

CRS Self-Certification Form For Individuals

Please note that the Bank's staff is unable to assist the customer in the completion of this form. For more information, you may visit the OECD's website or speak to a professional tax advisor/consultant.

Section I: Individual Details

Full Legal Name:	
Nationality: (please mention all, in case of multiple)	
Place of Birth: (City & Country)	
Date of Birth: (DD/MM/YY)	
Country of Residence:	

Section II: Country/Jurisdiction of Residence

If the Account Holder is 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 or C:

Reason A - The country/jurisdiction where the Account Holder is resident 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 have selected 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 issued by such jurisdiction).

	Country/Jurisdiction of Tax Residence	TIN or Equivalent Tax Number	If no TIN is available, please enter reason A, B or C
1			
2			
3			

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B above:

1			
2			
3			

Section III: Declaration

I confirm and certify that:

- a. The information supplied is covered by the full provisions of the terms and conditions governing the relationship with the Bank or any of its affiliates, setting out how the Bank or any of its affiliates may use and share the information provided in this form;
- b. The information provided in this form is true, correct and complete in all respects;
- c. The information has been provided willingly, without advice or help from the Bank;
- d. I undertake to advise the Bank within 30 days of any change in circumstances which affects the tax residency status of the individual identified in Section I of this form or causes the information contained herein to become incorrect or incomplete, and to provide the Bank with a suitably updated self-certification and Declaration within 30 days of such change in circumstances;
- e. The information contained in this form and information may be reported to the tax authorities of the country/jurisdiction in which this account(s) is/ are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which I may be tax resident pursuant to intergovernmental agreements to exchange financial account information; and
- f. The Bank can process, report and transfer information contained within this form, and our financial affairs, as mandated by the concerned authorities.

Name:	
Signature:	
Date: (DD/MM/YY)	
Note: If you are not the Account Holder please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.	
Capacity:	

For Internal Use Only

Client data updated on the system	YES	NO	
RM Name	Signature		
Reviewed By	Signature		

