



IIG Bank (Malta) Ltd

Level 20, Portomaso Business Tower, St. Julians STJ 4011, Malta.
Tel: +356-22484500 Fax: +356-22484525 SWIFT: IIGBMTMT www.iigbank-malta.com

ACCOUNT OPENING FORM – ENTITY

Suitable for Corporate Bodies / Business Organizations / Government Entities / Charities / Clubs / Associations / Foundations

Date: _____

Dear Sirs,

We, the undersigned, request and authorise IIG Bank (Malta) Ltd ('the **Bank**') to open an account or accounts denominated in USD / EUR / GBP / CHF / _____ (specify as required), as may from time to time be requested in writing, in the name of:

Official Full Name _____ (the '**Applicant**'),

Country

which is registered and / or existing under the laws of _____
DD/MM/YYYY
incorporated / established on _____ and having registration number _____ (where applicable)
Our Registered Office Address is: _____

Our Correspondence / Mailing Address is (if different from above): _____

Activities of the Applicant: _____

Main countries / regions dealt with: _____

Main countries / regions interested in: _____

No. of employees / staff working for the entity: _____

Fixed Line Tel. No.: _____

Mobile No.: _____

E-Mail Contact: _____

Fax No.: _____

Tax Registration No. (if applicable): _____

Additional Information:

Does the Entity have any U.S. Registration? Yes No

Is the Entity subject to any U.S. Tax? Yes No

Does the Entity regularly transfer funds from / to the U.S.? Yes No

1. SERVICE REQUEST

Type of Product / Service requested from the Bank:

International Trade Services:

Letters of Credit Documentary Collections Commodity Trade Finance

Bonds and Guarantees Forfaiting Ship Financing

Corporate Banking:

Deposits International Fund Transfers Forward Contracts

Others:

Anticipated annual turnover through IIG Account(s): Currency _____ Amount _____

Anticipated annual average balance through IIG Account(s): Currency _____ Amount _____

Anticipated number of transactions per year through IIG Account(s): _____

2. DIRECTORS / ADMINISTRATORS**Please add details of all Directors, Partners, Founders, Administrators and any other persons vested with the administration of the entity*

a.	Full Name (<i>Surname, First Name, Middle Names for Individuals / Full Registration Name for Corporates</i>)		Title**
	Position held in entity		Telephone Number / Mobile No.
	Permanent Residential / Registered Address		
	Town / City	Country	Post Code
	Date of Birth / Registration (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth / Country of Registration	Marital Status**
	Nationality**		Citizenship**
	Passport / ID Card / Driving Licence / Residence Card / Registration Number	Date and Place of Issue**	Expiry Date**
	Tax Identification Number***		Jurisdiction of residence for tax purposes***
b.	Full Name (<i>Surname, First Name, Middle Names for Individuals / Full Registration Name for Corporates</i>)		Title**
	Position held in entity		Telephone Number / Mobile No.
	Permanent Residential / Registered Address		
	Town / City	Country	Post Code
	Date of Birth / Registration (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth / Country of Registration	Marital Status**
	Nationality**		Citizenship**
	Passport / ID Card / Driving Licence / Residence Card / Registration Number	Date and Place of Issue**	Expiry Date**
	Tax Identification Number***		Jurisdiction of residence for tax purposes***
c.	Full Name (<i>Surname, First Name, Middle Names for Individuals / Full Registration Name for Corporates</i>)		Title**
	Position held in entity		Telephone Number / Mobile No.
	Permanent Residential / Registered Address		
	Town / City	Country	Post Code
	Date of Birth / Registration (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth / Country of Registration	Marital Status**
	Nationality**		Citizenship**
	Passport / ID Card / Driving Licence / Residence Card / Registration Number	Date and Place of Issue**	Expiry Date**
	Tax Identification Number***		Jurisdiction of residence for tax purposes***

