

– If you are tax resident in another country, please provide your Tax Identification Number (“TIN”) and Country of Tax Residence:

I confirm that the information provided is true and correct to the best of my knowledge, and that if my circumstances change I will notify the Credit Union:

..... Date

..... Date

****This information is being sought for the purposes of reporting obligations under the Common Reporting Standard (CRS), as provided for by Section 891F of the Taxes Consolidation Act 1997. The information required to be reported under the CRS, including name, address TIN account number, account balance and payments on the account will be provided to the Revenue Commissioners and may be exchanged securely with another Competent Tax Authority in your jurisdiction of tax residence, but such information will at all times be treated with the strictest confidentiality as required by the Data Protection Acts 1988 & 2003, Only data that is legally required to be reported may be provided to the Revenue Commissioners. For more information on this, please speak to your Credit Union, contact Revenue at aeoi@revenue.ie or see <http://www.oecd.org/tax/transparency/automaticexchangeofinformation.htm>**

Basic information about the protection of eligible deposits

A black and white photograph of the Ayerfield Credit Union building. The building has a brick facade and a dark roof. A sign on the brick wall reads "AYERFIELD CREDIT UNION". The entrance is visible on the left, with a glass door and a small sign above it. The photograph is framed in an oval shape.

Blunden Drive, Ayrfield, Dublin 13, D13 C825. Telephone: 867 0509.
Fax: 867 2251. Email: info@ayrfieldcreditunion.ie

E-Statements ☐ Yes ☐ No
 AGM Booklet ☐ Yes ☐ No
please tick

APPLICATION FOR MEMBERSHIP

Please specify the
beneficial owner
of the account.....

Accommodation: Private Rent ☐ Rent ☐ Living with Parents ☐ Other ☐ Mortgage ☐ Home Owner ☐

Applicant's Signature **Date of Birth** / /
Day Month Year

Consent to use and disclosure/Data Protection Acts, 1988 and 2003 and Section 71 of the Credit Union Act, 1997 (as amended)

I understand that under the Data Protection Acts, 1988 and 2003 (the "DPA"), my consent may be required for the Credit Union to process personal data that it may have in its possession concerning me (including disclosure to third parties). I note that this personal data may include sensitive personal data, such as data about my health, within the meaning of the DPA, the processing of which requires my explicit consent.

I also understand that under Section 71 of the Credit Union Act, 1997 (as amended), the Credit Union, subject to exceptions listed in the Section, shall not disclose or permit to be disclosed, without my consent, any information that concerns an account or transaction of mine with the Credit Union.

For the purpose of assessing my application for membership, assessing any loan applications which I may make to you and generally for administering and monitoring any accounts I have with the Credit Union, including any loan accounts I have from time to time with you:

1. I consent:

- to you seeking information concerning applications for loans and my credit history from the date of my original consent from any Credit Union and for that purpose you may disclose any relevant information in any loan application which I may make to you or which you may have concerning me to any such other Credit Union;
- to any other Credit Union disclosing information to you concerning applications for loans and my credit history from the date of my original consent with any such Credit Union;
- to you disclosing any information in any application (including loan applications) or in respect of any account or transaction of mine with the Credit Union from the date of my original consent to officers or employees of the Irish League of Credit Unions for the purpose of fulfilling our requirements and under the Savings Protection Scheme if such a scheme is operated on behalf of the Credit Union by the Irish League of Credit Unions; and
- to the processing of any information relating to me, either contained in this form or any other form or application, for the purpose of assessing applications and administering any accounts I maintain with the Credit Union.
- to you disclosing any information in my application or in respect of any account or transaction of mine with the Credit Union authorised officers or employees of ECCU assurance Company Limited for the purpose of provision of insurance cover, which may apply, subject to the terms and conditions of cover provided by ECCU Assurance Company Limited to the Credit Union as policyholder.

2. From time to time, the Credit Union, or third parties selected by the Credit Union, may use your details to inform you of goods and/or services which may be of interest to you.

The use of your details for marketing purposes will depend on the preferences that you express below:

Opt-In (marketing by email, text message and fax)

☐ I consent to the Credit Union, or third parties selected by the Credit Union, informing me of goods or services that may be of interest to me by email, text message or fax.

