

The Isle of Man Bank (the Bank) must obtain a sufficient understanding of the ownership and control of the company and verify the identities of key individuals before it can process your Non Personal account reclaim. The information requested in this form is necessary to undertake those enquiries. You must notify any parties named in this form that their information has been supplied to us for this purpose. Please ensure that any amendments within the form are initialled prior to sending to the Bank and please ensure all pages are returned even if they are not used.

**To: DSD Reclaims, PO Box 87, Douglas, Isle of Man, IM99 3HS**

Please complete this form in BLOCK CAPITALS and in black ink. Mark option boxes with an 'X'.

## 1. Organisation/Company/Entity details

Full name of your Organisation/Company/Entity

Intermediary name (if applicable)



Organisation/Company/Entity activity i.e. property holding, trading, investment holding

Organisation/Company/Entity type e.g. Limited Company, Trust, LLP

Complete where applicable:

Company Registration Number/Regulator Number

Registered Charity Number

Date Incorporated/Registered

(DD/MM/YYYY)

Please confirm the Company/Entity is still in existence/of good standing

Yes  No

## 2. Original account details

### 2.1 Account number 1

Full account name



Account holding branch

Account number

Sort code

Currency e.g. GBP

Or multi currency

Yes  No

### 2.2 Account number 2

Full account name



Account holding branch

Account number

Sort code

Currency e.g. GBP

Or multi currency

Yes  No

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**2.3 Account number 3**

Full account name


Account holding branch

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Account number

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Sort code

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Currency e.g. GBP

--

Or multi currency

Yes

No

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**2.4 Account number 4**

Full account name


Account holding branch

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Account number

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Sort code

--

Currency e.g. GBP

--

Or multi currency

Yes

No

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**2.5 Account number 5**

Full account name


Account holding branch

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Account number

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Sort code

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Currency e.g. GBP

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Or multi currency

Yes

No

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**CARE:** Where you require additional account number fields please use the Additional Information form provided below.

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**3. Follow up (the 'follow up' contact must be a key individual quoted in Section 4)**

In the event that we need to contact you for further information, please indicate your preferences:

Contact name

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Contact telephone

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Contact e-mail

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#### 4. Key Individuals

Please refer to the Guidance Notes on the final page of this form before completing the Key Individual information below – this will help you identify the key individuals in your organisation or company. Details of all key individuals, including their current residential address must be provided.

##### 4.1 Key Individual 1

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="checkbox"/>	<input type="text"/>
First name	<input type="text"/>					(Please specify)
Middle name(s)	<input type="text"/>					<input type="text"/>
Surname	<input type="text"/>					
Date of birth (DD/MM/YYYY)	<input type="text"/>					
Address line 1	<input type="text"/>					
Address line 2	<input type="text"/>					
Address line 3	<input type="text"/>					
Address line 4 OR overseas country	<input type="text"/>					
Postcode	<input type="text"/>	<input type="text"/>				
Nationality/ies	<input type="text"/>					
	<input type="text"/>					
	<input type="text"/>					

Please tick **all** applicable boxes

Ownership: Ultimate Beneficial Owner/Shareholder  Beneficiary (Trusts)  Settlor (Trusts)  Officer or equivalent (Clubs & Societies)

Percentage of total ownership held/controlled (as applicable)  %

Capacity: Director  Partner  Trustee

Signatory

Date appointed  (DD/MM/YYYY)

Is the Key Individual an existing personal customer of NatWest Group? Yes  No

If yes – Sort code  Account number

## 4.2 Key Individual 2

Title Mr  Mrs  Miss  Ms  Other    
(Please specify)

First name

Middle name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address line 1

Address line 2

Address line 3

Address line 4 OR overseas country

Postcode

Nationality/ies

Please tick **all** applicable boxes

Ownership: Ultimate Beneficial Owner/Shareholder  Beneficiary (Trusts)  Settlor (Trusts)  Officer or equivalent (Clubs & Societies)

