



ANSA MERCHANT BANK LIMITED

Customer Information Form - Individuals

DATE / /

Please complete all aspects of this form

Mr. Mrs. Ms.

Surname Maiden Name First Name Middle Name

Address: _____

Place of Birth: _____ Nationality: _____ Date of Birth:(D/M/Y) _____

Home Phone: _____ Work Phone: _____ Mobile: _____ Email: _____

Marital Status: Married Single Divorced

Occupation: _____ Monthly Income: _____

Estimated account activity for applicable transactions (monthly) - Deposits: _____

Withdrawals: _____

Currency conversion: _____

Employer: _____

Employer's Address: _____

Identification: _____
Driver's License # Passport # I.D. Card #

Kindly provide us with a legible copy of your identification for our records

Please indicate whether any of the following categories are applicable to you:

- a) A current or former senior official in the executive, legislative, administrative, or judicial branch of government (local or foreign). Yes No
- b) A senior official of a major political party (local or foreign). Yes No
- c) A senior executive of a local or foreign government- owned commercial enterprise. Yes No
- d) A senior military official (local or foreign) Yes No
- e) Do you have any immediate relatives who fall under the categories listed above (a to d)? Yes No

JOINT A/C HOLDER #1

Mr. Mrs. Ms.

Surname Maiden Name First Name Middle Name

Address: _____

Place of Birth: _____ Nationality: _____ Date of Birth:(D/M/Y) _____

Home Phone: _____ Work Phone: _____ Mobile: _____ Email: _____

Marital Status: Married Single Divorced

Occupation: _____ Monthly Income: _____

Estimated account activity for applicable transactions (monthly) - Deposits: _____

Withdrawals: _____

Currency conversion: _____

Employer: _____

Employer's Address: _____

Identification: _____
Driver's License # Passport # I.D. Card #

Kindly provide us with a legible copy of your identification for our records

Please indicate whether any of the following categories are applicable to you:

- a) A current or former senior official in the executive, legislative, administrative, or judicial branch of government (local or foreign). Yes No
- b) A senior official of a major political party (local or foreign). Yes No
- c) A senior executive of a local or foreign government- owned commercial enterprise. Yes No
- d) A senior military official (local or foreign) Yes No
- e) Do you have any immediate relatives who fall under the categories listed above (a to d)? Yes No

JOINT A/C HOLDER #2

Mr. Mrs. Ms.

Surname Maiden Name First Name Middle Name

Address: _____

Place of Birth: _____ Nationality: _____ Date of Birth:(D/M/Y) _____

Home Phone: _____ Work Phone: _____ Mobile: _____ Email: _____

Marital Status: Married Single Divorced

Occupation: _____ Monthly Income: _____

Estimated account activity for applicable transactions (monthly) - Deposits: _____

Withdrawals: _____

Currency conversion: _____

Employer: _____

Employer's Address: _____

Identification: _____
Driver's License # Passport # I.D. Card #

Kindly provide us with a legible copy of your identification for our records

Please indicate whether any of the following categories are applicable to you:

- a) A current or former senior official in the executive, legislative, administrative, or judicial branch of government (local or foreign). Yes No
- b) A senior official of a major political party (local or foreign). Yes No
- c) A senior executive of a local or foreign government- owned commercial enterprise. Yes No
- d) A senior military official (local or foreign) Yes No
- e) Do you have any immediate relatives who fall under the categories listed above (a to d)? Yes No

Important notice:



The Government of the United States of America has passed a law in March 2010 under the Foreign Account Tax Compliance Act (FATCA) requiring disclosure on the existence of all accounts held by United States nationals and of any persons or entities to which the following indicia are applicable;

(Tick where applicable to you or any joint party to the account)

- Identification of any account holder as a resident of the United States of America (USA) or as a USA Citizen (i.e. Holder of a Green card)
- A US address associated with an account holder
- A USA place of birth for an account holder
- A US “in care of” or “hold mail” address or a P.O address that is the sole address on file with respect to the account holder(s)
- A power of attorney or signatory authority granted to a person with a USA address
- Standing instruction provided to transfer funds to an account maintained in the USA or directions received from a USA address

Are you or any joint party to this Account with ANSA Merchant Bank Limited a US national or holder of a Green Card for residency in the United States of America (USA)? Yes No

If so, please provide US Taxation Identification Number (TIN) _____

I/we confirm that all information provided above is correct.

Client

A/c holder 1

Signature/Date _____

Joint A/c holders

Signature/Date _____

Signature/Date _____

FOR BANK PERSONNEL ONLY

PRINT OFFICER'S NAME SIGNATURE DATE

PRINT MANAGER'S NAME SIGNATURE DATE

Confirm where applicable that the following fields have been completed on Insight

PEP indicator

US Account Indicator