

Please note – when filling out this form please use the tab and arrow keys to move between the relevant fields. Ensure you do **not** use the return or enter keys. Please complete in BLOCK CAPITALS and return to your Programme Co-ordinator.

Programme Co-ordinators:

- If this is a new OneCard programme, please return this form to your Relationship Manager with the main Application & Agreement Form.
- If this is an additional card to your existing OneCard programme, please forward the completed and signed form to Ulster Bank Ireland Limited, Commercial Cards Division, PO Box 4015, Dublin 2.
- If this is an additional card please consider if you require a higher business credit limit (please refer to your Relationship Manager if required).

How we will use your information

Before continuing with this application, please read the information below which explains how we and others will use your personal and financial information during this application process. When we use and share personal and financial information, we do so on the basis that we have a legitimate interest to prevent fraud and money laundering, to manage our risk and to protect our business and to comply with laws that apply to us (including verifying your identity and assessing the suitability of our products).

Notice: Under the Credit Reporting Act 2013 lenders are required to provide personal and credit information for credit applications and credit agreements of €500 and above to the Central Credit Register. This information will be held on the Central Credit Register and may be used by other lenders when making decisions on your credit applications and credit agreements.

The Central Credit Register is owned and set up by the Central Bank of Ireland under the Credit Reporting Act 2013.

For more information, including your rights, see www.centralcreditregister.ie.

Credit Reports – What are my rights?

The Central Bank will publish on www.centralcreditregister.ie the exact date when credit reports will become available.

When credit reports become available, you will have a right to:

1. request your credit report at any time – and the first credit report each calendar year is free;
2. insert a 200-word explanatory statement on your credit report;
3. apply to have your information amended if you believe it is inaccurate, incomplete or out of date.
4. make a report to the Central Credit Register if you reasonably believe that someone has, is, or is about to impersonate you.

For full details about how we use the personal and financial information of our customers, please see our full Privacy Notice at ulsterbank.ie/privacy

Who we are

The organisation responsible for processing your personal and financial information is Ulster Bank Ireland DAC, a member of NatWest Group.

Business Details* (* denotes a mandatory field)

Company / Organisation name*

Under the Credit Reporting Act 2013 you must provide additional information.

- **Please complete the Entity Verification Table on next page.**
- **Please enter the corresponding Entity Type, Entity Identification Number and Tax Registration Number below.**

Entity Type*

(Please refer to the Entity Verification Table for guidance)

Entity Identification Number*

Tick box to specify type ☐ Company Registration Number (CRN/CRO) ☐ Personal Public Service Number (PPSN)
☐ Business Registration Number (BRN) ☐ Individual Tax Number (ITN)
☐ Legal Entity Identifier (LEI)

Tax Registration Number*

If your application is successful, verification documentation may be required to validate:

- **Address Details**
- **Entity Identification Number**
- **Tax Registration Number**

Entity Verification Table

The Credit Reporting Act of 2013 requires the correct Entity Type, Entity Identification Number and Tax Registration Number to be provided for all lending applications and appropriate evidence to be held by Ulster Bank to support these details.

- Please confirm your business Entity Type by ticking one of the boxes in the table below
- Please provide the required Entity Type, Entity Identification Number and Tax Registration Number in the corresponding fields in the main body of the application form as explained below
- Evidence may be required for both your Entity Identification Number and Tax Registration Number corresponding to box ticked below
 - Ref. A & B: (from table below) Any document from Revenue / Social Services i.e. Tax Clearance Certificate (Social Services card not accepted)
 - Ref. 1-8, 12-15, 18: (from table below) Certificate of Incorporation and Tax Clearance Certificate
 - Ref. 9-11, 16-17, 19-22: (from table below) An official document detailing CRO / BRN / LEI / PPSN / ITN and Tax Clearance Certificate

