

Community Account Application

Gateway Credit Union Ltd. • 21 Commercial Street, Pontypool, Torfaen, NP4 6JQ
01495 832111 • info@gatewaycu.co.uk • www.gatewaycu.co.uk

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Community Account Definition and Requirements

In common with other financial institutions, we require validation and identification for all signatories to the account. Individuals representing organisations will be required to produce identification documents giving proof of name, date of birth, address and National Insurance Number in accordance with the credit union's normal identification requirements for individual members. In addition, we will require details of all shareholders, directors or beneficial owners holding more than 25% of shares in the organisation who are NOT signatories.

To assist in identification and verification and to prevent fraud and money laundering we may use your information to search the Electoral Register and in searches with fraud prevention agencies. The agencies used would retain your information for 12 months regardless of whether this application is successful or not.

By completing this form, you are agreeing to these and any additional verification procedures.

To verify you as a bone fide organisation we require the following:

Incorporated Organisations

Group 1

- A private limited company limited by shares or by guarantee.
- A public limited company limited by shares or by guarantee.
- A limited partnership
- A limited liability partnership (LLPs)
- A Community Interest Company (CIC)
- A Right-to-manage (RTM) company

*Community Accounts for **Group 1** must provide:*
*A copy of the Company's **Certificate of Incorporation***
*and a copy of the **Memorandum and Articles of Association***

Group 2

- A credit union
- An incorporated Industrial & Provident Society
- A Friendly Society

*Community Accounts for **Group 2** must provide A copy of the **Registration Certificates** and **Rules***

Group 3

- A registered charity limited by guarantee or shares

*Community Accounts for **Group 3** must provide a copy of their **registration documents***

Unincorporated Organisations

Group 1

- A sole trader
- An unincorporated partnership

*Community Accounts for **Group 1** must provide two of the following:*

Business/Company Letterhead
Inland Revenue Certificate
Recent utility bill or statement (Within 3 months) in the name of the Business and for the Business Premises
Letter from an Accountant or Solicitor

Group 2

- A trust
- Community Accounts for **Group 2** must provide a **copy of the Trust Deed** and a **full list of Trustees**

Group 3

- A club, society or association
- An unincorporated charity
- A credit union study group
- A project group

Community Accounts for **Group 3** must provide a copy of the **constitution** and a **full list of officers**

Please Turn Over

Section A: Information about your organisation

Please complete the following in **BLOCK CAPITALS**

Full name of organisation as shown on your governing documents

Registered Address:

Postcode:

Key contact for communications - full name

Tel:

Mobile:

Email:

Correspondence Address (if different to above)

Postcode:

Legal Status: please confirm the status of your organisation by ticking one of these boxes

Company registered in England and Wales
pursuant to the Companies Act

☐

Company registered in Scotland pursuant to
the Companies Act

☐

Industrial and Provident Society

☐

Unincorporated organisation

☐

Charitable Incorporated Organisation

☐

Charity registered in Great Britain

☐

Other (please specify)

Does your organisation have a governing or regulatory body? If yes, state which

If your organisation is a company incorporated to the Companies
Act please provide company registration number:

If your organisation is an Industrial and Provident Society please
provide company registration number:

If your organisation is a registered Charity please provide Charity
registration number:

If your organisation is regulated by the FSA please provide your
Firm Reference number:

What date was your organisation establish

What does your organisation do?

Please Turn Over

Section B: Information about individuals in your organisation

FIRST AUTHORISED SIGNATORY - PERSON 1*

Title:

Forename(s):

Surname:

Position in organisation:

Time with organisation:

Address:

Postcode:

How long at this address:

Tel:

Email:

National Insurance No:

Date of birth:

***Proof of ID, Address & National Insurance No. must be provided before the individual can be confirmed as an authorised signatory**

Usual signature:

SECOND AUTHORISED SIGNATORY - PERSON 2*

Title:

Forename(s):

Surname:

Position in organisation:

Time with organisation:

Address:

Postcode:

How long at this address:

Tel:

Email:

National Insurance No:

Date of birth:

***Proof of ID, Address & National Insurance No. must be provided before the individual can be confirmed as an authorised signatory**

Usual signature:

Section B continued: Information about individuals in your organisation

THIRD AUTHORISED SIGNATORY - PERSON 3*

Title:

Forename(s):

Surname:

Position in organisation:

Time with organisation:

Address:

Postcode:

How long at this address:

Tel:

Email:

National Insurance No:

Date of birth:

***Proof of ID, Address & National Insurance No. must be provided before the individual can be confirmed as an authorised signatory**

Usual signature:

FOURTH AUTHORISED SIGNATORY – PERSON 4* (optional)

Title:

Forename(s):

Surname:

Position in organisation:

Time with organisation:

Address:

Postcode:

How long at this address:

Tel:

Email:

National Insurance No:

Date of birth:

***Proof of ID, Address & National Insurance No. must be provided before the individual can be confirmed as an authorised signatory**

Usual signature:

Section C: Resolution

How Gateway Credit Union Limited will use and share your information:

Gateway Credit Union will process your data in accordance with your rights under the Data Protection Act 1998. Your information may be processed in any form and on any database used by us for the following purposes:

- to consider any applications made by you;
- to deal with your account(s) or run any services we provide to you;
- to undertake statistical analysis, financial risk assessment, money laundering checks, compliance and regulatory reporting, fraud prevention and debt tracing;
- to help us identify products and services which may be of interest to you (unless you have asked us not to);

To: Gateway Credit Union Limited

We confirm that:

1. We wish to open a Community account with Gateway Credit Union Ltd and that we have the authority within our organisation to do so.
2. We have provided proofs as appropriate from Page 1 to confirm that we are legitimate group opening a Gateway Credit Union Community Account.
3. We agree to abide by the social objects, rules, policies and procedures of Gateway Credit Union.
4. All individuals representing our organisation have completed the required personal details and provided identification documents according to the requirements of Gateway Credit Union.
5. We understand that Gateway Credit Union will rely on the authorised signatories in Section B until it receives written confirmation of changes to these representatives.
6. We understand that our Gateway Credit Union Account will incur a £5 annual Membership Fee which will be taken from our Community Account in September each year.

Sign:

Date:

Supporting documentation required:

Check Page 1 to ensure that you are providing the correct proofs for your organisation as you will be asked for two of the following:

Certificate of Incorporation

Memorandum and Articles of Association

Registration Certificates

Rules

Business/Company Letterhead

Inland Revenue Certificate

Recent utility bill or statement (within 3 months) in the name of the Business and for the Business Premises

Letter from an Accountant or Solicitor

Trust Deed

Full list of Trustees

Constitution

Full list of Officers

Section D: Bank Details



Register a bank account for withdrawals (optional)

Withdrawals over the phone can be authorised (up to £2000 per day) to the registered bank account below.

It is the responsibility of your organisation to ensure that the bank details provided below are of a responsible person.

Name of Responsible Person:

Position in organisation:

Bank Name:

Name on account:

Sort Code:

A/C No:

Bank Account Holder Signature

I hereby accept responsibility for receiving to this bank account, any Gateway Credit Union share withdrawals from our Community Account, without signed authorisation, up to a maximum of £2000 per day.

Sign:

Date:

I hereby confirm that Gateway Credit Union can issue share withdrawals under £2000 from our GCU Community Account to this bank account.

Signatory 1*:

Date:

Signatory 2:

Date:

Signatory 3:

Date:

Signatory 4:

Date:

These bank details will be used for withdrawals under £2000. For any withdrawal of £2000 or more per day, in either a single transaction or due to cumulative requests, a share withdrawal form will need to be completed and signed by at least two authorised signatories.

Two signatories will be required to change this nominated bank account and must be from the current list of authorised signatories held by Gateway Credit Union.

Section E: Declaration

A minimum of two signatures are required below and must be individuals from the list of authorised signatories in Section B of this form:

- We hereby certify that the above details are correct to the best of our knowledge at the time of signing.
- We agree to the terms and conditions of the Gateway Credit Union Community Account and to abide by the rules of Gateway Credit Union Ltd. We understand should we fail to meet any Identification, Anti-Money Laundering, Anti-Fraud and any other Regulatory requirements, that Gateway Credit Union reserves the right to close our Credit Union Community Account.
- We understand that our GCU Community Account will be charged a £5.00 annual membership fee and that this will be deducted from our GCU Share account each Year End in September.

Declaration 1*

Declaration 2*

For office use: