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|--------------------------|----------------------|
| <b>For Bank use only</b> |                      |
| Unique Customer ID       | <input type="text"/> |
| A/C No.                  | <input type="text"/> |

# INDIVIDUAL INFORMATION FORM

This form should be completed in "ENGLISH CAPITAL" letters.

Please use separate Individual Information Form for other Applicants/Mandate/Guardian/Director/Beneficial Owner/Shareholder

Customer's Name in English

বাংলা

*Please affix here a recent passport size photograph duly attested by A/C holder*

Father's Name

Mother's Name

Spouse's Name

Date of Birth

Gender  Male  Female  Third Gender

Resident Status  Resident  Non-Resident

National ID Card No.

Other Photo ID

Birth Certificate No.

E-TIN (if any)

Passport No.

Proof of tax return  Yes  No

Profession

If yes, mention assessment year  -

Monthly Income

Nationality  Bangladeshi  Other  Please Specify

Source of Fund

Relationship with Account

Present Address (Residence) Vill/Road

PO  Thana  District

Division  Postcode  Country

Professional Address Vill/Road

PO  Thana  District

Division  Postcode  Country

Permanent Address Vill/Road

PO  Thana  District

Division  Postcode  Country

Mobile 1  Mobile 2

E-mail ID 1

E-mail ID 2

1. Are you a US Resident?  Yes  No    2. Are you a US Citizen?  Yes  No    3. Do You hold a US Permanent Resident Card (Green Card)?  Yes  No

I/We hereby consent for City Bank PLC or any of its affiliates (include branches) (herein after collectively referred to as "Bank") to share my/our information with domestic or overseas regulators or tax authorities or other concerned authorities where necessary and/or required by applicable laws, agreement with regulators or authorities and/or directives.

Where required by domestic or overseas regulators or tax authorities or other concerned authorities, I/we consent and agree that the Bank may withhold, and pay out, from my/our account(s) such amounts as may be required according to applicable laws, regulations, or authorities and directives and Bank shall not be held liable for any consequences thereof. In the event of any loss suffered by bank due to my/our failure or inaction or misrepresentation, I/we shall hold the Bank fully indemnified and harmless against all such losses arising thereof. Proof of address required (of any one)

Signature with Date

Applicant's Name

Name Seal of Signature Verifier with sign & Date

Note: Individual Information Form must be filled in for both the Minor and Guardian. Both forms must be signed by Guardian.