

Please read this Declaration carefully and fill in the form overleaf.

Declarations

- I/We request that the overleaf named type of account be opened in the name(s) set out overleaf and that the Account is administered according to the overleaf details.
- I/We agree to be bound by the Terms and Conditions of the Account and the Society's Rules.
- I/We can confirm that I/we have received a copy of the Account Terms & Conditions and Society's General Investment Conditions (contained in separate leaflets) and the latest Summary Financial Statement.
- I/We declare that this application form has been completed to the best of my knowledge and belief.

IF YOU WERE A SHAREHOLDING MEMBER OR A BORROWING MEMBER OF THE SOCIETY ON 28TH FEBRUARY 1999, AND HAVE CONTINUED TO BE A MEMBER (OF EITHER TYPE) EVER SINCE THAT DATE, THE FOLLOWING WORDING DOES NOT APPLY TO YOU. IN THAT CASE, PLEASE GO TO THE USE OF PERSONAL INFORMATION SECTION. ALL OTHER APPLICANTS SHOULD READ ON.

I understand and agree that: By applying to open a share account on or after 1st March 1999, I agree with the Society and Leeds Building Society Charitable Foundation ('the Foundation') that I will assign to the Foundation (or to any charity(ies) nominated by it, but to no other person) the right to any relevant conversion benefits (defined below). This obligation will not apply to me if I fall within any class of persons which as at today's date the Society wishes to be excluded from such obligation. My agreement is irrevocable and authorises the Society to make over to the Foundation (or to any charity(ies) nominated by it) any such benefits without further notice to me. I understand that neither the Society nor the Foundation will release me from this agreement or vary its terms. I also understand that the Society will require (on behalf of itself and the Foundation) that all applicants for share accounts who are not members of the Society will agree to the above condition (or a condition having substantially the same effect) except that the requirement will not apply to any applicants falling within any class of persons where, at the time of the applicants becoming shareholding members, the Society considers this to be inappropriate. The Society will not impose that requirement on applicants if the Society decides and announces by press release that it is no longer in the best interests of the Society to do so generally on a continuing basis. Any such decision by the Society would not have retrospective effect and I would continue to be bound by the above condition. For this purpose: 'relevant conversion benefits' means any conversion benefits which I might become entitled to receive as a shareholding member of or depositor with the Society at any time within the five years immediately following the date on which my share account is opened (or within such shorter period as the Society today considers appropriate having regard to any particular class of person within which I may fall); 'conversion benefits' means any benefits under the terms of any future transfer of the Society's business to a company (i.e. on conversion or takeover) except the statutory right to have shares in the Society (including any balances on share accounts) converted into deposits with the company; and, if the Society merges with any other society, after the date of such merger, 'Society' includes such other society. I authorise the Society to pass to the Foundation such information relating to me and my share accounts with the Society as the Foundation may reasonably require in connection with this agreement to assign. A list of the classes of persons which the Society currently wishes to be excluded from the obligation to assign (which may change from time to time) is available on request from the Society's Secretary at its Head Office.

Use of Personal Information

- Information which you provide or which we obtain through your dealings with us will be held on the Society's computers and in other records. We may pass on such information as follows: -
- To subsidiary and associated companies of the Society who may use it for marketing purposes as mentioned below. You can ask us for a list of such companies.
 - To anyone whom we transfer or may transfer our rights and duties under our agreement with you.
 - If we have a duty to do so or if the law allows us to do so.
 - If you are not an existing customer for whom we already hold sufficient identification details, we will use electronic means to verify and validate your identity.

We may undertake a search with a credit reference agency for the purposes of verifying your identity and the details submitted, in line with regulatory requirements. We use the Experian credit reference agency for our identity checks. Experian may check the details supplied against any database (public or otherwise) to which they have access. They may also use the details in the future to assist other companies for verification purposes. A record of the search will be retained, but it will not affect future credit. You have the right to apply directly to Experian (at the address below) for details of information, which they hold about you – this is subject to payment of a fee. You should ensure that your letter includes:

- Your full name: title, forename, 2nd initial, surname (and maiden name if appropriate)
- Details of all addresses you have lived at over the last 6 years – including town, county, postcode and date you moved in
- A cheque or postal order, payable to 'Experian' for the fee, currently £2.00
- The date and your signature to authorise the Credit File request.

