



## Attorney registration form

(previously known as attorney supplementary form)

**Please provide the complete original or certified copy of the power of attorney document.**

**If you have a lasting power of attorney (LPA) you can access online we'll need some information from you (see the back of this page).**

Please check and complete all sections of this form. Please use **BLOCK CAPITALS**.

### Customer/Donor details

Customer/Donor name

Date of birth (DD/MM/YYYY)

Customer/Donor address  
(including postcode)

Customer/Donor  
account number(s)

### Attorney details

#### Attorney one

#### Attorney two

Salutation



Name



Address

(including postcode)



Country



Telephone number



Email address



Gender



Date of birth



Nationality



Savings/Mortgage account  
number or customer number



Continued on next page



If you're not an existing member of the Society, please provide Group A and B identification from the checklist provided, in line with Money Laundering regulations.

Please tick if you need a cash card  
(this will depend on the type of account held)

Yes

No

Yes

No

If Yes, please confirm account  
number you need one for

### Attorney three

### Attorney four

Salutation

Name

Address

(including postcode)

Country

Telephone number

Email address

Gender

Date of birth

Nationality

Savings/Mortgage account  
number or customer number

If you're not an existing member of the Society, please provide Group A and B identification from the checklist provided, in line with Money Laundering regulations.

Please tick if you need a cash card  
(this will depend on the type of account held)

Yes

No

Yes

No

If Yes, please confirm account  
number you need one for

## Your power of attorney document

If you have a lasting power of attorney (LPA) you can access online we can accept it as long as it has been registered in England or Wales. We'll need your valid digital access code which will allow us to view the summary of the document online.

Your digital access code: **V**

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In some circumstances we may need to view the physical LPA (for example; we will need to see a paper copy of the LPA where you do not have a digital access code). We reserve the right to request an original or certified copy of the document.

## Security Details

If you already have Security Details set up for an existing account, you'll be able to use these to manage the account(s).

If you're new to us or you don't have Security Details set up, we'll send you your security information for Telephone Services when we register the power of attorney document. If you want to and you're able to do so, you can then register for Online Services at [thecoventry.co.uk](http://thecoventry.co.uk).

We may not be able to provide cash cards or give access to the donor's accounts online if there are restrictions within the power of attorney document. We'll confirm this when we've completed registration.

### Correspondence address

Is the donor's correspondence address to be changed? Yes  No

If yes, is it to be the address of Attorney one  Attorney two   
Attorney three  Attorney four

We can only arrange for all correspondence to be sent to one of the attorneys, even if more than one is registered.

### Signatures

We comply with data protection regulation and as a Data Controller, we will only collect, store and process personal information required to open and operate your account. If you're not already a customer, we'll use the information you give us to create a record and will share it with third parties, in particular credit reference and fraud prevention agencies for identity checking purposes, and to prevent fraud and money laundering. Please note that if fraud is detected, certain services or finance may be refused For more information, please ask us for a copy of our Privacy Notice or visit [www.coventrybuildingsociety.co.uk/privacy](http://www.coventrybuildingsociety.co.uk/privacy)

	Attorney one	Attorney two
Signature(s)	<input type="text"/>	<input type="text"/>
Date	<input type="text" value="dd / mm / yyyy"/>	<input type="text" value="dd / mm / yyyy"/>
	Attorney three	Attorney four
Signature(s)	<input type="text"/>	<input type="text"/>
Date	<input type="text" value="dd / mm / yyyy"/>	<input type="text" value="dd / mm / yyyy"/>

Being open with you really matters to us. We think it's important to let you know when we develop new mortgage or savings products and services that might benefit you, or when we have news we think you should be aware of. But don't worry, we won't bombard you with information. We'll only contact you by email or post (no intrusive phone calls!), and you won't hear from us more than twice a month. We'll never pass your details to third parties to try to sell you anything. We'd love you to tick yes if you are happy to hear from us. And if you ever change your mind, just call, email or pop in and see us. For more, visit [www.coventrybuildingsociety.co.uk/privacy](http://www.coventrybuildingsociety.co.uk/privacy)

Attorney one Yes  No   
Attorney two Yes  No   
Attorney three Yes  No   
Attorney four Yes  No

<b>For office use only</b>	Branch number <input type="text"/>	Cashier number <input type="text"/>	Date <input type="text" value="dd / mm / yyyy"/>
Please make sure you remind the customer that they need to let their property insurance provider know about these arrangements.			