

DRUMSHANBO CREDIT UNION

APPLICATION FOR MEMBERSHIP

Name:		Members	ship l	Nun	nber	ſ : .	•••••	•
		PPSN						
Address:								
Occupation:			•••••	••••	· • • • •	••••	•••••	•
Telephone:		Date of I	3irth:	:		/ 	/	•••••
If the applicant	is less than five years at the above address.	, please state the i	imme	dia	te pr	ior		
address:		••••						
I hereby apply	for membership of and agree to abide by th	e rules of the abo	ve cr	edit	t uni	on.		
understand that or my members	n given by me on this form is true and correct any false or misleading information given ship with the credit union may result in terretions that may apply.	by me in connect	ion w	vith	my a	appl	icati	on for
Source of Fun	ds:							
Purpose of the	Account:							
I confirm that	the account is for my own personal use a	and benefit	•••••	•••••	Ye	s/No	D	
If you ticked N	o above, please specify the beneficial owner	er;						-
Applicant's Si	gnature:	Date:	•••••	••••	••••	••••	•	
	E TIME TO READ THE PRIVACY NO							
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	TAKE AWAY AND YOU CAN ACCESS UMSHANBOCU IE	SIREPRIVACI	. NO	H	∠C A	. г. А	INI	TIME

Receipt of obligatory notices by email



There are certain notices that credit unions are obliged to provide from time to time. Please provide your email address if you would like to receive these obligatory, **non-marketing** communications by email (for example notice of the Annual General Meeting). This will assist the Credit Union in reducing its carbon foot print and will also reduce costs.

Email	
address:	

Please note that we maintain the right to contact members by such means as best available to us in relation to a non-performing loan or outstanding debt to the credit union, including by text or email.

Tax Residency for	the	pu	rpe	ose	s of	the	e (Cor	nm	ıor	ı R	er	<u>oor</u>	<u>tin</u>	g	Sta	ınd	<u>lar</u>	<u>d</u>			
- If you are tax resi Nu	dent mber							_			_			•			x Io	den	ıtif	ica	tio	n
1.TIN*																				T		
Country of Tax Residence*		<u> </u>							<u> </u>	<u> </u>	1					<u> </u>	<u> </u>	<u> </u>	<u>I</u>			
2.TIN*																						П
Country of Tax Residence*				<u> </u>							1	1							.1			
I confirm that the information pro- circumstances change, I will notify						orre	ct	to t	he	bes	st o	f n	ny	knc)W	led	ge,	and	l th	iat i	if n	ny
Signature (of Applicant or Parent/									-			Da	ate:									
- If you are <u>not</u> tax resi	dent	in	an	othe	er co	oun	try	y, p	lea	se	sig	n 1	the	fol	llo	wir	ıg:					
I wish to declare that I am not resichange, I will notify the credit uni		for	tax	z pui	rpos	es i	n a	ıny	oth	ner	coi	ını	try,	an	d t	hat	if 1	ny	cir	cur	nsta	ances
Signature (of Applicant or Parent/										Dat	te:											
* Mandatory Field							-		_	-34	- '	,			-		- *					•
**This information is being sou	ght fo	or t	he	pui	rpos	es c	of 1	rep	ort	in	g ol	bli	igat	tion	ıs i	unc	ler	the	e C	on	ıme	on

Reporting Standard (CRS), as provided for by Section 891F of the Taxes Consolidation Act 1997.

The information required to be reported under the CRS, including name, address, date of birth, place of birth, TIN, account number, account balance and payments on the account will be provided to the Revenue Commissioners and may be exchanged securely with another Competent Tax Authority in your jurisdiction of tax residence, but such information will at all times be treated with the strictest confidentiality as required by the Data Protection Acts 1988 and 2003 as amended by any national legislation and the GDPR 2016 from 25th May 2018. Only data that is legally required to be reported will be provided to the Revenue Commissioners. For more information on this, please speak to your credit union, contact Revenue at aeoi@revenue.ie or see http://www.revenue.ie/en/business/aeoi/

Your Marketing Preferences



As part of improving our service to you, from time to time, we would like to inform you of goods, services, competitions and/or promotional offers available from us. We may wish to use different means when sending such marketing communications. Please now indicate by which methods, **if any**, you consent to being contacted by ticking **Yes** to each method of communication below-

	Yes
Post	
Email	
Text	
Landline call	
Mobile call	
EAGM Booklet	

Signature of applicant	
Date:	DD MM YYYY

You have a right to notify us free of charge at any time of your right to refuse such marketing by writing to/emailing info@drumshanbocu.ie or by using the "opt-out" options in any marketing message we send you.

Please contact us directly should you wish to change or withdraw your consent.

