



Debenture Reference No.(s)	Tot	Total Value : £	
1. Account Type			
(Please tick appropriate box) Individual	Joint OR If 'Joint' is ticked And	d please select a box below And / Or	
2. Details of Applicant(s)	1		
A.1 Forename(s)	Surname(s)	Date of BirthDDMMYYYY	
A.2 Forename(s)	Surname(s)	Date of BirthDDMMYYYY	
A.3 Forename(s)	Surname(s)	Date of Birth DD MM YYYY	
A.4 Forename(s)	Surname(s)	Date of Birth DD MM YYYY	
This section is ONLY to be comple	If applicable only		
M.1 Minor's Forename(s)	Minor's Surname(s)	Date of Birth	
Relationship to Applicant **			
M.2 Minor's Forename(s)	Minor's Surname(s)	Date of Birth	
Relationship to Applicant **			
3. Primary Contact Details			
Please note that these details will b	be the point of contact for this Investment Acco	ount.	

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.

4. Reinvestment Details

Section (A) - Minimum investment £1,000

Investment	Interest Rate	Amount
1-Year Fixed Term Monthly Income Registered Debentures	4.75%	
3-Year Fixed Term Monthly Income Registered Debentures	4.50%	
5-Year Fixed Term Monthly Income Registered Debentures	4.25%	
	Total Value £	

Maturity Instructions - O	rdinary Deposit Account Details		
Account No.	Account Name		
	Please tick the appropriate box:	Existing Account	New Account
Declarations			
I/We hereby confirm acc Year Fixed Term Registe	ceptance of the rate of for the d red Debenture.	uration of the term of t	he
Section (B)			
	Investment	Interest Rate Per Annum	Amount
10-Year Fixed Term Pen (conditions of eligibility	sioner Monthly Income Debentures apply, see below) ***	Fixed @ 5%	
5. Interest Payment Instru	actions		
Bank Reference (If applicable)	Account Name	Account N	Jo.
Please tick the appropriate box:	Existing Payment Instruction	New Payment Instru (Proof is required, e	uction g. Bank Statements)
6. Redemption Details			
	e above-mentioned Debenture Reference N e bank/ordinary deposit account where th		tand that the capital will
		Total Value £	
7. Signatures			
1	nditions of investment as specified in the Gibraltar Savings Bank Debenture Account	1	l Conditions and hereby
Applicant 1 Signature	Applica	nt 2 Signature	
Date:	DD MM YYYY	Date:	D MM YYYY

Applicant 3 Signature

Date	e: DD MN
Applicant 4 Signatur	re
Date	e: DD M

8. Data Protection – How we use your Information

Date:

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 purpose means a resident individual aged 60 years or over, or who has retired and is in receipt of a pension or has received a lump sum payment in lieu of a pension.