



Prepare	Approve

(For Individual Customer)

REGISTRATION FOR RELEVANT PARTY'S INFORMATION-LEGAL ENTITY

Customer's name CIF No.:

Account No:.....

I. INFORMATION OF LEGAL ENTITY THE REPRESENTATIVE OF INDIVIDUAL CUSTOMER

Full name [] Abbreviation name []

Head office address []

Postal address (If different from head office address) []

Establishment permit number/ number of documents proving eligibility to establish and operate legally []

Identification number of the organization (if any)/Business registration number [] Tax identification number (if any) []

Phone No [] Fax No. [] Website []

Country of Incorporation [] Date of Incorporation []

Business activities []

Seal template (if any) []

II. INFORMATION ON LEGAL REPRESENTATIVE, DIRECTOR/GENERAL DIRECTOR, CHIEF ACCOUNTANT/ PERSON IN CHARGE OF ACCOUNTING

Information	Legal Representative	Authorized Person	Director/ General Director cum Legal Representative <input type="checkbox"/> Yes <input type="checkbox"/> No, please fill the information below	Chief Accountant/ Person in charge of accounting
Full Name				
Date of birth				
Occupation				
Position				
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality (*)				
Residence status	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident
ID Card/ Citizen ID Card/ Passport/	Number			
	Issue Date			
	Expiry Date			

Personal Identification	Issued by								
Visa/Resident Card/Visa exemption Document/ Identification number of foreigner	Number								
	Issue Date								
	Expiry Date								
	Issued by								
Phone No.									
Residential address/Registered addresses in foreign countries									
Current address (If different from the residential address)									
Specimen Signature	1 st specimen signature	2 nd specimen signature	1 st specimen signature	2 nd specimen signature	1 st specimen signature	2 nd specimen signature	1 st specimen signature	2 nd specimen signature	

(*): In case **LEGAL REPRESENTATIVE, DIRECTOR/GENERAL DIRECTOR, CHIEF ACCOUNTANT/ PERSON IN CHARGE OF ACCOUNTING** has more than two nationalities, please declare more information on **ADDITIONAL DECLARATION OF OTHER NATIONALITIES OF INDIVIDUAL CUSTOMER**

III. COMMITMENT

The Bank shall collect information, documents, and data from customers. If the information, documents and data related to the Bank are not provided or cannot be verified, financial transactions will be rejected or terminated in accordance with the relevant regulations. The information you provide is used for customer verification purposes only and is not used for any other purpose.

I (We) hereby confirm that the above declared information is true and correct and will take full responsibility under the laws for the provided information. In case of any changes, I (we) will notify the Bank immediately from the date of occurrence.

This registration shall be an integral part of Application cum Agreement on opening and using payment account and term deposit, application on specific product and service.

I (We) hereby confirm that I have been fully noticed about submitting this Form.

Date (DD/MM/YYYY):/...../.....

Account holder/ Legal representative of the Account holder
(Sign and full name)