SUPPLEMENTARY MEMBERSHIP APPLICATION INFORMATION

Politically Exposed Person (PEP)

"Politically Exposed Person" means an individual who is, or has at any time in the preceding 12 months been, entrusted with a prominent public function, including either of the following individuals (but not including any middle ranking or more junior official):

- a) A specified official;
- b) A member of the administrative, management or supervisory body of a state-owned enterprise;

"Specified official" means any of the following officials (including any such officials in an institution of •the European Communities or an international body):

- I A head of state, head of government, government minister or deputy or assistant government minister;
- II A member of a parliament;
- III A member of a supreme court, constitutional court or other high-level judicial body whose decisions other than in exceptional circumstances, are not subject to further appeal;
- IV A member of a court of auditors or of the board of a central bank;
- V An ambassador, chargé d'affairs or high-ranking officer in the armed forces.

Section 37 (10) of the CJA2010

"Close Associate"

In this section "close associate" of a politically exposed person includes any of the following persons:

- a) Any individual who has joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with the politically exposed person;
- b) Any individual who has sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the politically exposed person;

Section 37 (10) of the CJA2010

"Immediate Family Member"

"immediate family member" of a politically exposed person includes any of the following persons:

- a) Any spouse of the politically exposed person;
- b) Any person who is considered to be equivalent to a spouse of the politically exposed person under the national or other law of the place where the person or politically exposed person ill resides;
- c) Any child of the politically exposed person;
- d) Any spouse of a child of the politically exposed person;
- e) Any person considered to be equivalent to a spouse of a child of the politically exposed person under the national or other law of the place where the person or child resides;
- f) Any parent of the politically exposed person;
- g) Any other family member of the politically exposed person who is of a prescribed class;

The Minister may prescribe a class of family member of a politically exposed person, for the purposes of paragraph (g) of the definition of "immediate family member" of a politically exposed person in subsection (10), only if the Minister is satisfied that it would be appropriate for the provisions of this section to be applied in relation to members of the class, having regard to any heightened risk, arising from their close family relationship with the politically exposed that such members may be involved in money laundering or terrorist financing.

Section 37 (11) of the CJA2010

All Credit Unions are obliged to comply with the legislation that Government has enacted to combat money laundering and the financing of terrorism. This legislation is called the "Criminal Justice (Money Laundering and Terrorist Financing) Act, 2010" and the "criminal Justice Act, 2013". In accordance with this legislation, we are required to obtain answers from all our members to the following questions. We should be grateful if you would tick the relevant boxes on this form. An explanation of terms is available opposite.

Please tick (\checkmark) the relevant box to answer the following questions:

 1) Are you a: a) Politically Exposed Person (PEP) b) Close associate of a PEP* c) Family member of a PEP* *as defined In Section 37 (10) of the Criminal Justice (2010), 	Yes Yes Yes Money Lat	□ □ □ underin§	No □ No □ No □ s and Terrorist Financing) Act,
If the answer to any of the above is "Yes", please a) b) c) 2) Are you the beneficial owner of the funds in your Yes □ No □ If the answer is "No", please explain why here:			- - t account?
I will promptly notify the Credit Union of any changes confirm that I will inform the Credit Union in writing or relevant/material information of which I may become a Signature: Print Name (Block Letters)	of the detail ware at an	ls of suc y after t	ch changes and any other

Deposit Guarantee Scheme - Depositor Information Sheet

Basic information about the pr	otection of your eligible deposits
Eligible deposits in Drumshanbo Credit Union Limited are protected by: -	The Deposit Guarantee Scheme ("DGS")
Limit of protection:	€100,000 per depositor per credit institution
If you have more eligible deposits at the same credit institution:	All your eligible deposits at the same credit institution are 'aggregated' and the total is subject to the limit of €100,000
If you have a joint account with another person(s):	The limit applies to each depositor separately
Reimbursement in case of credit institution's failure:	15 working days
Currency of reimbursement:	Euro or, for branches of Irish banks operating in another member state of the EEA, the currency of that member state
To contact Drumshanbo Credit Union for enquiries relating to your account:	Drumshanbo Credit Union
account.	The Square,
	Drumshanbo,
	Co. Leitrim
	Tel: 071-9641727
	Email info@drumshanbocu.ie
To contact the DGS for further information on compensation:	
To comme the 2-35 to think morning on compensation	Deposit Guarantee Scheme
	Central Bank of Ireland
	New Wrapping Street
	North Wall Quay
	Dublin 1
	D01 F7X3
	Tel: 0818 681681
	Email:info@depositguarantee.ie
More Information:	www.depositguarantee.ie
Acknowledgement required of this document by Depositor:	
Date:	

(THIS SECTION IS TO BE COMPLETED BY THE CREDIT UNION)

Evidence of Identification

(Copies <u>must</u> be attached)

Note that as at April 2018 the Public Service Card cannot be accepted as a form of identification/PPSN verification.

(Complete one or more of the following)	
Current Valid Passport	
Current Valid Driving Licence	
National Identity Card	
Other Please specify	
Evidence of Address Verification	(Copies must be attached)
(Complete one or more of the following)	
Original Recent Household Bill	
Electoral Register	
Document from Revenue Commissioners	
or other Government Departments	
Original Recent Bank/Building Society Statement	
Telephone/Street Directory	
Other* *Please specify	
Application approved and details verified in accordance with	the standard rules by:
Signed:	(Membership Committee)
Date: / /	