraph 2.1 above, we instruct the Bank:
  - (a) To accept and act in accordance with paragraph 4.2 of Section 1 to transfer funds between any account(s) in the name of the Scheme and to debit or credit such account(s) as is necessary to comply with such request or order.
  - (b) To act in accordance with paragraph 4.3 of Section 1 to withdraw or deal with any securities, documents or other property which the Bank may from time to time hold on the Scheme's or on the Trustees' (in their capacity as trustees of the Scheme) behalf whether for safe custody or otherwise.
  - (c) To accept for the credit of any of such account(s) any remittances tendered to the Bank in the name of the Scheme or in the name of the Trustees in respect of or on behalf of the Scheme or in the name of a Corporate Trustee in respect of or on behalf of the Scheme.
  - (d) To accept and act in accordance with paragraph 4.4 of Section 1 to approve and execute any agreement relating to the account(s) of the Scheme with the Bank for the provision of banking services by electronic or similar means such as those available but not limited to those electronic and on-line banking products and services available on www.lloydsbankcorporatemarkets.com/Products-and-Services.
- 2.3 We instruct the Bank to accept and act upon the signature of any two directors (or a director and company secretary) of a Corporate Trustee to confirm those persons from time to time authorised to sign on behalf of that Corporate Trustee, without any requirement for the Bank to obtain the confirmation, agreement or otherwise of any other Trustee or party.
- All persons authorised to sign on behalf of the Scheme must be listed by name or designated e.g. "Any Individual Trustee" or "Any/The Corporate Trustee". It is often useful to specify different levels of signing power by the use of Panel A and Panel B signatories. By way of example, all of the Corporate Trustee signatories could be Panel A signatories and all of the Individual Trustee signatories could be Panel B signatories and instruction 2.2(a) above could require that payments below a certain amount are signed by any two Panel A signatories and a Panel B signatory but payments below that amount require any two Panel A signatories, or whatever combination is considered appropriate.

There is no obligation to make use of different levels of signing authority, and, if opting not to do so, insert all of the persons authorised to sign on behalf of the Scheme in Panel A and rule a line across the Panel B box. If you have any requirements that are not addressed by the space and combinations available please contact your Relationship Manager.

DO NOT SIGN HERE - PLEASE SIGN AT SECTION 2 (AND ALSO AT PARAGRAPH 4 OF SECTION 4 IF YOU ARE ALSO AN AUTHORISED SIGNATORY OF A CORPORATE TRUSTEE)

Panel A: Please rule a line across all spaces left blank.

Full name	Position held
IKECHUKWU IBEKWE	Trustee
ENOHI IBEKWÉ	Trustee
N/A	N/A
Panel B: Please rule a line across all spaces left blank.	
Full name	Position held
N/A	N/A
In terms of the instructions set out in paragraph 2 of Section 1, such instruction	ons may be given to the Bank as follows:
Instructions given in accordance with paragraph 2.1	
Signing combination (e.g. a combination of Panel A and Panel B signatories or if there are no Panel B signatories, a number of Panel A signatories)	Monetary limitation (if any)
BITHER L OR BOTH	NO LIMIT
EITHER 1 OIL BOTH	NO CIMIT
ANY ONE OF THE 2 OR BOTH	NO HMIT

4.2 Instructions given in accordance with paragraph 2.2 (a)

Signing combination (e.g. a combination of Panel A and Panel B signatories or if there are no Panel B signatories, a number of Panel A signatories)

Mo

ANY OF THE 2 OR BOTH

ANY ONE OF THE 2 OR BOTH

Monetary limitation (if any)

NO LIMIT NO LIMIT

4.3 Instructions given in accordance with paragraph 2.2 (b)

Signing combination (e.g. a combination of Panel A and Panel B signatories or if there are no Panel B signatories, a number of Panel A signatories)

ANY OF THE 2 OR BOSH

Monetary limitation (if any)

NO LIMIT

4.4 Instructions given in accordance with paragraph 2.2 (d)

Signing combination (e.g. a combination of Panel A and Panel B signatories or if there are no Panel B signatories, a number of Panel A signatories)

ANT OF THE 2 OR BOTH ANY ONE OF THE 2 OR BOTH Monetary limitation (if any)

NO LIMIT

5 We instruct the Bank that any notice to the Bank that it should no longer act in accordance with the terms of this Mandate in whole or in part as provided for on page 1 should be signed as follows:

Signing combination (e.g. "Any one/two or all Trustees" or a combination of Panel A and Panel B signatories)

ANY ONE OF THE 2 OIL BOTH

Monetary limitation (if any)

ao umis

### **SECTION 2**

All of the Individual Trustees and each Corporate Trustee (if applicable), are required to sign Section 2, in the case of any Corporate Trustee in accordance with resolution 1 of the Corporate Trustee in Section 4 and in doing so agree, accept and confirm their agreement (in their capacity as trustees of the Scheme) to the terms of this Mandate.

We, the Trustees, confirm that:

- (i) the following signatures under the heading "Trustees" are in the case of the Individual Trustees, those of the Individual Trustees and in the case of any Corporate Trustee are those of the appropriate Authorised Signatory/ies in accordance with resolution 1 in Section 4 of such Corporate Trustee;
- (ii) together the Individual Trustees and Corporate Trustee or Trustees who have signed below are all the validly appointed trustees of the Scheme and are those persons authorised to sign this Mandate;
- (iii) the Trustees and the Authorised Signatory/ies who signed on behalf of any Corporate Trustee are entitled to sign on behalf of the Scheme in accordance with this Mandate;
- (iv) the following signatures under the heading "Other Authorised Persons" are those of the persons authorised to sign on behalf of the Scheme in accordance with this Mandate who are Authorised Signatories of any Corporate Trustee in accordance with resolution 2 in Section 4 and who did not sign on behalf of the Corporate Trustee under the heading "Trustees" or who are otherwise not Trustees;
- (v) all such signatures are genuine signatures of such persons; and
- (vi) all such signatures operate as specimen signatures of each of such persons.

To be completed by:

- All Trustees; and
- Anyone authorised to sign on behalf of a Corporate Trustee (if applicable); and
- Any scheme administrator or scheme practitioner or fund manager (if applicable)

Trustees	
Corporate Trustee	
Signed	Signed
Date	Date
Name N/A	Name N/A
Signed	Signed
	0
Name N/A	Name N/A
Individual Trustees Signed	Signed
	O(1).
Date 02/03/2013 Name IKECHUKWU IBEKWE	Date 06/03/2013 Name ENOHI IBEICWE
Date 02/03/2013	Date 06/03/2013
Name TREEMURWU TISERWE	Name ENOTH IBEICHE
Other Authorised Persons - Scheme Administrator/Practitioner/Fund Manager	
NOTE: Only complete if the Trustees has appointed such a person. (Confirmation	of appointment is to be provided from the scheme.)
Full name of scheme administrator/practitioner or fund manager  N/A	
Where a scheme administrator/practitioner or fund manager is a company, a resol	ution will be required to authorise individuals to act on the account(s).
Signed	Signed
Date	
Name N/A	Name N/A
Other Authorised Persons Signed	Signed
	Jigheu
Date Name N/A	Date
N/A	Name N/A
Signed	Signed
Date	Date
Name N/A	Name N/A

Please contact us if you'd like this in Braille, large print or on audio tape.