2. DIRECTORS / ADMINISTRATORS* (cont.)*Please add details of all Directors, Partners, Founders, Administrators and any other persons vested with the administration of the entity*

d.	Full Name (<i>Surname, First Name, Middle Names for Individuals / Full Registration Name for Corporates</i>)		Title**
	Position held in entity		Telephone Number / Mobile No.
	Permanent Residential / Registered Address		
	Town / City	Country	Post Code
	Date of Birth / Registration (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth / Country of Registration	Marital Status**
	Nationality**		Citizenship**
	Passport / ID Card / Driving Licence / Residence Card / Registration Number	Date and Place of Issue**	Expiry Date**
	Tax Identification Number***		Jurisdiction of residence for tax purposes***
e.	Full Name (<i>Surname, First Name, Middle Names for Individuals / Full Registration Name for Corporates</i>)		Title**
	Position held in entity		Telephone Number / Mobile No.
	Permanent Residential / Registered Address		
	Town / City	Country	Post Code
	Date of Birth / Registration (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth / Country of Registration	Marital Status**
	Nationality**		Citizenship**
	Passport / ID Card / Driving Licence / Residence Card / Registration Number	Date and Place of Issue**	Expiry Date**
	Tax Identification Number***		Jurisdiction of residence for tax purposes***
f.	Full Name (<i>Surname, First Name, Middle Names for Individuals / Full Registration Name for Corporates</i>)		Title**
	Position held in entity		Telephone Number / Mobile No.
	Permanent Residential / Registered Address		
	Town / City	Country	Post Code
	Date of Birth / Registration (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth / Country of Registration	Marital Status**
	Nationality**		Citizenship**
	Passport / ID Card / Driving Licence / Residence Card / Registration Number	Date and Place of Issue**	Expiry Date**
	Tax Identification Number***		Jurisdiction of residence for tax purposes***

*** The information provided herein is to be accompanied by the necessary official documentation listed in the checklist at the back of the form.****** Applicable to individuals.******* Applicable only to individuals considered to be Controlling Persons / Beneficial Owners for CRS / FATCA purposes.***(Continue on an additional sheet if necessary)*

3. ULTIMATE BENEFICIAL OWNERS*

Please add details of all Shareholders / Partners / Beneficiaries and any other natural persons who have an ownership / controlling interest (whether direct or indirect) of at least 10% in the entity.

a.	Surname	First Name	Middle Name(s)	Title
Ownership / Controlling Interest Percentage			Telephone Number / Mobile No.	
Permanent Residential Address				
Town / City		Country	Post Code	
Date of Birth (DD/MM/YYYY)		Town / City & Country of Birth	Marital Status	
Passport / ID Card / Driving Licence / Residence Card Number		Date and Place of Issue	Expiry Date	
Nationality		Citizenship		
Citizenship Declaration (Tick as applicable)				
<input type="checkbox"/> I hereby declare that I do not hold any other citizenship than the one specified above.				
<input type="checkbox"/> I hereby declare that I hold more than one citizenship as results from the passport information detailed below.				
Passport No.		Passport No.		
Issue Date		Issue Date		
Expiry Date		Expiry Date		
Passport Issuing State		Passport Issuing State		
Tax Identification Number		Jurisdiction of residence for tax purposes		

b.	Surname	First Name	Middle Name(s)	Title
Ownership / Controlling Interest Percentage			Telephone Number / Mobile No.	
Permanent Residential Address				
Town / City		Country	Post Code	
Date of Birth (DD/MM/YYYY)		Town / City & Country of Birth	Marital Status	
Passport / ID Card / Driving Licence / Residence Card Number		Date and Place of Issue	Expiry Date	
Nationality		Citizenship		
Citizenship Declaration (Tick as applicable)				
<input type="checkbox"/> I hereby declare that I do not hold any other citizenship than the one specified above.				
<input type="checkbox"/> I hereby declare that I hold more than one citizenship as results from the passport information detailed below.				
Passport No.		Passport No.		
Issue Date		Issue Date		
Expiry Date		Expiry Date		
Passport Issuing State		Passport Issuing State		
Tax Identification Number		Jurisdiction of residence for tax purposes		

