



	Debenture Reference No.(s)			Total Value : £		
	1. Details of the Organi	sation				
	Name:					
	Registered Address:					
	Email:					
	Contact No.:					
	Name of Investment:					
	2. Primary Contact Det	ails				
	Please note that these details will be the point of contact for this Investment Account. Correspondence Address:					
	Email:			Contact No.:		
	3. Details of the author	ised signatories				
.1	Forename(s)		Surname(s)		Date of Birth	
	Position in Organisation	Telephone:		Email:	DD MM YYYY	
2	Forename(s)		Surname(s)		Date of Birth DD MM YYYY	
	Position in Organisation	Telephone:		Email:		
3	Forename(s)		Surname(s)		Date of Birth	
	Position in Organisation Telephone:			Email:	DD MINI 1111	
	Forename(s)		Surname(s)		Date of Birth	
	Position in Organisation	Telephone:		Email:		
	Please specify the number are required. Please tick box if another form is	*	quired to auth	norise any transaction.	A minimum of two signatures	

4. Reinvestment Details

Minimum investment £1,000

Investment	Interest Rate	Amount
1-Year Fixed Term Monthly Income Registered Debentures	3.75%	
3-Year Fixed Term Monthly Income Registered Debentures	4.00%	
5-Year Fixed Term Monthly Income Registered Debentures	4.25%	
	Total Value £	

Maturity Instructions - Ordinary Deposit Account No. Account No. Account Name	nt Details					
Please tick the appro	opriate box: Existing Account New Account					
Interest Payment Instructions Bank	Sortcode Account No.					
Reference (If applicable) Account Name						
Please tick the appropriate box: Existing Payment Instruc	tion New Payment Instruction (Proof is required, e.g. Bank Statements)					
Declarations I/We hereby confirm acceptance of the rate of for the duration of the term of the Year Fixed Term Registered Debenture.						
5. Signatures						
I/We accept the terms and conditions of investment as specified in the Prospectus and General Conditions and hereby apply to open the following Gibraltar Savings Bank Debenture Account:						
Signatory 1 Signature	Signatory 2 Signature					
Date: DD MM YYYY	Date: DD MM YYYY					
Signatory 3 Signature	Signatory 4 Signature					
Date: DD MM YYYY	Date: DD MM YYYY					
6. Data Protection – How we use your Information We treat all the information you give us about you and others as private and confidential. We respect your right to privacy and understand the importance of protecting the personal information that we hold. See our privacy notice for full details – available at www.gsb.gov.gi or by calling us. For GSB Use Only						
Processed by: Verifie	ed by: Date:					
	DD MM YYYY					