Opt-Out (other forms of marketing)

☐ Please tick the box opposite if you do not want the Credit Union, or third parties selected by the Credit Union, to inform you by phone or letter of goods or services that may be of interest to you.

Please note that you have the right to access personal data held about you by the Credit Union and to correct any inaccuracies in such data.

Applicant's Signature: **Date:** / /
Day Month Year

Print name:

Witnessed by:

Print name:

The information which is held on the ICB database relates to credit agreements between these ICB members and their customers/members. A condition of such agreements is that the customer/member agrees that the financial institution/Credit Union may use the data supplied for the purposed credit checking. Consequently, where an individual enters a credit agreement with an ICB member, details of the individual's performance in complying with the terms of the agreement are input to the ICB "credit file" database, which may be accessed by all member institutions of ICB. Each time a person applies for credit from an ICB member, that institution accesses the ICB's "credit file" to ascertain the applicant's performance under any previous credit agreements with ICB members.

3. In addition to paragraphs 1 and 2 above, I further consent to and authorise the Credit Union to process and retain data provided by me in respect of this application, to seek and provide credit references (searches), to record details of any transaction relating

to a loan or other credit which may result from this application with the Irish Credit Bureau (ICB) for a period of 5 years from the date of closure of the loan and ICB to record, retain and disclose to its members details of such searches for a period of one year.

4. I acknowledge that the Credit Union and/or the ICB are permitted to disclose any material misstatement of fact contained in the application for financial accommodation to its members and relevant bodies. I consent to any such application being processed, recorded and retained by ICB.

Please note that you have the right to access personal data held about you by the Credit Union and to correct any inaccuracies in such data.

Applicant's Signature: **Date:** / /
Day Month Year

Print Name:

Witnessed by: **Print Name:**

IN THE EVENT THAT THE APPLICATION FOR MEMBERSHIP IS IN RESPECT OF A PERSON WHO IS UNABLE TO GIVE RECEIPTS:

I/We hereby apply for membership in the name of the saidand I/we acknowledge that all shares/deposits arising from this-membership now and hereafter shall be his/her sole property and all withdrawals shall be applied to his/her sole benefit.

In the event of the account being opened by more than one person it is required that:

both parties / either party be present to make withdrawals.*

In the event of the account being opened by a person other than a parent/guardian of the member; (insert name of parent or guardian) as parent/guardian shall be nominated to give any necessary receipts should the member be unable to do so.*

Signed: **Parent(s)/Guardian(s)/Other***

Date: / / * Delete as appropriate

(THIS SECTION 15 TO BE COMPLETED BY THE CREDIT UNION)

Evidence of Identification

(copies must be attached)

Complete one or more of the following:

- ☐ Current Valid Passport
- ☐ Current Valid Driving Licence
- ☐ ML10 Identification Form from the Garda Siochana
- ☐ Official Identity Card (document issued by the Revenue Commissioners or the Department of Social and Family Affairs)
- ☐ Full Birth Cert
- ☐ *Other (please specify)
- ☐ EU Sanctions
- ☐ NCU

Evidence of Address Verification

(copies must be attached)

Complete one or more of the following:

Must be Received:

- ☐ Original Recent Household Bill (If you do not have a Household Bill in your own name further proof of address is required.)

and one of the following:

- ☐ Electoral Register
- ☐ Document from Revenue Commissioners or other Government Departments
- ☐ Mortgage/Rent
- ☐ Telephone/Street Directory
- ☐ *Other (please specify)

Evidence of PPSN/TIN

(copies must be attached)

Complete one or more of the following:

- ☐ Tax Certificate
- ☐ Letter from Revenue Commissioners
- ☐ P60/P45
- ☐ Drugs Payment Scheme Card
- ☐ European Health Insurance Card
- ☐ *Other (please specify)

Application approved and details verified in accordance with the standard rules by:

Signed: **Date:** / /
(CU Officer Membership Committee) Day Month Year

Signed: **Date:** / /
(Membership Officer) Day Month Year

Note: Evidence of parentage/guardianship should be obtained and held for future dealings in relation to the account.