3. ULTIMATE BENEFICIAL OWNERS* (cont.)

Please add details of all Shareholders / Partners / Beneficiaries and any other natural persons who have an ownership / controlling interest (whether direct or indirect) of at least 10% in the entity.

c.	Surname	First Name	Middle Name(s)	Title
	Ownership / Controlling Interest Percentage			Telephone Number / Mobile No.
	Permanent Residential Address			
	Town / City	Country	Post Code	
	Date of Birth (DD/MM/YYYY)	Town / City & Country of Birth		Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number		Date and Place of Issue	Expiry Date
	Nationality		Citizenship	
	Citizenship Declaration (Tick as applicable)			
	<input type="checkbox"/> I hereby declare that I do not hold any other citizenship than the one specified above.			
	<input type="checkbox"/> I hereby declare that I hold more than one citizenship as results from the passport information detailed below.			
	Passport No.		Passport No.	
	Issue Date		Issue Date	
	Expiry Date		Expiry Date	
Passport Issuing State		Passport Issuing State		
Tax Identification Number		Jurisdiction of residence for tax purposes		
d.	Surname	First Name	Middle Name(s)	Title
	Ownership / Controlling Interest Percentage			Telephone Number / Mobile No.
	Permanent Residential Address			
	Town / City	Country	Post Code	
	Date of Birth (DD/MM/YYYY)	Town / City & Country of Birth		Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number		Date and Place of Issue	Expiry Date
	Nationality		Citizenship	
	Citizenship Declaration (Tick as applicable)			
	<input type="checkbox"/> I hereby declare that I do not hold any other citizenship than the one specified above.			
	<input type="checkbox"/> I hereby declare that I hold more than one citizenship as results from the passport information detailed below.			
	Passport No.		Passport No.	
	Issue Date		Issue Date	
	Expiry Date		Expiry Date	
Passport Issuing State		Passport Issuing State		
Tax Identification Number		Jurisdiction of residence for tax purposes		

* The information provided herein is to be accompanied by the necessary official documentation listed in the checklist at the back of the form and a comprehensive corporate structure chart showing the ownership and control structure of the entity (where applicable).

(Continue on an additional sheet if necessary)

4. INSTRUCTIONS TO THE BANK

Certified extract of a resolution approved and adopted by the Board of Directors / Partners / Administrators (*delete as applicable*) of _____ (the 'Applicant')

at a meeting held on the _____.

It was unanimously resolved that:

1. **IIG Bank (Malta) Ltd** of Level 20, Portomaso Business Tower, St. Julian's, STJ 4011, Malta (the 'Bank') be appointed as Bankers of the Applicant and it was resolved that an account or accounts be opened with the said Bank.
2. The Bank be instructed and authorised to:
 - i) honour and comply with any instructions to withdraw / deposit any and all funds on any account or accounts in the Applicant's name;
 - ii) honour and debit / credit to the Applicant's account or accounts all cheques, drafts, orders to pay, bills of exchange and promissory notes expressed to be drawn, signed, accepted, endorsed or made on behalf of the Applicant, whether the Applicant's account or accounts is or are in credit or in debit or may become overdrawn in consequence of such debit but without prejudice to the Bank's right to refuse to allow any overdraft or an increase of overdraft beyond any specified limit;
 - iii) process facility letters granted by the Bank and approved by the Applicant as well as the related security documentation in the form of a pledge agreement duly countersigned by the Applicant;
 - iv) accept general assignments for and on behalf of the Applicant;
 - v) honour any instructions to deliver, dispose of or deal in any securities, deeds or documents or other property whatsoever from time to time in the Bank's possession for the Applicant's account whether by way of security or safe custody or otherwise;
 - vi) act on our instructions with regard to the purchase or sale of any foreign currencies or any securities or documents;
 - vii) act upon applications or requests to issue any letter of credit, guarantee, indemnity or counter-indemnity and all related applications or requests;
 - viii) arrange for the discounting of any bills endorsed by the Applicant; and
 - ix) generally to act in accordance with the Applicant's requests in relation to its account or accounts as may from time to time be opened.