Percentage of total ownership held/controlled  %  
(as applicable)

Capacity: Director  Partner  Trustee

Signatory

Date appointed  (DD/MM/YYYY)

Is the Key Individual an existing personal customer of NatWest Group? Yes  No

If yes – Sort code  Account number

### 4.3 Key Individual 3

Title Mr  Mrs  Miss  Ms  Other    
(Please specify)

First name

Middle name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address line 1

Address line 2

Address line 3

Address line 4 OR overseas country

Postcode

Nationality/ies

Please tick **all** applicable boxes

Ownership: Ultimate Beneficial Owner/Shareholder  Beneficiary (Trusts)  Settlor (Trusts)  Officer or equivalent (Clubs & Societies)

Percentage of total ownership held/controlled  %  
(as applicable)

Capacity: Director  Partner  Trustee

Signatory

Date appointed  (DD/MM/YYYY)

Is the Key Individual an existing personal customer of NatWest Group? Yes  No

If yes – Sort code  Account number

**4.4 Key Individual 4**

Title Mr  Mrs  Miss  Ms  Other    
(Please specify)

First name

Middle name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address line 1

Address line 2

Address line 3

Address line 4 OR overseas country

Postcode

Nationality/ies

Please tick **all** applicable boxes

Ownership: Ultimate Beneficial Owner/Shareholder  Beneficiary (Trusts)  Settlor (Trusts)  Officer or equivalent (Clubs & Societies)

Percentage of total ownership held/controlled  %  
**(as applicable)**

Capacity: Director  Partner  Trustee

**Signatory**

Date appointed  (DD/MM/YYYY)

Is the Key Individual an existing personal customer of NatWest Group? Yes  No

If yes – Sort code  Account number

**4.5 Key Individual 5**

Title Mr  Mrs  Miss  Ms  Other    
(Please specify)

First name

Middle name(s)

Surname

Date of Birth (DD/MM/YYYY)

Address line 1

Address line 2

Address line 3

Address line 4 OR overseas country

Postcode

Nationality/ies

Please tick **all** applicable boxes

Ownership: Ultimate Beneficial Owner/Shareholder  Beneficiary (Trusts)  Settlor (Trusts)  Officer or equivalent (Clubs & Societies)

Percentage of total ownership held/controlled  %  
**(as applicable)**

Capacity: Director  Partner  Trustee

**Signatory**

Date appointed  (DD/MM/YYYY)

Is the Key Individual an existing personal customer of NatWest Group? Yes  No

If yes – Sort code  Account number

**Please note in the event where there are in excess of 5 Key Individuals associated with the Organisation/Company/ Entity, please print copies of this page as appropriate.**

## **How we use and share your information**

### **(a) Credit reference and fraud prevention agencies**

We may request information about you from credit reference agencies to help verify your identity to comply with laws that apply to us. This request will not affect your ability to obtain credit (for example for a loan or credit card) in the future.

In order to prevent and detect fraud, the information provided in this application will be shared with fraud prevention agencies. If false or inaccurate information is provided and fraud is identified or suspected, details will be recorded with these agencies to prevent fraud and money laundering.

If we, or a fraud prevention agency, determine that you pose a fraud or money laundering risk, we may refuse to provide the services and financing to you.

When credit reference and fraud prevention agencies process your information, they do so on the basis that they have a legitimate interest in preventing fraud and money laundering, to protect their business and to comply with laws that apply to them.

### **(b) With other NatWest Group companies**

We and other NatWest Group companies worldwide will use the information you supply in this application (and any information we or other NatWest Group companies may already hold about you) in connection with processing your application and assess your suitability for our products.

If your application is declined we will normally keep your information for up to 6 years (or 10 years in Jersey), but we may keep it for longer if required by us or other NatWest Group companies in order to comply with legal and regulatory requirements.

We and other NatWest Group companies may use your information in order to improve the relevance of our products and marketing.

### **(c) With other Third Parties**

The information provided in this application may be used for compliance with legal and regulatory screening requirements, including confirming your eligibility to hold a UK bank account and sanctions screening.

