SBI UK

Registration of Power of Attorney (POA)

Before filling this form:

- If you need any further assistance with the completion of this form, please visit your nearest SBI UK Branch.
- For more details on POA (Power of Attorney), please visit our website https://sbiuk.statebank/power-of-attorney or https://www.gov.uk/power-of-attorney,
- Please ensure that the details provided are correct and up to date.
- Ensure you have an active LPA code and all relevant documents to bring or send them to the branch.
- Note: If you require any support implementing or registering an LPA, please contact the OPG, Citizens' Advice or a solicitor.

When filling out this form, please:

- Write INSIDE the boxes.
- Use BLOCK CAPITALS and black ink.
- DO NOT cross out any sections that you do not need to complete.

This helps us process the document quickly, as it gets scanned electronically. If you want to register more than one LPA with us, you'll need to complete a separate form for each account holder (donor).

See below list of documents required:

Role/Document Name/ Change in Details	Documents Required
Named Attorney	• Certified copy of proof of ID • Certified copy of proof of address

Photo identification	Proof of address
• A valid signed UK Passport • A U.K. armed forces identity card or current national identity card issued by Government (this should contain name of the issuing authority, full name, date of birth, address and photograph and signature of the customer) • An identity card issued by the Electoral Office for Northern Ireland • A valid old style UK full or provisional UK driving license. • For non-resident accounts, social security cards issued by respective Governments or a valid voters ID (this should contain name of the issuing authority, full name, date of birth, address and photograph and signature of the customer)	• Current (within the last 3 months) bank statements or credit/debit card statements, issued by an FCA regulated financial sector firm in the UK, EU or comparable jurisdiction (excluding those printed off the internet) • Full/provisional UK driving license or foreign photocard driving license (if not already used to verify ID) • Utility bills (within the last 3 months • Tenancy agreement from Council/Housing Association. The tenancy period should be for a minimum period of three months. Private tenancy agreements are not accepted. • TV License document less than 12 months old. • Department for Works and Pensions Certified Letter (within the last 3 months) • Current (within the last 3 months) Mortgage Statement, issued by an FCA regulated financial sector firm in the UK, EU or comparable jurisdiction **(excluding those printed off the internet)**

When you have completed this form take or send it, and all required documents as outlined in the accompanying guide, to a branch of SBI UK. We will copy the identification documents and submit the form for processing.

SECTION A

Capacity Status of Donor

Please inform us whether or not the donor is mentally capable of managing their own financial affairs. You should select the same box as you selected on your LPA form.

Please tick the appropriate option below.

☐ Donor **is not** mentally capable of managing their own financial affairs.

☐ Donor **is** mentally capable of managing their own financial affairs.

Dated (date LPA was set up) ☐☐ / ☐☐ / ☐☐☐☐

Please input your verification code from the OPG

And registered with the office of the Public Guardian on ☐☐ / ☐☐ / ☐☐☐☐

Donor's Account Details

Donor's Full Name

Donor's Customer ID:

Account Number:

Donor Personal details

Title:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

First Name

Middle Name(s)

Surname

Date of birth ☐☐ / ☐☐ / ☐☐☐☐

Nationality

Address

Postcode

Mobile Phone Number

Email Address

SECTION B

How are the Attorney (s) appointed?

Select how the Attorney(s) have been appointed.

☐ Sole- one Attorney Appointed

☐ Jointly- Two or more Attorney's appointed, who must act together.

☐ Jointly & Severally- Two or more Attorney's appointed, who can act independently of each other.

☐ Jointly for some decisions, jointly and severally for other decisions- Two or more Attorney's appointed, who can act either together or independently, according to instructions given by the Donor.

Number of Attorneys

How many Attorneys are appointed in the Power of Attorney documents?

☐ One ☐ Two ☐ Three ☐ Four

Details of 1st Attorney

Title:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

First Name | Middle Name(s) | Surname

Date of birth (__/__/____) | Relationship to Account Holder | Nationality

Are you a US citizen, US green card holder or US resident? ☐ Yes ☐ No

If yes, please provide your Tax Identification Number (TIN).

Address | Postcode

Mobile Phone Number | Email Address

Access Options

What access to the Donor's account(s) is required by the Attorney?

Note – the services below are not available where the Attorneys have been appointed 'Jointly'.

Branch Counter Service: ☐ Yes ☐ No Debit Card: ☐ Yes ☐ No

1st Attorney Signatory (Signature: Please keep inside the box)

Details of 2nd Attorney

Title:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

First Name | Middle Name(s) | Surname

Date of birth (__/__/____) | Relationship to Account Holder | Nationality

Are you a US citizen, US green card holder or US resident? ☐ Yes ☐ No

If yes, please provide your Tax Identification Number (TIN).