PROVIDED THAT:

Any such instruments, requests or instructions mentioned in 2(i) – 2(ix) above be signed by the following Authorised Account Signatory/ies:

AUTHORISED ACCOUNT SIGNATORIES: (*please mark your choice with an X where appropriate*)

Name of Authorised Signatory	Specimen Signature	<input type="checkbox"/> Sole Signatory <input type="checkbox"/> Joint Signatory	<i>Special Instructions (if any)</i>
Name of Authorised Signatory	Specimen Signature	<input type="checkbox"/> Sole Signatory <input type="checkbox"/> Joint Signatory	<i>Special Instructions (if any)</i>
Name of Authorised Signatory	Specimen Signature	<input type="checkbox"/> Sole Signatory <input type="checkbox"/> Joint Signatory	<i>Special Instructions (if any)</i>
Name of Authorised Signatory	Specimen Signature	<input type="checkbox"/> Sole Signatory <input type="checkbox"/> Joint Signatory	<i>Special Instructions (if any)</i>
Name of Authorised Signatory	Specimen Signature	<input type="checkbox"/> Sole Signatory <input type="checkbox"/> Joint Signatory	<i>Special Instructions (if any)</i>
Name of Authorised Signatory	Specimen Signature	<input type="checkbox"/> Sole Signatory <input type="checkbox"/> Joint Signatory	<i>Special Instructions (if any)</i>

Certified true extract:

AUTHORISED SIGNATORY DETAILS**Please add details of all Signatories listed in section 4 above.*

a.	Full Name (<i>Surname, First Name, Middle Names</i>)		Title
	Permanent Residential Address		Telephone Number / Mobile No.
	Town / City	Country	Post Code
	Date of Birth (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth	Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number	Date and Place of Issue	Expiry Date
	Nationality	Citizenship	
	Tax Identification Number**	Jurisdiction of residence for tax purposes**	
b.	Full Name (<i>Surname, First Name, Middle Names</i>)		Title
	Permanent Residential Address		Telephone Number / Mobile No.
	Town / City	Country	Post Code
	Date of Birth (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth	Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number	Date and Place of Issue	Expiry Date
	Nationality	Citizenship	
	Tax Identification Number**	Jurisdiction of residence for tax purposes**	
c.	Full Name (<i>Surname, First Name, Middle Names</i>)		Title
	Permanent Residential Address		Telephone Number / Mobile No.
	Town / City	Country	Post Code
	Date of Birth (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth	Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number	Date and Place of Issue	Expiry Date
	Nationality	Citizenship	
	Tax Identification Number**	Jurisdiction of residence for tax purposes**	

AUTHORISED SIGNATORY DETAILS *(cont.)*Please add details of all Signatories listed in section 4 above*

d.	Full Name (<i>Surname, First Name, Middle Names</i>)		Title
	Permanent Residential Address		Telephone Number / Mobile No.
	Town / City	Country	Post Code
	Date of Birth (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth	Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number	Date and Place of Issue	Expiry Date
	Nationality	Citizenship	
	Tax Identification Number**	Jurisdiction of residence for tax purposes**	

e.	Full Name (<i>Surname, First Name, Middle Names</i>)		Title
	Permanent Residential Address		Telephone Number / Mobile No.
	Town / City	Country	Post Code
	Date of Birth (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth	Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number	Date and Place of Issue	Expiry Date
	Nationality	Citizenship	
	Tax Identification Number**	Jurisdiction of residence for tax purposes**	

f.	Full Name (<i>Surname, First Name, Middle Names</i>)		Title
	Permanent Residential Address		Telephone Number / Mobile No.
	Town / City	Country	Post Code
	Date of Birth (<i>DD/MM/YYYY</i>)	Town / City & Country of Birth	Marital Status
	Passport / ID Card / Driving Licence / Residence Card Number	Date and Place of Issue	Expiry Date
	Nationality	Citizenship	
	Tax Identification Number**	Jurisdiction of residence for tax purposes**	

* To be supported by the necessary official documentation listed in the checklist at the back of the form.