We may be required to disclose certain information to regulators, tax authorities, government bodies and similar organisations around the world, including the name, address, tax number, account number(s), total gross amount of interest paid or credited to the account and the balance or value of the account(s) of our customers.

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## **5. Confirming your agreement**

To enable us to complete our due diligence enquiries and release the funds held, this form must be signed in accordance with the last mandate held by the bank. We will use the information supplied on this form for the purposes of checking identity and to undertake money laundering checks. We may obtain information about any directors, beneficial owners, and other parties identified in this form from NatWest Group records and other third parties.

For details of how we and others will use your information, please refer to our Privacy Notice available at [iombank.com/privacynotice](http://iombank.com/privacynotice) or ask your usual contact at the Bank.

When we use and share personal and financial information, we do so on the basis that we have a legitimate interest to prevent fraud and money laundering, to manage our risk and to protect our business and to comply with laws that apply to us (including verifying your identity and assessing the suitability of our products).



By signing below you confirm that:

- The details provided are correct; and
- You will notify any third parties named in the form that their information will be used in the way described at the start of the form.

Claimant signature(s)

Name (in full) \_\_\_\_\_

Date of signature (DD/MM/YYYY) \_\_\_\_\_

Name (in full) \_\_\_\_\_

Date of signature (DD/MM/YYYY) \_\_\_\_\_

Claimant signature(s)

Name (in full) \_\_\_\_\_

Date of signature (DD/MM/YYYY) \_\_\_\_\_

Name (in full) \_\_\_\_\_

Date of signature (DD/MM/YYYY) \_\_\_\_\_

Claimant signature(s)

Name (in full) \_\_\_\_\_

Date of signature (DD/MM/YYYY) \_\_\_\_\_

Name (in full) \_\_\_\_\_

Date of signature (DD/MM/YYYY) \_\_\_\_\_

**Customer Checklist**

Organisation/Company/Entity structure chart

Signed payment/dispersal instructions



## Guidance Notes

# Non Personal Account Reclaim Form

Please use the table below to identify the Key Individuals in the Organisation/Company whose information should be included within the Non Personal Account Reclaim form.

Organisation Types	The following individuals' details should be entered on the Review of Customer Information Form
<ul style="list-style-type: none"> <li>• Limited Companies</li> </ul>	<ul style="list-style-type: none"> <li>• All directors</li> <li>• All ultimate beneficial owners</li> </ul>
<ul style="list-style-type: none"> <li>• Trusts &amp; Foundations</li> </ul>	<ul style="list-style-type: none"> <li>• All trustees</li> <li>• All beneficiaries</li> <li>• All officers / controllers</li> <li>• Settlor</li> </ul>
<ul style="list-style-type: none"> <li>• General Partnerships</li> <li>• Limited Liability Partnerships</li> <li>• Medical and Legal practices</li> </ul>	<ul style="list-style-type: none"> <li>• All partners</li> <li>• All ultimate beneficial owners</li> </ul>
<ul style="list-style-type: none"> <li>• Sole Traders</li> </ul>	<ul style="list-style-type: none"> <li>• All ultimate beneficial owners</li> </ul>
<ul style="list-style-type: none"> <li>• Church bodies and places of worship</li> <li>• Clubs or Societies</li> <li>• Public bodies (such as local councils, community groups and government agencies)</li> </ul>	<ul style="list-style-type: none"> <li>• All officers</li> </ul>

Please provide current residential addresses for all Key Individuals.

### Glossary

**Ultimate beneficial owner:** An individual owning or controlling 10% or more of an Organisation/Company/Entity.

**Beneficiaries:** An individual or Entity that is eligible to benefit from a Trust or Foundation.

**Officer/Controller:** An individual with the authority to exercise control over the Organisation.

**Trustee:** A person or Organisation appointed under a trust who administers the affairs of the Trust.

**Settlor:** An individual or Entity which settles assets into the trust or foundation.