Address | Postcode

Mobile Phone Number | Email Address

Access Options

What access to the Donor's account(s) is required by the Attorney?

Note – the services below are not available where the Attorneys have been appointed 'Jointly'.

Branch Counter Service: ☐ Yes ☐ No Debit Card: ☐ Yes ☐ No

2nd Attorney Signatory (Signature: Please keep inside the box)

Details of 3rd Attorney

Title:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

First Name | Middle Name(s) | Surname

Date of birth (DD/MM/YYYY) | Relationship to Account Holder | Nationality

Are you a US citizen, US green card holder or US resident? ☐ Yes ☐ No

If yes, please provide your Tax Identification Number (TIN).

Address | Postcode

Mobile Phone Number | Email Address

Access Options

What access to the Donor's account(s) is required by the Attorney?

Note – the services below are not available where the Attorneys have been appointed 'Jointly'.

Branch Counter Service: ☐ Yes ☐ No Debit Card: ☐ Yes ☐ No

3rd Attorney Signatory (Signature: Please keep inside the box)

Details of 4th Attorney

Title:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

First Name | Middle Name(s) | Surname

Date of birth (DD/MM/YYYY) | Relationship to Account Holder | Nationality

Are you a US citizen, US green card holder or US resident? ☐ Yes ☐ No

If yes, please provide your Tax Identification Number (TIN).

Address | Postcode

Mobile Phone Number | Email Address

Access Options

What access to the Donor's account(s) is required by the Attorney?

Note – the services below are not available where the Attorneys have been appointed 'Jointly'.

Branch Counter Service: ☐ Yes ☐ No Debit Card: ☐ Yes ☐ No

4th Attorney Signatory (Signature: Please keep inside the box)

Terms and Conditions

We may share your personal data with, and obtain personal data about you from, credit reference agencies or fraud prevention agencies for use in verifying your identity, credit decisions and for fraud and money laundering prevention. If fraud is detected, you could be refused certain services, finance, or employment. Further details explaining how the personal data held by fraud prevention agencies may be used can be found on our website here.

We will not disclose any personal data to any company outside the State Bank Group except to help prevent fraud, or if required to do so by law. For further information on how your personal data is used, how we maintain the security of your personal data and your rights to access personal data we hold on you, please see our Privacy Policy, a copy of which can be found here or contact us at customerservices.sbiuk@statebank.com marking the correspondence for the attention of the Data Protection Officer.

Marketing

The State Bank of India (UK) Ltd would like to send you information about special offers you may be entitled to or about products and services available from the State Bank Group that may be of interest to you. If you agree to being contacted for this purpose, please read our Privacy policy and then tick the relevant boxes below to indicate your preferred method of contact.

☐ Post ☐ Email ☐ Phone ☐ SMS

Service Updates

We will contact you via email and/or SMS with service updates regarding your account with us. We will also send you mobile alerts to keep you advised of your regular banking transaction details.

I/we understand that the information I/we have given to the bank and other information I/we give to the bank (described in the section of the Bank's Terms and Conditions relating to Data Protection) will be used for the purposes set out in that section.

I/we understand that the mobile number provided in the application form will be used to send the One-Time Passcode (OTP) while adding / registering Beneficiaries to the account for Online Banking Transactions.

I/we have read and I/we understand this forms part of our contract with the Bank. If there is anything in the Bank's Terms and Conditions which I/we do not understand or wish to discuss I/we will contact 0800 532 532 (24/7) at the Bank before signing this form.

I/we are aware that I/we can also access the Bank's Terms and Conditions, information about Tariff of charges and Summary of information about the products on your website sbiuk.statebank.

I/we agree to provide to the Bank in writing notice of any changes to my/our personal details or my/our circumstances which are provided in this form.

By submitting this form, I/we confirm that the information I/we have provided is true to the best of my/our knowledge.

Declaration

As the appointed attorney(s) for the account holder named in Section A of this form, I (each of us) agree:

- Have never been declared bankrupt. That I am not bankrupt.
- To inform SBI UK if there is any change in my or account holder's address.
- To follow the terms and conditions of the accounts.

All Attorneys must sign the Declaration.

Attorney 1 Name:

Date: / /

Attorney 1 Signature

Attorney 2 Name:

Date: / /

Attorney 2 Signature

Attorney 3 Name:

Date: / /

Attorney 3 Signature

Attorney 4 Name:

Date: / /

Attorney 4 Signature