

Standard Life Bank

Client ID Verification Form

Guidance Notes



Below are some key points to follow when completing the Client ID Verification Form in order to avoid any unnecessary delays in processing your client's mortgage application.

1. The form must be completed in conformity with the Joint Money Laundering Steering Group (JMLSG) January 2006 Guideline requirements.
2. Certified photocopies of the last three months payslips and corresponding bank statements are required if income is being verified. The certified copies must accompany the form and be signed by the same person who signed the form.
3. The original form should be completed, signed and posted to Standard Life Bank.

Further copies of the form may be found at www.standardlifebank.com/adviser or by calling the number below.

www.standardlifebank.com/adviser
0845 845 8451

Client ID Verification Form

Mortgage/Plan Number:

A separate form should be completed for each applicant

Customer Details

Title (Mr/Mrs/Miss/Ms/Other e.g. Dr/Rev)	Date of birth (DD/MM/YY)
Surname	Gender
First names (in full)	
Full Address (Number, Street, City/Town, County)	Previous address if individual has changed address in the last three months
Postcode	Postcode

Statement

For Lifetime Mortgage applications only

I have enclosed a certified copy of the applicant's birth certificate (both birth certificates if joint application).

I have enclosed a certified copy of the applicant's marriage certificate (if surname differs from that on birth certificate).

Declaration

I/we confirm that

(a) the information on this form was obtained by me/us in relation to the customer;

(b) the evidence I/we have obtained to verify the identity of the customer:

(tick only one)

- Meets the standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG; or
- Exceeds the standard evidence (written details of the further verification evidence taken are attached to this confirmation)

Full name of Regulated Firm	Company Stamp
FSA Reference Number	
Signed*	
Name	
Position	
Date	Contact Number

*The person signing this form must be authorised to do so on behalf of their Regulated Firm and have seen the original documentary evidence.

If you have hearing or speech difficulties – please call our Textphone facility direct on 0845 601 2346.

For a copy of this information in Braille, large print or audio format, please call 0845 845 8450.

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