

INFORMATION FORM

Personal Banking Customers

For Bank use only

Customer No:

CRM No:

Please fill form in **CAPITAL LETTERS**.

PERSONAL DETAILS

Mr Ms Dr Others, please specify _____

Full Name

(as in ID Card / as in Passport for Foreigners)

Gender

Female

Male

Date of Birth

ID Card No. / Passport No.

(Passport No. for Foreigners only)

ID Card / Passport Expiry Date

(Passport Expiry for Foreigners only)

Work Permit / Visa No.

(For Foreigners)

Work Permit / Visa Expiry Date

(For Foreigners)

No. of Children

Nationality

Place of Birth

CONTACT DETAILS

Mobile No.

Home / Office No.

Email

Permanent Address

House / Building Name

Street Name

Flat No. / Floor

Atoll, Island / City

Postcode

Country

Mailing Address

(If mailing address is different from above please fill in below details.)

House / Building Name

Street Name

Flat No. / Floor

Atoll, Island / City

Postcode

Country

SIGNATURE: _____

EMPLOYMENT DETAILS

Employment Status Salaried Self employed Unemployed Student Retired

Employment Sector Civil/State Private Public Military Political
 Volunteer Judiciary
 Other, please specify

Occupation/Designation

Employer Name

Worksite (if applicable)

FINANCIAL DETAILS

Sources of Income / Wealth Salary Family Remittance Rent
 Business Income Pension
 Other, please specify

Total Monthly Income in MVR Less than 5,000 5,000 to 15,000 15,000 to 30,000
 30,000 to 45,000 45,000 to 60,000 60,000 to 80,000
 80,000 to 100,000 100,000 to 200,000 Above 200,000 (please specify)

Taxpayer Identification Number (TIN) (If applicable)

Businesses Involved
 (If more than 5 businesses involved, please take a copy of this page to include the additional details and submit with this form.)

Name of Business	Designation
.....
.....
.....
.....
.....
.....

Other Banks
 (Please tick all banks where you operate an account)

HSBC SBI MCB MIB
 BOC HBL CBM Other, please specify

PEP DECLARATION

Politically Exposed Person (PEP) Declaration

I confirm that I, or any member of my family or any of my associates, do not hold any position at a public office of prominence, nor have held any such position in the past.

I confirm that I, or any member of my family or an associate, hold or have held a position at public office of prominence:

If declared as a PEP, please fill in the relevant information;

Designation: Place of Designation :

From (Start Date): To (End Date):

Family Member / Associate: 1

Name:

Relationship:

Designation: Place of Designation :

From (Start Date): To (End Date):

Family Member / Associate: 2

Name:

Relationship:

Designation: Place of Designation :

From (Start Date): To (End Date):

Family Member / Associate: 3

Name:

Relationship:

Designation: Place of Designation :

From (Start Date): To (End Date):

Family Member / Associate: 4

Name:

Relationship:

Designation: Place of Designation :

From (Start Date): To (End Date):

Family Member / Associate: 5

Name:

Relationship:

Designation: Place of Designation :

From (Start Date): To (End Date):

*If more than 5 Family Members / Associate are involved, please take a copy of this page, fill in details, and submit with this form.

FATCA DECLARATION

FATCA Declaration

I declare that I do not possess USA nationality/Lawful Permanent Residency/Passport/power of attorney given to or received from a US person as at this date. I further undertake to inform the Bank if I obtain USA Citizenship/Green Card/Lawful Permanent Residency/Passport/power of attorney in future within material time and authorize Bank of Maldives PLC to disclose required information to relevant authorities in USA"

I declare that I possess USA nationality/Lawful Permanent Residency/Passport/power of attorney given to or received from a US person as at this date OR fall under one of the indicia listed below and authorize Bank of Maldives PLC to disclose required information to relevant authorities of USA under FATCA

If YES please fill the relevant FATCA form

Description	Form No.
For U.S Citizens or other U.S Person including resident alien individual	W9
Customers who does not fall under W9 category above <ul style="list-style-type: none">• Non-resident alien• U.S birth place (without Citizenship and Lawful Permanent Residency)• U.S Address (residence, correspondence, or PO Box)• One or more U.S telephone numbers• Account at a U.S Bank• Power of Attorney or signatory authority granted to person with US address	W-8BEN

CRS RESIDENCY DECLARATION

I confirm that I am not a resident in any other country other than Maldives.

I confirm that I am a resident in a country other than Maldives. If yes, please fill in CRS Residency Declaration Form.

TERMS & CONDITIONS

General Terms & Conditions:

I hereby agree and declare:

- That the information and documents presented for identification purposes may be verified by the Bank's employee having an appropriate authority.
- That the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform bank, any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- That information provided can be used by the Bank for customer relationship purposes and in certain specific circumstances, the bank may still process data in view of its statutory obligations.
- To provide appropriate information/and or documents (including identity proof, profile details of account holder/s, beneficial owners, etc.) in accordance with laws, regulations, international standards, and best practices.
- To be bound by the terms and conditions which apply, and which may from time to time change to account(s) opened and services requested by me with the Bank.
- That having read the Terms and Conditions of this form (Information form Personal Banking customers) and agree to abide by and be bound by the same including any changes therein from time to time.
- That the Bank and its Affiliates shall not be responsible for, and you shall indemnify and hold harmless the Bank and its Affiliates from and against, any liability arising directly or indirectly out of the Bank's relationship with you, including any failure by you or a third party to provide the Bank with any information and/or documents that it requests, as well as for any error, omission, inadequacy or inaccuracy in any information and/or documents that you or a third party provide to the Bank.

Signature

Date

