

APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Applicants Name		Date business commenced	
Company name		<input type="checkbox"/> Sole Trader <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Company or PLC <input type="checkbox"/> Other	
Contact Number (Mobile)			
E-mail Address			
Registered company address			

BUSINESS AND CREDIT INFORMATION

Primary Business Trading Address		Bank name and address	
How long at your current address?		Date Bank Account Opened	
Telephone Number		Bank Telephone Number	
Email		Business Account number	

OTHER INFORMATION

Company Registration Number		Are you a Business authorised or regulated by a recognised UK authority*	
Company VAT Number		Who is your Regulating Authority?	
What Is The Nature Of Your Business?		What is your Registration Number?	

***Recognised UK authority would include the Financial Conduct Authority (FCA), the Prudential Regulation Authority (PRA), HMRC, Institute of Chartered Accountants in England and Wales, Solicitors Regulation Authority, Bar Standards Board, the Charities Commission and such other regulatory and professional bodies that we may determine from time to time acting in our sole discretion.**

Please note only businesses regulated by a recognised UK authority are able to open a business account.

AGREEMENT

1. The completion of the form does not form a contract between your Company and Metropolitan Safe Deposits Limited.
2. A surcharge of 15% above our standard list price is charged on all Business Safe Deposit account rental fees.
3. You warrant that you will not use, purport to be or in any way give the impression that you, your employees, agents and or Company have any association with Metropolitan Safe Deposits Limited. For this purpose and not limited to this would include the use of our Company trading addresses, registration of your Company at any of our addresses, use of our logo, use of photographs of our premises in any advertising material including and not restricted to any websites under your control, your employees, agents and or your Company. Note breach of this warrant will result in the closure of your account.
4. THE COMPLETED FORM ALONG WITH THE RELEVANT PHOTO ID SHOULD BE EMAILED TO sjw@metrosafe.co.uk FOR THE ST JOHNS WOOD OFFICE OR bro@metrosafe.co.uk FOR THE BROMPTON OFFICE.

SIGNATURES (TWO REQUIRED) PLEASE ATTACH PHOTO ID FOR EACH SIGNATORY

Director/Partner/Executive Signature		Director/Partner/Executive Signature	
Name and Title		Name and Title	
Date		Date	