Consumer Help Services, Experian, PO Box 8000, Nottingham, NG1 5CX www.experian.com. By proceeding with this application you are agreeing to a search being undertaken in this way.

If false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information.

We and other organisations may also access and use this information to prevent fraud and money laundering, for example, when:

- Checking details on applications for credit and credit related or other facilities
- Managing credit and credit related account or facilities
- Recovering debt
- Checking details on proposals and claims for all types of insurance
- Checking details of job applicants and employees.

Please contact us on freephone 0500 225777 if you want to receive details of the relevant fraud prevention agencies. We and other organisations may access and use from other countries the information recorded by fraud prevention agencies.

You have the right on payment of a fee to receive a copy of the information we hold about you if you apply in writing to the Compliance Department, Leeds Building Society, 105 Albion Street, Leeds LS1 5AS. We may monitor and/or record your telephone conversations with the Society to ensure consistent service levels (including staff training). We may use and share with the Group (including in particular Leeds Financial Services Limited) information from your customer records, such as your contact details, details about this application and of any services we provide to you, so that we or they may contact you by mail, telephone or email, with Society news, and to inform you about our or their financial services including mortgages, savings and investments, life products, loans and credit cards, general insurance and financial planning services, and of competitions or offers which may be of interest to you. Please tick the box in the consent section if you do not wish to receive details through our Group marketing programme.

Please complete this form in black ink, complete sections 1. to 4. using BLOCK CAPITALS and sign section 5.

Are you an existing customer? No Yes

Where did you hear about this account?

1. Investment

Please invest £ with Leeds Building Society in a account (the 'Account').

All interested parties should fill in their details below
Account holder details

A. Title Forename(s) Surname
Date of Birth Nationality
Existing account number with the Society

Parents and Guardians must complete their details in the space below.

B. Title Forename(s) Surname
Date of Birth Nationality
Existing account number with the Society

C. Title Forename(s) Surname
Date of Birth Nationality
Existing account number with the Society

2. Contact details - Under 18

Permanent residential address
 Postcode Tel: home
Country of residence Email

Contact details - Parent/Guardian

(Enter details below for first parent/guardian. If other parent/guardian details are different, please attach details on a separate sheet)

Permanent residential address
 Postcode Tel: home
 Postcode Tel: work
Country of residence Email

How long have you lived at this address? years months
Residential status: Owner occupier Tenant Living with friends Living with family

If you have lived at your current address for less than 3 years, please provide your previous address.

Postcode Country of residence

How long did you live at this address? years months
Residential status: Owner occupier Tenant Living with friends Living with family

3. Interest instructions

Non Tax Payers - Please tick this box if you require an interest with no tax deducted form

Please credit interest to the Account - annually monthly at maturity

Please add interest to: (Please tick/complete one of the following)

- the Account
- the following bank/building society
Bank/Building Society name
Branch
Account number
Sort code
- another Leeds Building Society account
Account number
Name(s)

4. Withdrawal instructions

If the account holder is under 12, the Parent/Guardian must sign for withdrawals. From the age of 12, the account holder can sign for withdrawals, but the Parent/Guardian must countersign withdrawals over £250. The maximum number of withdrawals is limited to one per week. Any further withdrawals must be countersigned by a Parent/Guardian.

Any one signature Both/all signatures Other (please specify)

5. Signatures

By signing below, you are agreeing to abide by the declarations overleaf. All investors including trustees, executors, administrators and nominees etc, must sign.

Account holder (if aged 12 or over)

A. Date DD/MM/YY

Parents/Guardians

B. Date DD/MM/YY

C. Date DD/MM/YY

I consent to receive marketing information as detailed in 'Use of Personal Information' section unless I tick this box.
 I consent to receive marketing information as detailed in 'Use of Personal Information' section unless I tick this box.

FOR OFFICE USE ONLY:

Account number

Branch: 0 0 8 2