

# Trusted Contact Person Nomination Form



A Trusted Contact Person is someone you can nominate for us to contact in certain situations.

With this service we can contact a person you trust if we have concerns that you may be experiencing financial abuse, or if we need to check information like your contact details, health status or if we are having difficulty contacting you.

Please complete and sign Part A of the form. The Trusted Contact Person needs to complete and sign Part B.

To: AIB

## Part A

To be completed by the Customer.

I nominate  (insert the name of the Trusted Contact Person) as my Trusted Contact Person and give my consent to AIB contacting them and discussing the below matters where the Bank has a concern in relation to:

- (a) possible financial abuse of the Customer
- (b) AIB needs to confirm the specifics of
  - (i) the Customer's current contact information,
  - (ii) the Customer's health status, or
  - (iii) the identity of any appointed legal guardian, executor or trustee, or
- (c) AIB experiences difficulties in communicating with the Customer.

I understand that AIB may discuss confidential information under the above matters with my Trusted Contact Person.

The Trusted Contact Person does not have authority to transact on my account or deal with my finances.

Customer Name:  (the "Customer")

Customer Address:

Eircode:

Customer Contact Numbers:

Complete where you have an AIB Bank account

My account details:

NSC  9  3     Account Number (first five digits)

Complete ONLY where you have a mortgage that was previously with Ulster Bank.

Customer Account Number

Account Number (first five digits)

If you do not have an AIB Bank account but do hold another AIB product or service and would like to nominate a Trusted Contact Person please tick the box (across), complete this form and return to any AIB Branch.

We will contact you to discuss further.

By signing below, you confirm your instruction to appoint a Trusted Contact Person.

Signed by the customer

Date

Day  / Month  / Year

## Notes

- We may call the Customer to confirm the request and verify the details
- The Trusted Contact Person must be over eighteen to complete this form.

## Part B

This section to be completed by the Trusted Contact Person

I understand the Customer has nominated me as a Trusted Contact Person and provided consent to AIB contacting me in relation to any of the following:

- (a) AIB has a concern in relation to possible financial abuse of the Customer,
- (b) AIB needs to confirm the specifics of
  - (I) the Customer's current contact information,
  - (II) the Customer's health status, or
  - (III) The identity of any appointed legal guardian, executor or trustee, or
- (c) AIB experiences difficulties in communicating with the Customer.

Name of Trusted Contact Person  (the "Trusted Contact Person") (Block Capitals)

Contact mobile phone number of Trusted Contact Person

I  (name of Trusted Contact Person) confirm I am over 18 years of age.

I understand that I do not have authority to transact on the Customer's account or deal with their finances.

By signing below, I confirm my details are correct and consent to AIB retaining my name and contact information for the purposes of acting as a Trusted Contact Person and contacting me to discuss the matters above.

Signed by the Trusted Contact Person

Date  Day /  Month /  Year

## Data Protection – Use of Information

- The information provided by the Customer and/or the Trusted Contact Person on this form will be used for the purpose of contacting you and/or the Trusted Contact Person as instructed above. The information will be held and used solely for the purpose of this instruction. This information shall not be retained for any other purposes.
- For information in relation to how we collect information about you, how we use it and how you can interact with us about it, see our data protection notice in branches and online AIB Data Protection Notice - [aib.ie/dataprotection](http://aib.ie/dataprotection). It may change from time to time

\*Please return the form by post or drop into your local branch, details can be found on our website.

Bank Use Only	Staff Number	Staff Initials	Date
Customer Signature Verified			
Verification of Instruction			