

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) DUE DILIGENCE FORM

Personal

Please provide complete details and indicate NOT APPLICABLE to items/sections deemed appropriate.

Account Name	Account Number
Questions	Yes No
1. Are you an American Citizen?	
Do you have dual citizenship? If YES, please indicate citizenships a. b.	
3. Are you a permanent resident of the U.S./Green Card Holder?	
4. Were you born in the U.S.?	
5. Do you have a residence address in the U.S.?	
6. Do you have a phone number in the U.S.?	
7. Do you have any instructions to transfer funds to an account in the U.S.?	
8. Have you been to the U.S. in the last 3 years?	
If any of the answers to questions stated above is YES, kindly specify requi	ired application information below
A. Name	
B. U.S. Address	
No. Street Subdivision/District/Town	
C. U.S. Telephone Number	
D. U.S. TIN or U.S. SS Number	
E. U.S. PO Box	
F. Standing instructions to pay amount/transfer funds to an account maintained in the U.S.	
G. Current Power of Attorney or signatory authority granted to a person with U.S. address	
H. An "in-care-of" address or "hold mail" U.S. address	
I. Length of stay in the U.S. Current Year No. of Days Last Year No. of Days Prior to Last Year	No. of Days Total Length of Stay
Certified true and correct	
Signature Over Printed Name by Account's Signatory/ies	Date (MM-DD-YYYY)
FOR BANK'S USE ONLY	
TOK BANKS OSE ONE!	
Customer Information File Number Ban	k Representative's Print Name Over Signature
Notes/Remarks (if any):	<u>-</u>