



Getting to know you – Customer declaration form

Customer name	<input type="text"/>
Account number	<input type="text"/>
Date of transaction	<input type="text"/>
Transaction Amount	<input type="text"/>

Source Type (please tick)

- | | |
|--|--|
| <input type="checkbox"/> Income or Savings from salary | <input type="checkbox"/> Lottery / gambling win |
| <input type="checkbox"/> Sale of property | <input type="checkbox"/> Loan |
| <input type="checkbox"/> Inheritance | <input type="checkbox"/> Pension |
| <input type="checkbox"/> Accumulated savings | <input type="checkbox"/> Compensation award |
| <input type="checkbox"/> Sale of shares or other investments / maturing investment | <input type="checkbox"/> Dividend payment |
| <input type="checkbox"/> Company sale | <input type="checkbox"/> Redundancy |
| <input type="checkbox"/> Company profit | <input type="checkbox"/> Property Portfolio Income |
| <input type="checkbox"/> Gift | <input type="checkbox"/> Other (Specify below) |
| <input type="checkbox"/> Divorce settlement | |
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Detail

Please provide details sufficient to enable us to reasonably evidence the source of funds. Include names of the sources (e.g. Employer, bank, person etc.), dates received, amounts, different transfers between accounts etc. Please use the enclosed Acceptable Documents list as a guide for the details required.

Continue on a separate sheet if required.



Evidence

Please provide documentary evidence that supports your declaration above. This documentary evidence must clearly evidence how this money has been received and where from. A history of the money for a period of 12 months (or up to the point of receipt if less than 12 months) will be required up to the point and including the transfer to your savings account.

Gaps in the audit trail, or history of the funds may result in further evidence being requested.

Account holder 1 declaration

I _____ (insert name)
confirm that the information provided is accurate
and complete.

Signed

Date

Account holder 2 declaration

I _____ (insert name)
confirm that the information provided is accurate
and complete.

Signed

Date

Please return the declaration and supporting documents using the prepaid envelope provided.

We're here to help, 7 days – if you have any questions,
please e-mail hello@rcibank.co.uk or call us on **0345 6056 050**.

Braille, large print and audio versions available on request.

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