



Debenture Reference No.(s)	Total Value : £			
1. Account Type				
(Please tick appropriate box)	Joint			
Individual	OR If 'Joint' is ticked please select	ct a box below		
	And	* And / Or		
2. Details of Applicant(s)	i			
A.1 Forename(s)	Surname(s)	Date of Birth		
A.2 Forename(s)	Surname(s)	Date of Birth		
A.3 Forename(s)	Surname(s)	Date of Birth		
		DD MM YYYY		
A.4 Forename(s)	Surname(s)	Date of Birth		
		DD MM YYYY		
	If applicable only			
This section is ONLY to be completed for investments held on behalf of a minor				
M.1 Minor's Forename(s)	Minor's Surname(s)	Date of Birth		
		DD MM YYYY		
Relationship to Applicant **				
M.2 Minor's Forename(s)	Minor's Surname(s)	Date of Birth		
		DD MM YYYY		
Relationship to Applicant **				
3. Primary Contact Details				

Please note that these details will be the point of contact for this Investment Account.

Correspondence Address:	
Email:	Contact No.:

*We understand and accept that the GIBRALTAR SAVINGS BANK (GSB) will consider itself discharged of its liabilities if any monies are paid to any one of the account holders.

**Parent / Legal Guardian will also be required to sign the form if not applicants (see overleaf)

4. Reinvestment Details

Section (A) - 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 Details

Account No.	Account Name			
	Please tick the appropriate box:	Existing Account	New	Account

Declarations

I/We hereby confirm acceptance of the rate of ______ for the duration of the term of the__ Year Fixed Term Registered Debenture.

Section (B)

Investment	Interest Rate Per Annum	Amount
10-Year Fixed Term Pensioner Monthly Income Debentures (conditions of eligibility apply, see below) ***	Fixed @ 5%	

5. Interest Payment Instructions

Bank		Sortcode	Account No.	
Reference (If applicable)	Account Name			
Please tick the appropriate box:	Existing Payment Instruction		New Payment Instruction Proof is required, e.g. Bank Statements)	

6. Signatures

lump sum payment in lieu of a pension.

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:

Applicant 1 Signature		Applicant 2 Signature	
Date:	DD MM YYYY	Date:	DD MM YYYY
Applicant 3 Signature		Applicant 4 Signature	
Date:	DD MM YYYY	Date:	DD MM YYYY

7. 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:	Verified by:
Pensioner Verified:		
***The interpretation of a pensioner for this purp	ose means a resident individual aged 60 vears or over	; or who has retired and is in receipt of a pension or has received a

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