** Applicable only to individuals considered to be Controlling Persons / Beneficial Owners for CRS / FATCA purposes.

(Continue on an additional sheet if necessary)

5. CORRESPONDENCE INSTRUCTIONS

- a. The Bank is authorised to act upon written requests or instructions received **by facsimile** **by email** (*specify as required*).
- b. When requests or instructions may be received by email, the Bank is authorised to act upon written requests or instructions sent or purported to have been sent from one of the email addresses below.

Accepted email addresses:

Email Address _____	Email Address _____
Email Address _____	Email Address _____
Email Address _____	Email Address _____
Email Address _____	Email Address _____

- c. The Bank is hereby authorised and instructed to send **advices and statements** (*please select one of the below options*):

By mail

By email to the below email addresses. Kindly be informed that email services substitute generation of printed advices and / or statements.

Email Address _____	Email Address _____
Email Address _____	Email Address _____
Email Address _____	Email Address _____

Please select the frequency of statements and also indicate on which day you would like to receive the weekly statement, if applicable:

- On Movement Daily Monthly Quarterly Semi-Annually Annually
- Weekly – Working Days: Monday Tuesday Wednesday Thursday Friday

Statements exceeding a monthly frequency may attract a charge as per Bank's Tariff of Charges.

- d. The Bank is authorised to send any type of communication to any email address/es specified on this account opening form.

6. PRINCIPAL BANKERS

The Bank is authorised to contact our bankers stated below for the purpose of obtaining a reference on the entity and authorise the Bank to debit our account with any fee to cover this service.

Name of Bank: _____

Address: _____

Swift Code: _____

Account Number: _____

Contact Person: _____

7. TAX DECLARATION (*Please tick as appropriate*)

For entities resident in Malta:

We hereby declare that the Entity is a Maltese resident and we hereby instruct the Bank to pay interest to the Entity, at the discretion of the Bank:

- With the deduction of the final withholding tax; or
- Without any deduction of withholding taxes.

For non-residents:

We hereby declare that the Entity is not resident in Malta and that the control and management of the Entity is not exercised in Malta and therefore we hereby instruct the Bank to pay interest to us, at the discretion of the Bank without any deduction of withholding taxes.

8. POLITICALLY EXPOSED PERSONS* (PEP) DECLARATION (Please tick and complete all that apply)

I / We hereby declare that **NONE** of the individuals mentioned herein (including but not limited to Directors, Partners, Founders, Administrators, Ultimate Beneficial Owners, Signatories and / or individuals having an ownership / controlling interest in the Entity, as applicable) are Politically Exposed Persons, nor are they related to or closely associated with a Politically Exposed Person.

I/We hereby declare that the herein mentioned _____

IS / ARE (a) Politically Exposed Person(s), or he / she / they **IS / ARE** related to or closely associated with a Politically Exposed Person.

Name of the Politically Exposed Person: _____

Name of the Politically Exposed Person: _____

Current / past public position: _____

Current / past public position: _____

Relation to / association with PEP: _____

Relation to / association with PEP: _____

I / We further declare that **NONE** of the **OTHER** mentioned individuals are Politically Exposed Persons, nor are they related to or closely associated with a Politically Exposed Person.

* The term '*Politically Exposed Persons*' means natural persons who are or have been entrusted with prominent public functions and shall include their family members or persons known to be close associates of such persons, but shall not include middle ranking or more junior officials.

The term '*natural persons who are or have been entrusted with prominent public functions*' shall include:

- (a) Heads of State, Heads of Government, Ministers, Deputy or Assistant Ministers, and Parliamentary Secretaries;
- (b) Members of Parliament or similar legislative bodies;
- (c) Members of the governing bodies of political parties;
- (d) Members of superior, supreme and constitutional courts or of other high-level judicial bodies whose decisions are not subject to further appeal, except in exceptional circumstances;
- (e) Members of courts of auditors or of the boards of central banks;
- (f) Ambassadors, *charge d'affaires* and high-ranking officers in the armed forces;
- (g) Members of the administrative, management or supervisory boards of State-owned enterprises;
- (h) Anyone exercising a function equivalent to those set out in paragraphs (a) to (f) within an institution of the European Union or any other international body;
- (i) Directors, deputy directors and members of the board or equivalent function of an international organisation.

