

Member No.



## Joint Membership Application Form

(PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS)

### Section 1: Personal Details

#### Applicant 1:

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Contact Phone Details: \_\_\_\_\_

Email: \_\_\_\_\_

Present Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If less than 5 years at present address,  
please indicate previous home address:  
\_\_\_\_\_  
\_\_\_\_\_

Accommodation: Home Owner ☐ Renting ☐

Living with Parents/Relatives ☐ Other ☐

Nationality: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Visa ID: \_\_\_\_\_ Visa Expiry: \_\_\_\_\_

PPS Number/Tax ID Number: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employment Type: Permanent ☐ Part-Time ☐

Self Employed ☐ Unemployed ☐ Student ☐

Retired ☐

Income € \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employment Commencement Date: \_\_\_\_\_

#### Applicant 2:

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Contact Phone Details: \_\_\_\_\_

Email: \_\_\_\_\_

Present Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If less than 5 years at present address,  
please indicate previous home address:  
\_\_\_\_\_  
\_\_\_\_\_

Accommodation: Home Owner ☐ Renting ☐

Living with Parents/Relatives ☐ Other ☐

Nationality: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Visa ID: \_\_\_\_\_ Visa Expiry: \_\_\_\_\_

PPS Number/Tax ID Number: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employment Type: Permanent ☐ Part-Time ☐

Self Employed ☐ Unemployed ☐ Student ☐

Retired ☐

Income € \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employment Commencement Date: \_\_\_\_\_

### Section 2: Additional Services

Help us help the environment and opt to receive your statement and AGM notification by email:

Annual e-AGM Notifications

☐

Annual e-Statements

☐

### Section 3: Communication & Marketing

The Credit Union may wish to inform you of services, products, competitions, promotional offers and Credit Union news which may be of interest to you. The use of your details for these purposes will depend on the preferences that you express hereunder.

#### OPT-IN MARKETING

We consent to the Credit Union informing us of goods and services that may be of interest to us by: **(please tick the relevant box).**

Email ☐ Text Message ☐ Letter ☐

#### OPT-OUT MARKETING

We do NOT consent to the Credit Union informing us of goods and services **(please tick the box).**

☐

You can update your preferences at any time by contacting us by letter or by email to [marketing@firsttech.ie](mailto:marketing@firsttech.ie). Please note that the Credit Union may still contact you where it's a legal requirement or where there's a legitimate reason for doing so.

### Section 4: Data Protection & Data Privacy Statement

The details provided in this application form together with any other information that is furnished to us in connection with this application will be retained and processed by First Tech Credit Union Ltd. in accordance with our Data Privacy Statement. Please take time to read this document which is available to you at [www.firsttech.ie](http://www.firsttech.ie) or in our branch at 55 Dawson Street, Dublin 2.

### Section 5: Anti-Money Laundering Compliance

#### BENEFICIAL OWNER

We declare that, as the account holders, we are the beneficial owners of the funds in this account.

Yes ☐ No ☐

If you ticked No above, please specify who the beneficial owner of the account is: \_\_\_\_\_

#### BUSINESS RELATIONSHIP (Reasons for opening account)

Savings ☐ Loans ☐ Budget Services ☐

#### METHOD OF SAVING TO YOUR ACCOUNT

Payroll ☐ Direct Debit ☐ EFT ☐ In Branch ☐

#### POLITICALLY EXPOSED PERSONS

Are you, or is a member of your family, a Politically Exposed Person?\* Yes ☐ No ☐

If you ticked Yes, please specify: \_\_\_\_\_

**\*As defined in Section 37(10) of the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010 a politically exposed person is a person who holds or has held within the previous year a prominent public position (e.g. TDs, Senators, heads of state, high-ranking government or army officials, government ministers, high court judges etc.). If you are unsure whether you are a PEP or not, please ask a member of staff.**

## Section 6: TAX RESIDENCY FOR THE PURPOSES OF THE COMMON REPORTING STANDARD\*\*

### Applicant 1:

Are you a tax resident in the Republic of Ireland?

Yes ☐ No ☐

If you are NOT a tax resident in the Republic of Ireland please provide your Tax Identification Number ("TIN") and country of Tax Residence:

1. TIN\*

Country of Tax Residence \*

2. TIN\*

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 First Tech Credit Union Ltd.

Signature:

### Applicant 2:

Are you a tax resident in the Republic of Ireland?

Yes ☐ No ☐

If you are NOT a tax resident in the Republic of Ireland please provide your Tax Identification Number ("TIN") and country of Tax Residence:

1. TIN\*

Country of Tax Residence \*

2. TIN\*

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 First Tech Credit Union Ltd.

Signature:

#### \*Mandatory Field

\*\*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 applicable data protection laws. Only data that is legally required to be reported will be provided to the Revenue Commissioners. For more information on this, please speak to your credit union, contact Revenue at [aeoi@revenue.ie](mailto:aeoi@revenue.ie) or see <https://www.oecd.org/tax/automatic-exchange/>

## Section 7: DEPOSIT GUARANTEE SCHEME

The Depositor Information Sheet provides important information in relation to the Deposit Guarantee Scheme and your related rights. The sheet is provided to you in conjunction with your application for membership.

Please tick the box to confirm you have received the Depositor Information Sheet ☐

## Section 8: EUROPEAN COMMUNITIES (PAYMENT SERVICES) REGULATIONS 2018

Accounts held with First Tech Credit Union Ltd. are operated in accordance with Regulation 76 of the European Union (Payment Services) Regulations 2018. Please take time to read a copy of your 'Framework Contract' which is available to you at [www.firsttech.ie](http://www.firsttech.ie).

## Section 9: DECLARATION

We hereby apply for membership of First Tech Credit Union Ltd. and agree to abide by the rules of the credit union. A copy of the rules is available to us at [www.firsttech.ie](http://www.firsttech.ie). The information given by us on this form is true and correct to the best of our knowledge. We understand that any false or misleading information given by us in connection with this application for membership of First Tech Credit Union Ltd. may result in termination of our membership, in addition to any other legal sanctions that may apply.

### SIGNATURES:

Applicant 1: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Applicant 2: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Witness: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

## FOR CREDIT UNION USE ONLY

Evidence of Identification (Copies must be attached)	Applicant 1 (Please tick)	Applicant 2 (Please tick)	Evidence of Address (Copies must be attached)	Applicant 1 (Please tick)	Applicant 2 (Please tick)
Current Valid Passport			Recent Household Utility Bill		
EU National Identity Card			Statement from a Credit Institution		
Birth Certificate (under 16 only)			Correspondence from an Insurance Company		
Current Valid Driving Licence (EU, UK)			Correspondence from a Government Department / State Agency		
Other (please specify)			Other (please specify)		

Evidence of PPSN (Copies must be attached)	Applicant 1 (Please tick)	Applicant 2 (Please tick)
P60, P45, P21		
PAYE Notice of Tax Credits		
Tax Free Allowance Certificate		
Payslip		
Public Services Card, E111 Card		
Medical Card, Drug Payments Scheme Card		

Application approved and details verified in accordance with standard rules by: (Membership Committee)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**First Tech Credit Union Ltd.** 55 Dawson Street, Dublin 2.

Phone: 01-642 7900 Fax: 01-679 0802 Email: [info@firsttech.ie](mailto:info@firsttech.ie) Web: [www.firsttech.ie](http://www.firsttech.ie)

First Tech Credit Union Ltd. is regulated by the Central Bank of Ireland. Reg. No. 221CU