Check Box (X)	Ref.	Entity Type	Entity Identification Number (evidence may be required)	Tax Registration Number (evidence may be required)
<input type="checkbox"/>	A	Sole Trader (Individual) – ROI (only ROI addresses)	Personal Public Service Number (PPSN) or Business Registration Number (BRN)	Tax Registration Number (same number as PPSN)
<input type="checkbox"/>	B	Sole Trader (Individual) – Non ROI (one or more Non–ROI addresses)	Personal Public Service Number (PPSN); or a Tax Registration Number	
<input type="checkbox"/>	1	Private Company Limited by Shares (LTD company)	Company Registration Number (CRO)	Tax Registration Number
<input type="checkbox"/>	2	Designated Activity Company (DAC) – (limited by shares)		
<input type="checkbox"/>	3	Designated Activity Company Limited by Guarantee (DAC) – (limited by guarantee)		
<input type="checkbox"/>	4	Company Limited by Guarantee (CLG) (limited by guarantee not having a share capital)		
<input type="checkbox"/>	5	Public Limited Company (PLC)		
<input type="checkbox"/>	6	Single Member Company		
<input type="checkbox"/>	7	Unlimited company		
<input type="checkbox"/>	8	Special fund		
<input type="checkbox"/>	9	Undertakings for Collective Investment in Transferable Securities (UCITS)	Any one Entity Identification Number from those listed in the main application form	Tax Registration Number
<input type="checkbox"/>	10	European Economic Interest Groupings (EEIG)		
<input type="checkbox"/>	11	Societas Europaea (SE)		
<input type="checkbox"/>	12	Industrial and Provident Society	Company Registration Number (CRO)	Tax Registration Number
<input type="checkbox"/>	13	Friendly Society		
<input type="checkbox"/>	14	Trade union		
<input type="checkbox"/>	15	Limited Liability Partnership		
<input type="checkbox"/>	16	Other legal form (ROI)	Any one Entity Identification Number from those listed in the main application form	Tax Registration Number
<input type="checkbox"/>	17	Other legal form (non ROI)		
<input type="checkbox"/>	18	Partnership	An identification number is not mandatory, but if available, it should be populated with Business Registration Number (BRN)	If available please provide a Partnership Tax Registration Number
<input type="checkbox"/>	19	Club	An identification number is not mandatory	If available please provide a Tax Registration Number
<input type="checkbox"/>	20	Association		
<input type="checkbox"/>	21	Unincorporated charity		
<input type="checkbox"/>	22	Other non legal form		
		Foreign company not listed above should be checked as 17 Other Legal Form (non ROI)	One identification number is required (by order or preference): Registered Company Number (non ROI), Legal Entity Identifier number, Tax Registration Number (non ROI)	

1. Cardholder details

Please complete in BLOCK CAPITALS

Title Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐
(please specify)

First name*

Middle name(s)

Surname*

Name as you wish it to appear on the card*

(title, first name and surname – maximum of 21 characters including spaces)

Must be completed

Residential address*

Address line 2

Address line 3

Address line 4

Email address

Preferred daytime contact number (including extension if applicable)*

Mobile number*

What is the nationality of the cardholder?*
(must be completed)

Security password from the cardholder for identification (maximum of 20 characters with no spaces)*

(must be completed)

Date of birth to help us identify the cardholder (DD/MM/YYYY)* (must be completed)

How we will use and share your information

(a) The Central Credit Register, credit reference and fraud prevention agencies

We may request information about you from the Central Credit Register and credit reference agencies to check your credit status to help assess what product you are most suitable for and/or your ability to repay any credit.

They may keep a record of our request(s) and this may affect your ability to obtain credit elsewhere.

Further information about the Central Credit Register and how they use personal information, can be obtained from the Central Credit Register (www.centralcreditregister.ie)

Application decisions may be taken based on solely automated checks of information from the Central Credit Register, credit reference agencies and internal NatWest Group records. You have rights in relation to automated decision making. If you want to know more please see our full privacy notice at ulsterbank.ie/privacy or contact us at the following numbers: 1800 283062 - Opening hours are Mon to Sun 08.00 - 22.00, from abroad 003531 804 7475; lines are open 24/7.

In order to prevent and detect fraud and/or money laundering, the information provided in this application may be checked with fraud prevention agencies. If fraud is identified or suspected details may be recorded with these agencies to prevent fraud and money laundering.

If we, or a fraud prevention agency, determine that you pose a fraud or money laundering risk, we may refuse to provide the services and financing to you.

When the Central Credit Register, credit reference and fraud prevention agencies process your information, they do so on the basis that they have a legitimate interest in preventing fraud and money laundering, to protect their business and to comply with laws that apply to them.

(b) With other NatWest Group companies

We and other NatWest Group companies worldwide will use the information you supply in this application (and any information we or other NatWest Group companies may already hold about you) in connection with processing your application and to assess your suitability for our products.

If your application is declined we will normally keep your information for up to 7 years, but we may keep it for longer if required by us or other NatWest Group companies in order to comply with legal and regulatory requirements.

We and other NatWest Group companies may use your information in order to improve the relevance of our products and marketing.

(c) With other third parties

The information provided in this application may be used for compliance with legal and regulatory screening requirements, including confirming your eligibility to hold a bank account and sanctions screening.

We may be required to disclose certain information to regulators, government bodies and similar organisations, including the name, address, tax number, account number(s), total gross amount of interest paid or credited to the account and the balance or value of the account(s) of our customers to the Office of the Revenue Commissioners. The Office of the Revenue Commissioners may exchange this information with other countries' tax authorities.

Marketing information

If you agree, we would like to keep you informed about products, services and offers that we believe may be of interest to you. Please let us know how you would like to be informed:

Letter ☐ Phone ☐ Email ☐ Text ☐

We will not share your information with third parties for their own marketing purposes.

Confirming your agreement

By continuing with this application, you confirm that you have read and understood how we may use your information in the ways described above and are happy to proceed.

2. Authorisation by the business

Please issue an Ulster Bank OneCard to the person named in section 1, who is authorised by the business to undertake card transactions as defined in the Terms and Conditions. The business agrees that it will meet all expenditure and other charges and interest incurred through the use of the Card.

Company/Organisation Name*

If you have an existing OneCard account, please insert your 16 digit number as shown on your Summary Statement.*

5 5 6 9

7 0

Spending controls required

What monthly credit limit is required for this cardholder?* €

Is a cash withdrawal facility required?*

Yes

☐

No

☐

Is a single transaction limit required?

Yes

☐

No

☐

If 'Yes', how much? €

If you wish to block certain spending categories for this cardholder, please apply for individual blocking by completing the Diversion Billing and Individual Blocking Form 3.

The Bank will only accept requests to issue cards or make changes to this agreement from the Authorised Signatories in writing. These requests must be in accordance with the authority held by the Bank.

IMPORTANT CUSTOMER NOTICE:

BY PROCEEDING YOU ARE ACKNOWLEDGING AND AGREEING THAT YOU UNDERSTAND THAT ULSTER BANK IRELAND DAC HAS MADE AN ANNOUNCEMENT THAT THE BANK HAS COMMENCED A PHASED WITHDRAWAL FROM THE IRISH BANKING MARKET WHICH WILL BE LIKELY TO RESULT IN THE TRANSFER OF YOUR PRODUCT TO ANOTHER PROVIDER.

Primary authorised signature*

In accordance with the authority held by the Bank

Primary Authorised Signatory Name
(title, first name and surname)

Date (DD/MM/YYYY) _____

Secondary authorised signature

In accordance with the authority held by the Bank

Secondary Authorised Signatory Name
(title, first name and surname)

Date (DD/MM/YYYY) _____

For Relationship Manager use only

IMPORTANT – Please ensure sanction documentation is attached to this application.

Relationship Manager name _____

Portfolio code _____

RM contact number _____

Internal email address _____

BIN -

(Relationship Managers only enter last 9 digits)

Business Current Account Number

Sort code

SIC code

☐ CCR Application Enquiry completed along with identification number captured and verification received if additional borrowing requested.

I confirm the application has been signed by the authorised signatories as per the bank mandate.

Signed for and on behalf of Ulster Bank Ireland Limited

Relationship Manager's signature

My ISV number is

Date (DD/MM/YYYY) _____