

# OECD CRS AND U.S. FATCA SELF-CERTIFICATION FORM FOR INDIVIDUALS

### PART 1 Details: ACCOUNT Holder's (in BLOCK CAPITALS)

Customer's name (as per passport)	
Place of birth (city and country)	

## PART 2: Jurisdiction of Residency for Tax Purposes (CRS) (in BLOCK CAPITALS)

Please complete the following table indicating (i) where the Account Holder is a tax resident and (ii) the Account Holder's TIN for each country/reportable jurisdiction indicated. If the Account Holder is a tax resident in more than three countries/jurisdictions, please use a separate sheet.

If a TIN is unavailable, please provide the appropriate reason (A, B and C):

Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents.

Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN in the below table if you select this reason).

Reason C – No TIN is required (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issue by such jurisdiction).

TABLE A	4		
No.	Country/Jurisdiction of tax residence (no abbreviations)	TIN (Taxpayer identification Number e.g. Social Security Number)	If no TIN is available, Please enter Reason A, B or C
1			
2			
3			
4			
If you sele	cted Reason B above, please explain why the A	ccount Holder is unable to obtain a TIN in th	ne following boxes.
1			
2			
3			
I declare I listed abov		listed above in Table A, even if the Bank ha	s collected and holds addresses in other jurisdictions that are not
If you have	e ticked no, please provide a reason for this in t	he following box:	

## PART 3: Jurisdiction of citizenship (U.S. FATCA) (in BLOCK CAPITALS)

I am a U.S. Person for tax purposes and my U.S. Taxpayer Identification Number (e.g. TIN, Social Security Number) is:

I am not a U.S. Person for tax purposes.

#### PART 4: Declaration and Signature (in BLOCK CAPITALS)

I hereby certify that the information I have provided in this form is true, correct and complete in all respects. I confirm that I have provided the information in this document willingly without advice or help from the Bank. I understand that providing false information, withholding relevant information or responding in a misleading way may result in the rejection or my application or other appropriate action being taken against me. I further certify that if any information provided on this form changes, I will inform you within 30 days of such a change.

I hereby consent to the Bank using, processing, reporting and transferring information about me, my relationship with the Bank (including information about my accounts and other banking products related to the accounts) and my financial affairs to any governmental authority (e.g. tax authorities, ministries, central banks, regulators) or third party as may be required by, or in connection with, any law, regulation or agreement with any governmental authority in the country where the Bank maintains my accounts (which may then pass that information to the tax authorities in another country) or in other countries (such as the United States) as may be required by the foregoing.

#### Note: In the case of joint account holders, each Account Holder must complete a separate form.

Print name: \_\_\_\_\_\_

Date:	
Date.	

Signature:

Note: If you are not the Account Holder, please indicate the capacity in which you are signing the form. If you are signing under a Power of Attorney, please attach a copy of the Power of Attorney.

Capacity