

PLEASE FILL OUT THE FORM IN CAPITAL LETTER IN ENGLISH



	Branch
If Applicable	IB Window

CIF Number

Account Number

[illegible]

(বাংলায়)

In English
(Block Letters)

☐ 1st Applicant ☐ 2nd Applicant ☐ 3rd Applicant ☐ Partner ☐ Director ☐ Minor ☐ Guardian
☐ Signatory ☐ Trustee ☐ Attorney Holder ☐ Others

4. Date of Birth :

D	D	M	M	Y	Y	Y	Y
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5. Gender: ☐ Male ☐ Female ☐ Third Gender

6. Nationality: ☐ Bangladeshi ☐ Others (In case of foreign citizen, copy of the passport with valid VISA must be obtained)

7. Resident Status: ☐ Residence ☐ Non-Residence (Instructions of Guidelines for Foreign Exchange Transactions will be followed by Bank if necessary)

8. Email Address: USE CAPITAL LETTER

[illegible][illegible][illegible][illegible]

12. Spouse's Name:	
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13. Identity Document : ☐ NID ☐ Passport ☐ Birth Certificate ☐ Others (please specify)

[illegible]

Expiry Date (where applicable)	D	D	M	M	Y	Y	Y	Y
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14. Source of Income : ☐ Salary ☐ Rent ☐ Agriculture ☐ Own Business ☐ Gift/Inheritance/Retrun on Investment ☐ Others

15. Details of Profession :

☐ Public Service

☐ Private Service (if ticked, specify below)

☐ Multinational Organization ☐ Local Organization

☐ Business (if ticked, specify below)
☐ Proprietorship ☐ Partnership ☐ Limited Company
☐ Self-Employed ☐ Others

- ☐ Housewife
- ☐ Student
- ☐ Un-Employed

(a) Organization Name :

(b) Position/Designation :

(c) Nature/Type of Business :

(d) Monthly Income :

16. a. Present Address (Residence) :

Flat No./House/Holding No./Landmark:

Road/ Village:		Post Office:		Post Code:		Upazila /Thana:		District:		Country:	
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b. Permanent Address :

Flat No./House/Holding No./Landmark:

Road/ Village:	Post Office:	Post Code:	Upazila /Thana:	District:	Country:
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c. Correspondence Address :

Flat No./House/Holding No./Landmark:

Road/ Village:	Post Office:	Post Code:	Upazila /Thana:	District:	Country:
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17. E-TIN No. :

18. Proof of Return Submission: ☐ Yes ☐ No Return Submission Year :

Foreign Account Tax Compliance Act (FATCA)

Please put (✓) in the applicable box below:

1. Are you a U.S. Citizen? ☐ Yes ☐ No

2. Are you a U.S. Green Card Holder? ☐ Yes ☐ No

3. Are you a U.S. Resident? ☐ Yes ☐ No

Subject to applicable local laws, I/We hereby consent for ONE Bank PLC 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 PLC.

Signature of Applicant

Signature of Applicant / Signatory