



..... Branch

INFORMATION ON INDIVIDUAL (ব্যক্তি সংক্রান্ত তথ্যাবলী)

(হিসাবধারী/হিসাব পরিচালনাকারী একাধিক হলে অতিরিক্ত ব্যক্তির জন্য এই ফর্মটি প্রযোজ্য ফরমটি পূরণপূর্বক হিসাব খোলার আবেদনের মূল অংশের সাথে সংযুক্ত করতে হবে)

Photograph

Date

Account Number									

Client Identifier Code									

- Name of the Account :
- Name of Account Holder/Beneficial Owner/ Account Operator's Name :
বাংলায় :
In English (Block Letter) :
- Relationship with the Account (Put ✓) :
 1st Applicant 2nd Applicant 3rd Applicant Director Partner Sole Proprietorship
 Minor Guardian Attorney Holder Signatory Trustee Beneficial Owner Others.....
- Date of Birth : Place of Birth (with country) :
- Father's Name :
- Mother's Name :
- Name of Husband/Wife :
- Nationality :
(In case of a foreigner, copy of Passport along with Visa must be obtained)
- Residence Status (Put✓) : Resident Non-Resident
(If needed instructions to be followed as per the guidelines for Foreign Exchange Transactions)
- Gender (Put✓) : Male Female Third Gender
- Profession (in details) : Relation with the organization:
- Monthly Income (for Individual Account) :
(If needed, related documents mentioning details to be provided as per the Bank's requirement)
- Source of Income (in details):.....
- Identity Papers : National ID Number/Passport No./Birth Reg. Certificate No :
- Tax ID Number. (TIN) (if any) :
- a). Present Address : House No : Flat No :
Road/Village: P.O:
Upazila/Thana : District : Post Code :
Phone No.: Mobile No.:E-mail:
- b). Permanent Address : Road/Village: P.O:
Upazila/Thana : District : Post Code :
- c). Correspondence (Put✓) : Present Address Permananet Address Business Address

Foreign Account Tax Compliance Act (FATCA)

Please put (✓) in the applicable box below :

- | | YES | / | NO |
|---------------------------------------|--------------------------|---|--------------------------|
| 1. Are you a U.S. Citizen ? | <input type="checkbox"/> | | <input type="checkbox"/> |
| 2. Are you a U.S. Green Card Holder ? | <input type="checkbox"/> | | <input type="checkbox"/> |
| 3. Are you a U.S. Resident ? | <input type="checkbox"/> | | <input type="checkbox"/> |

Subject to applicable local laws, I/We hereby consent for ONE Bank Limited or any of its affiliates (including branches) (collectively "the Bank") to share my/our information with domestic or overseas regulators or tax authorities where necessary to establish my tax liability in any jurisdiction. Where required by domestic or overseas regulator or tax authorities, I/We consent and agree that the Bank may withhold from my account(s) such amounts as may be required according to applicable laws, regulations and directives. I/We undertake to notify the Bank within 30 calendar days if there is a change in any information which I have provided to the Bank.

Applicant's Acceptance

I confirm that the information given above is true and complete and agree to comply with the rules governing customer accounts with ONE Bank Limited.

Applicant's Signature :

Date :

FOR BANK USE ONLY

Officer Opening the Account:

Name:

Signature:

Approved by :

Name:

Signature: