Business Quick Deposit (BQD) Registration Form



How we will use and share your information

We may request information about you from credit reference and fraud prevention agencies to help verify your identity to comply with laws that apply to us.

1. Customer and account details

Please provide the details for the account that will be used for accepting deposits via Business Quick Deposit

Please ensure you provide a Business Current Account Account name Receiving account number Head Office Collection Account number (if applicable)										
Receiving account number Sort code Head Office Collection Account										
Head Office Collection Account										
Please advise the sort code for the branch that you will be using to deposit funds via BQD. You can look up sort codes using this link: https://www.rbs.co.uk/locator . You can add up to three branches on this form.										
Branch sort code(s) 1) 2) 3)										
Please provide your email address. We will use this to contact you regarding the Business Quick Deposit Service. (Where possible please provide a central team mailbox and not a personal email, to minimise changes).										
Email Address										

2. Business Quick Deposit agreement (To be completed by customer)

• Your use of Business Quick Deposit is governed by the Business Quick Deposit Service terms and the Business Account terms (together, the "terms"), which are available for you to read and print online at www.rbs.co.uk/terms entering the terms code YBRUT.

If for any reason you are unable to access the terms online, please contact the bank via your usual channel before proceeding.

By signing:

- You authorise the Bank to credit / debit your account in the event of a difference between the contents of the BQD wallet and the amount quoted on the Bank Giro credit.
- You confirm you have provided a Business Current Account or Head Office Collection account
- You confirm the details on the Application are correct and agree to notify the Bank of any changes.
- You agree to the terms.
- You confirm that you have read and understood how we may use your information in the way described above and in our full Privacy Notice at ww.rbs.co.uk/privacy
- You have full power and authority to sign this form

C: IC I I I IC C								
Signed for and on behalf of								
(Name of communities)								
(Name of company firm)								

3. Customer Signature(s)

Signatory 1

Pleas	e ensure	when	signing thi	s section	that it	is signed	by the	highest	signing	authority	on the	Bank /	Account	Mandate
for e	xample,	if you	require two	people	to sign,	then ple	ase ens	sure two	people	sign this	form).			

,									
Signature		Date							
Full Name									
Position held									
Signatory 2									
Signature		Date							
Full Name									
Position held									
Signatory 3									
Signature		Date							
Full Name									
Position held									
Please complete the Application, and sign, before returning it to your Business Manager/Relationship Manager.									
	Relationship Team Us	se only							
I confirm the customer has provided a Business Current Account or Head Office Collection account number I have checked all the required eligibility criteria and AEDS status of this customer. I authorise the implementation of BQD.									
		ame:							
	Lo	ocation:							
	IS	V number:							
Dat	e (DD/MM/YYYY): C	ontact number:							

Please forward the completed application form to the following email address:

a) CPB Customers - Please send to your sector alligned email box

b) BB Customers - ~ Business Banking NWB