

Current accounts

Upgrade application form for
existing current account holders

Account upgrade application

Before completing this application form you must read the 'Current accounts' brochure, 'Terms and Conditions', 'Fees' leaflet and 'Savings and current account rates' leaflet. If you are applying for a GOLD account you must also read the associated GOLD account literature. These contain all the information you need to be aware of before opening your current account. If you do not have all of the above items please contact any branch to obtain those you are missing.

Please complete all parts of this form in BLOCK CAPITALS and black ink.

Your information

For details of how we and others will use your information, please look for the padlock symbol and in the accompanying Terms and Conditions or contact your branch.

Please upgrade my/our existing account to:

Gold Current Plus Step

Existing account number

Sort code

1. Personal details - main applicant

Title

Mr Mrs Miss Ms Other If other, please specify

Surname

First name(s)

Middle name(s)

Previous names (including maiden name or change by deed poll)

Are you known by any other name?

Yes No If yes, please specify

Gender

Male Female

Full residential address line 1

Address line 2

Address line 3

Address line 4

Postcode

Date of entry to
above address

If resident at above address less than 3 years please state previous address

Previous address line 1

Address line 2

Address line 3

Address line 4

Postcode

Date of entry to
above address

Address for correspondence
(Only complete if different
to residential address)

Postcode

Date of birth

Country of birth

Town of birth

Country of permanent
residence

Country of residence for
tax purposes

Nationality

Government issued Personal Identification Number i.e the number on the ID document you are providing - Passport, driving licence etc

Relationship status

Single Living with partner Married/
In a civil partnership Widowed/
Surviving civil partner Divorced/Separated/
Dissolved

Telephone number (home)

Telephone number (business)

 extn

Mobile telephone number

E mail address

Memorable word (Please choose a memorable word of no more than 15 characters. This may be used to confirm certain transactions)

Number of dependants

Residential status Home owner Tenant-Furnished Tenant-Unfurnished Living with parents Other

If other, please specify

Are you an Isle of Man Bank member of staff? Yes No If yes, please provide salary reference number

1.1. Employment details - main applicant

Occupation

Are you Employed Self-employed Unemployed Homemaker Retired

Employer's name

Employer's address line 1

Address line 2

Address line 3

Address line 4

Postcode

Date employment commenced If self-employed please state date established

Gross annual salary £

How are you paid? Cash Cheque Mandated to Isle of Man Bank Mandated elsewhere n/a Other

If other, please specify

How often are you paid? Monthly Fortnightly Weekly Other

Address line 4

Postcode

Date of entry to above address

Address for correspondence (Only complete if different to residential address)

Postcode

Date of birth

Country of birth

Town of birth

Country of permanent residence

Country of residence for tax purposes

Nationality

Government issued Personal Identification Number i.e the number on the ID document you are providing - Passport, driving licence etc

Relationship status Single Living with partner Married/ In a civil partnership Widowed/ Surviving civil partner Divorced/Separated/ Dissolved

Telephone number (home)

Telephone number (business) extn

Mobile telephone number

E mail address

Memorable word (Please choose a memorable word of no more than 15 characters. This may be used to confirm certain transactions)

Number of dependants

Residential status Home owner Tenant-Furnished Tenant-Unfurnished Living with parents Other

If other, please specify

Are you an Isle of Man Bank member of staff? Yes No If yes, please provide salary reference number

1.1. Employment details - second applicant

Occupation

Are you Employed Self-employed Unemployed Homemaker Retired

Employer's name

Employer's address line 1

Address line 2

Address line 3

Address line 4

Postcode

Date employment commenced If self-employed please state date established

Gross annual salary £

How are you paid? Cash Cheque Mandated to Isle of Man Bank Mandated elsewhere n/a Other

If other, please specify

How often are you paid? Monthly Fortnightly Weekly Other

2.1. Card details - second applicant (for customers who do not already have a Debit card)

I would like a Debit card

If you would like your card to show description of the account to which it relates, e.g. 'No. 2 account', please enter the details below.

3. Declaration and signature(s)

I/We apply to Isle of Man Bank (the Bank) for a Debit card issued to each applicant for use on the account numbered as above subject to the conditions of use.

I/We understand that a copy of the conditions of use will be sent to me/us with the Debit card(s). I/We confirm that the information given is true and complete and I/we authorise you to make any enquiries you may think necessary in connection with this application.

Credit reference agencies

We may obtain information about you from credit reference agencies and Group records to check your credit status and identity. The agencies will record our enquiries which may be seen by other companies who make their own credit enquiries. This may affect your ability to obtain credit elsewhere in the near future. We may use credit scoring.

Your application will be assessed using credit reference agency records relating to anyone with whom you have a joint account or similar financial association. If this is a joint application and such a link does not already exist then one may be created now. These links will remain until you file a 'notice of disassociation' at the credit reference agencies.

However, for this application, you can choose to be treated as financially independent of any person, (except for another party to this application). If you do, by signing this application you declare that you believe your associate's finances will not affect our decision and agree that we may check your declaration. We may decline this application if we find that your declaration is inaccurate. If you want to be treated as financially independent for this application, please place a cross in this box.

Fraud prevention agencies

If false or inaccurate information is provided and fraud is identified or suspected, details may be passed to fraud prevention agencies. We may also obtain information about you from fraud prevention agencies.

Keeping you informed

We would like to keep you informed by letter and by phone about products, services and additional benefits that we believe may be of interest to you. If you don't want us to do this, please place a cross in one or both boxes.

Letter Phone

We would also like to keep you informed via the e-mail address and mobile number you may have provided earlier in this form. May we keep you informed by electronic means, such as e-mail and mobile messaging?

Yes No

Giving your consent

By signing this application you are agreeing that we may use your information in the way described in this form (including the 'Keeping you informed' section) and in the associated Terms and Conditions.

All applicants sign here

Main applicant

Signature

Date _____

Second applicant

Signature

Date _____

For bank use only (Part 1)

Verified at branch by:

Staff name

ID number

Date _____

Staff signature

Customer ID number

Joint customer ID number

For bank use only (Part 2) MUST BE COMPLETED - GOLD fees

If Isle of Man Bank staff member, apply MTC code **STFF**

Yes

n/a

If existing GOLD customer apply MTC code **AIRI**

Yes

n/a

Isle of Man Bank Limited (IOMB). Registered Company Number: 1 Isle of Man. Registered Office: 2 Athol Street, Douglas, Isle of Man, IM99 1AN. Licensed by the Financial Supervision Commission of the Isle of Man and registered with the Insurance and Pensions Authority in respect of general business.

Our services are not offered to any person in any jurisdiction where their advertisement, offer or sale is restricted or prohibited by law or regulation or where we are not appropriately licensed.

IOMB is a member of the Isle of Man Depositors' Compensation Scheme (DCS) as set out in the Depositors' Compensation Scheme Regulations 2010. Further details of the scheme are available on request.

IOMB is not an Authorised Person subject to the rules and regulations made under the UK Financial Services & Markets Act 2000, and therefore deposits made with branches, all of which are outside the UK, are not protected by those rules and regulations covered by the UK Financial Services Compensation Scheme. As at 31 December 2010, the paid-up capital and reserves of IOMB exceeded £123 million. UK resident depositors may be subject to declaration and taxation of resulting income.

IOMB is a member of The Royal Bank of Scotland Group. The Royal Bank of Scotland plc - Registered in Scotland No 90312. Registered office: 36 St Andrew Square, Edinburgh, EH2 2YB. The Royal Bank of Scotland plc is authorised and regulated by the Financial Services Authority. The latest report and accounts are available at www.investors.rbs.com

IOMB places funds with other parts of its Group and thus its financial standing is linked to the Group. Depositors may wish to form their own view on the financial standing of IOMB and the Group based on publicly available information. The latest report and accounts are available at www.iombank.com/financial-results

If you are not satisfied with any of our products or services, we have a complaints procedure that you can use. A leaflet, giving details of the procedure, is available from your branch upon request.