Beneficial Owner Information Form [Annexure-1(1)]

For The Actual Beneficial Of The Account





| Date: D D M M Y | Y | V | Y | 1 | | | | | | | | | ſ | | | CIF Number Account Number Account Number Photo of Beneficial Owner Others: Upazila Thana: Country: | | | | | | | | | | | | | | | | | | | | | | |
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| If Applicable | | | | | | | I | IB Window | | | | | | | Accoun | | | | | | | | | nt Number | | | | | | | | | | | | | | |
| | | | | | | | I | | | T | | | L | | <u> </u> | | _ | | | | | | | <u> </u> | | | | | | | T | | | | | | | |
| 1. Account Title : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Name of The Beneficial Owner (বাংলায়) : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| In English (Block Letter): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. Date of Birth : | D | D | М | M | Υ | Υ | Υ | Υ | 4 | l. G | ende | r : [| | Aale | |] Fe | ma | le [| | Othe | ers | | | | | | | | | | | | | | | | | |
| 5. Relationship with Acco | unt H | old | er : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Resident Status | : []] | Resi | iden | ce | | Non | Res | iden | ce | 7. N | Vatio | nali | ty: | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Profession (details) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | В | ene | ficia | al Ov | vner | | | | | | | | |
| 9. Monthly Income | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. Source of Income | Plea | ase : | Spe | cify | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. Tax ID No (TIN if any): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. Father's Name | | | | | | | | | | | Ť | Ť | _ | | T | | T | | | | | | | T | T | | | | | | | Τ | | | | | | |
| 13. Mother's Name | | | | | | | | | | | | | | | <u> </u> | | <u> </u> | | | | | | <u> </u> | | | | | | | | | <u> </u> | | | | | | |
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| | | L D | | \ D 1 | | Т. | | | | | | | | | | | | | | | | | | | | | | | | | | <u></u> | | | | | | |
| 15. Email Address : | | | _ | A P I | | A L | | 2 1 1 | | | | | | | | | _ | .1 | | | | | _ | _ | _ | | | | | | | _ | | | | | | |
| | Cell 1 | No. | : | | | | | | | | | | | | | | O ₁ | ther | s : [| | | | | | 1 | | | | | | | | | | | | | |
| 17. Identity Document | | NII | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | |
| | | | spo | | | | | | | | | | | | | | | | | | | | | | 7 | | | | | | | | | | | | | |
| 18. Present Address | | | th C | | ficat | e | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| io i resent rium ess | | | g No. | | lmarl | k: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Ro | ad / ` | Villa | ge: | | | | | | | | | | | 1 | | | | | | | |] m. | | 1a F | | | | | | | | | | | | | |
| | Pos | t Off | fice: | | | | | | | | | | | | Po | st Cod | e : | | | | | | | | | | | | | | | | | | | | | |
| | | trict: | | | | | | | | | | | | | | | | C | ountr | y: | | | | | | | | | | | | | | | | | | |
| 19. Permanent Address | | | ./Hou g No./ | | lmarl | k: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Ro | ad / ` | Villa | ge: | | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | |
| | Pos | t Off | ice: | | | | | | | | | | | | Pos | st Cod | e : | | | | _ | | | pazi han | | | | | | | | | | | | | | |
| | Dis | trict: | : | | | | | | | | | | | | | | | C | ountr | y: | | | | | | | | | | | | | | | | | | |
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| Account Opening (| Iffice | r's | / Br | ancl | n Of | ticia | ISig | nati | ire | | | | | | | | | | | | RIV | 1 / I | BAN | 4L | CO | Sig | nat | ure | | | | | | | | | | |