

# Channel Islands Additional Account Application for FNB Channel Islands Personal Accounts

## how can we help you?

Please note: It is a regulatory requirement that, when taking up a new product, we refresh and reconfirm the information we hold about you. Therefore, please provide all the details below, even if you have already done so in the past

Should you require any assistance with the completion of this form, please contact your banker or the FNBCI Service Suite

 SA local:
 087 730 6010

 SA international:
 +27 (0)11 369 1500

 UK/Guernsey:
 +44 1481 748 138

 Email:
 www.fnbci.co.uk

Reconfirmation of persona	al information	
Client name:		Date Y Y Y M M D D
Nationality:	ID/Passport number:	
Do you hold dual / multiple nationality/ci	itizenship?	
If yes, please give details below:		
Residential Address:	Postal Address: Same	as Residential Address
Street Address:	PO Box Number:	
Suburb:	Suburb:	
City:	City:	
Country:	Country:	
Postal Code:	Postal Code:	
Permanent  Employer Name:		Unemployed Retired
Permanent Employer Name:	00	ecupation:
Permanent Employer Name: Gross Annual Income:	00	
Permanent Employer Name: Gross Annual Income: Nature of Business:	Oc Currency: No	ecupation:
Permanent Employer Name: Gross Annual Income: Nature of Business:	00	ecupation:
Permanent Employer Name: Gross Annual Income: Nature of Business:	Oc Currency: No	ecupation:
Permanent Employer Name:  Gross Annual Income:  Nature of Business:  If with present employer for less than 6 more	Currency: No	ecupation:
Permanent Employer Name: Gross Annual Income: Nature of Business: If with present employer for less than 6 more	Currency: No	ecupation: umber of months employed:
Permanent Employer Name: Gross Annual Income: Nature of Business: If with present employer for less than 6 more Self-Employed Company Name:	Currency: No	ecupation: umber of months employed:

Unemployed  If unemployed, please state reasons of unemployment, previous occupations, employers and nature of business:  Contract  Employer Name:  Occupation:  Gross Annual Income:  Nature of Business:  If with present employer for less than 6 months, please also supply details of previous employment:  Retired  If retired, please state previous occupations and employers:  Employer Name:  Occupation:  Occupation:  Oross Annual Income:  Number of months employed:  Number of months employed:  Number of months retired:  If with previous employer for less than 6 months, please also supply details of employment before:  Tax information  Country of Domicile:  Country of Domicile:  Country of Tax Residence:  Tax identification Number (NINO) if applicable:  Social Security Number (SSN) if applicable:  Are you a US Green Card Holder?  Yes No  Are you registered for tax in multiple jurisdictions? If so, please give details below:  Country  TIN				
Contract  Employer Name:  Currency:  Number of months employed:  Nature of Business:  If with present employer for less than 6 months, please also supply details of previous employment:  Retired  If retired, please state previous occupations and employers:  Employer Name:  Occupation:  Gross Annual income:  Currency:  Number of months employed:  Nature of Business:  Number of months retired:  If with previous employer for less than 6 months, please also supply details of employment before:  Tax information  Country of Domicile:  Country of Domicile:  Country of Domicile:  Country of Domicile:  Country of Some Card Holder?  Yes  No  Are you a US Green Card Holder?  Yes  No  Are you registered for tax in multiple jurisdictions? If so, please give details below:	Unemployed			
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Employer Name: Currency: Number of months employed:  Nature of Business:  If with present employer for less than 6 months, please also supply details of previous employment:  Retired  If retired, please state previous occupations and employers:  Employer Name: Occupation:  Gross Annual Income: Currency: Number of months employed:  Nature of Business: Number of months retired:  If with previous employer for less than 6 months, please also supply details of employment before:  Tax information  Country of Domicile: Country of Tax Residence:  Tax Identification Number (TIN):  National Insurance Number (NINO) if applicable:  Social Security Number (SSN) if applicable:  Are you a US Green Card Holder?  Yes No  Are you registered for tax in multiple jurisdictions? If so, please give details below:				
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	Are you a US Green Card Holder?	◯ Yes ◯ No		
Country	Are you registered for tax in multiple jurisdictions? If so, pl	ease give details below:		
		T		
Country TIN	Country	TIN		

TIN

TIN

Country

Country

Product Sele	ction					
Please indicate you	r choice of accour	nt and currency below	*:			
Current Accour	nt - Only Available ir	Sterling				
Call Account		Sterling	Euro	US Dollar		
32 Day Notice		Sterling	Euro	US Dollar		
Please indicate you	r choice of accour	nt, currency and saving	gs term below.			
Fixed Deposit	Period					
GBP	3 Months	6 Months	12 Months	18 Months	24 Months	36 Months
USD	3 Months	6 Months	12 Months	18 Months	24 Months	36 Months
EUR	3 Months	6 Months	2 Months	18 Months	24 Months	36 Months
		•	in order to fund the 32 32 Day Notice / Fixed	day Notice / Fixed Depo Deposit Account.	osit Account.	
PEP (Politica	lly Exposed P	erson)				
Are you, or have yo	u, or any of your fan	nily or close associates	ever been a PEP? (	Yes No		
If the answer to the	e above is yes, pleas	se provide details				
of the judiciary, senior m function by an internation Family means parents, b	nilitary officers; and se onal organization (e.g. rothers, sisters, spous a person who is widely	nior executives of state ow UN, NATO, World Bank). e, partner, children, grand;	ned body corporates; this parents, grandchildren, aur	mportant officials of politic includes a person who is, or ats, uncles, nieces, nephews a PEP, or a person who is in	has been at any time, entro s, brothers-in-law, sisters-i	usted with a prominent n-law, parents-in-law.
Purpose of accou	nt:					
Vhat are the main reas	ons for opening the a	account (e.g. diversify cu	rrencies, savings, investm	nents, overseas use)?		
Vhat is the total anticip	pated value of depos	its in the first 12 months	?			
Vhat is the total <b>expec</b>	ted annual value of o	deposits to this account(	s) thereafter?			

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## Your declarations: (By signing this form I agree to and confirm the following):

- I warrant that the information and documentation that has been and will be submitted is true, correct and of authentic origin and undertake to inform FNB Channel Islands ("the Bank") of any facts or circumstances that could prejudice the Bank's rights or should any of the information which I have provided change;
- I agree that the Bank may verify the information provided, generally make whatever
  enquiries it deems necessary from any source whatsoever and may supply
  information regarding my products and services and my compliance or otherwise
  with the conditions, to any division and subsidiary within FirstRand Bank Limited, to
  other banks and/or to any Caredit Bureau;
- I agree and understand that in order to approve my application the Bank may obtain
  information about me from a Credit Bureau (Credit Bureaux supply banks and other
  parties with credit profiles and credit scores about persons to help them determine if
  a person is credit worthy) and from internal or external data sources that provide
  information on fraud risk;
- 4. My choice was made based on the product information given to me, including all the different features, benefits and pricing options and applicable fees to my chosen products and services which enabled me to make an informed decision. I acknowledge that the information about fees is available on www.fnbci.co.uk
- I understand that my account statements will be made available to me via the FNBCI Banking App and Online Banking.
- 6. I indemnify the Bank against any liability for any loss or damage suffered by me as a result of inaccurate or incomplete information contained herein and/or as a result of the disclosure or furnishing of any information which I provided to the Bank or which the Bank obtained with my consent.
- 7. I hereby confirm that:
- 7.1. I agree to be bound by the Bank's terms and conditions applicable to the accounts/ facilities applied for and which are available on www.fnbci.co.uk
- 7.2. I acknowledge that the Bank may at its discretion amend the terms and conditions applicable from time to time;
- 7.3. Should I not understand any of the Bank's terms and conditions I undertake to contact the Bank for an explanation and/or clarification as required;
- 7.4. I request and authorise the Bank to open the account(s) as indicated and as subsequently requested from your products and services from time to time in this application form in the name of the applicant;
- 7.5. I will not make use of the products and services until the Bank approves my application; and
- 7.6. I understand and accept that the Bank reserves the right to decline this application for any reason.

### Verification of identity

8. The bank is required by current legislation and guidance recognised by South Africa and Guernsey to obtain evidence of my name, address, date and place of birth, nationality,official personal identification number, citizenship and tax residency/ies. In order to do so, the bank requires certain documentation. By signing this application form, I understand that I must comply with the provision of the legislation and agree to be bound by the rules. If I do not comply with the above requirements, the Bank is obliged to freeze my account(s) without prior notice, until I provide the Bank with an acceptable document to verify my particulars. I understand that if the Bank freezes my account(s), I will not be able to transact on the account(s). A certified copy of a valid passport or RSA ID card is required for all parties to the application. An uncertified copy will not be acceptable. In all cases the copies must be clear.

#### Residential address

- To verify the permanent residential address of an individual, I am required to provide
  the Bank with an acceptable document evidencing my address. This document may
  not be older than three months. Examples of acceptable documents are the
  following:
- 9.1. a bank statement (Non FRG bank statement) or a utility bill addressed to me at my permanent residential address I have stated. If the utility bill is addressed to a PO Box number, it must also state the physical address or it will not be acceptable.
- 9.2. a confirmation from a suitable certifier (see definition below).

#### Certification of documents

- 10. Documentation to be submitted is to be either in original or electronic format. If neither are available, copies must be certified by a suitable certifier, such as a bank official, member of the judiciary, lawyer, notary public, actuary or accountant who is a member of a professional body. Documents can also be certified by an Officer of an Embassy, Consulate or High Commission of the country of issue.
- 11. A suitable certifier must certify that he or she has seen the original documentation verifying identity and residential address, and that the copy of the document provided (which he or she certifies) is a complete and accurate copy of that original.
- 12. In order to certify the documents, the certifier must add the following wording to the document: "CERTIFIED AS A TRUE COPY OF THE ORIGINAL SEEN BY ME" in writing, or by means of a stamp, including the name, address, profession, contact details and date on which the documents were certified. Where a document contains a photograph of the individual, the certifier is to add the wording "CERTIFIED AS A TRUE COPY OF THE ORIGINAL SEEN BY ME AND A TRUE LIKENESS OF THE INDIVIDUAL." The certification is to be signed by the certifier. The certifier cannot be closely related to the person whose documents are being certified.

#### Instructions

- By signing this application form, I agree to be bound by the following terms and conditions;
- 13.1. I authorise the Bank to accept and act on any instructions received by the Bank which is given by telephone and/or eMail by me.
- 13.2. I understand and accept that the Bank will not be held liable for any losses or damages suffered by me as a result of the Bank acting, or declining to act (whether in whole or in part), on the instructions the Bank believes to have been given by me by telephone or eMail, whether or not this instruction has in fact been given.
- 13.3. I indemnify the Bank against any loss, liability or damages that may be suffered by the Bank as a result of the Bank entering into this agreement with me, and acting, or declining to act, on any instruction.
- 13.4. As instructions given by telephone and/or eMail may be more susceptible to the occurrence of fraud, I understand and accept that I will obtain legal advice as to the legal implications of providing instructions by telephone and/or eMail if I am uncertain as to these implications.

## Tax compliance

- 14.1 I hereby confirm and warrant that the information provided is true and correct and I hold no other citizenships and/or residences for tax purposes other than those disclosed above in this application form; I will inform the Bank in writing of any change of this status within 30 (thirty) days of the change of the disclosed status.
- 14.2 I hereby agree to the exchange of information between the Guernsey tax authorities and those countries which adhere to the Automatic Exchange of Information (AEOI), also known as Common Reporting Standards (CRS); and to the exchange of information between the United States Inland Revenue Services (IRS) in terms of the Foreign Accounts Tax Compliance Act (FATCA) affecting USA persons; and to the exchange of such information as may be required to be provided by the Bank under the terms of any exchange of information agreements or other disclosure requirements from time to time.
- 14.3 The information that will be disclosed includes but is not limited to: account number, full name, residential address, date and place of birth, Tax Identification Number (TiN), the total value of the accounts held at the date or dates required by the relevant Tax Authority and the total value of interest paid to me during any given period.

I hereby confirm and consent, as necessary, that FirstRand Limited, including FirstRand Bank Limited Guernsey Branch (FNB Channel Islands), may process (collect, use or otherwise deal with) my information (including processing outside of the borders of Guernsey), which was voluntarily provided, for the purposes of providing services and products, according to the General Terms and Conditions available on www.fnbci.co.uk and requirements of the law. I hereby confirm that I have read and understood the General Terms and Conditions and specifically the portion relating to the processing of my personal information. I also confirm that the information provided by me to FNB Channel Islands is true, correct and current; including information about my residency and citizenship for local and international tax purposes, and that I will inform FNB Channel Islands if it changes.

I can refer to the Privacy Policy www.fnbci.co.uk for more information on the Bank's privacy practices.

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Client's Signature	Date	Υ	Υ	Υ	Υ	M	M	D	D

Full Name and Surname