The term '*family members*' of PEPs shall include:

- (a) the spouse, or a person considered to be equivalent to a spouse;
- (b) the children and their spouses, or persons considered to be equivalent to a spouse; and
- (c) the parents.

The term '*persons known to be close associates*' shall include:

- (a) a natural person known to have joint beneficial ownership of a body corporate or any other form of legal arrangement or any other close business relations with that PEP;
- (b) a natural person who has sole beneficial ownership of a body corporate or any other form of legal arrangement that is known to have been established for the benefit of that PEP.

Where a person has ceased to be entrusted with a prominent public function as stated above for a period of at least 12 months, such person shall no longer be considered as a PEP.

9. DECLARATION

The Applicant hereby confirms that it has received and read a copy of IIG Bank (Malta) Ltd (the '**Bank**') General Terms and Conditions of Business (the '**General Terms**') together with the **Bank's Privacy Notice** (which is annexed to and constitutes an integral part of the General Terms) and it also agrees to be bound by these General Terms as they may be amended from time to time, in its relationship with the Bank. By signing, the Applicant also warrants that it has read the contents of the Privacy Notice, and fully understands that the Bank will process its personal data in accordance with that same Privacy Notice.

The Applicant also confirms that a copy of the **Depositor Compensation Scheme Information Sheet** (including Exclusions List) has been provided to it prior to or at the time of signing this application form. The Applicant also specifically agrees and confirms that the Bank shall be entitled to disclose information relating to or pertaining to the Applicant in accordance with the General Terms or as otherwise permissible or required by law.

The Applicant further declares, confirms and agrees:

- a. That all the particulars and information given in this application form and in other ancillary documentation are true, correct, complete and up to date in all respects and that no information has been withheld;
- b. That no dissolution, winding up, liquidation or analogous proceedings, whether voluntary or compulsory, have been approved or commenced in respect of the Applicant in any jurisdiction, nor has the Applicant entered into any arrangement with its creditors;
- c. That it has not, at any time, defaulted under any loan or other credit facility obtained from any person;
- d. That the provision of any false or misleading information or the suppression of any material fact will render the Applicant's account liable for termination and further action;
- e. To indemnify the Bank and its successors or assigns, if any representation or declaration made hereunder or in any other ancillary document is incorrect, false, or misleading in any way;
- f. To forthwith provide the Bank with up-to-date information and documents as may be required by the Bank from time to time in order for the Bank to comply with its anti-money laundering obligations and anti-terrorist financing obligations;
- g. To forthwith notify the Bank of any changes / updates made to any of the documents being submitted with this application form and to furnish to the Bank a copy of such documents as amended;
- h. To forthwith inform the Bank in case of any significant changes to the Applicant's ownership and / or legal structure; and
- i. To furnish to the Bank such documents and particulars as may be reasonably requested by the Bank from time to time.

10. SIGNATURES

Signature: _____

Signature: _____

Name in Full: _____

Name in Full: _____

Legal Representatives for and on behalf of the Entity

(If any of the Legal Representatives are signing this form in virtue of a Board Resolution, a certified copy of such Board Resolution is to be provided.)

Signatures verified by: *(Signatures to be verified when application is not completed in the presence of an IIG representative.)*

Signature of Certifier*

Name of Certifier

Stamp of Certifier

* A 'Suitable Certifier' may be a legal professional, a notary public, an accountancy professional or a bank official.

11. SUPPORTING DOCUMENTATION CHECK LIST

To open your account either visit our offices, where we will be pleased to complete your account application form, or download and print the application form available on our website and send it to us complete with original signature(s) together with the requisite additional documents required (please see below).

Where copies of the required documents are being submitted, these should be copies of the originals which have been inspected and verified as such by a suitable certifier*. Please ensure that the copies are clear and all relevant details are plainly visible and legible. The certifier should authenticate each document by including the following written statement: 'I certify that this document is a true copy of the original document which has been seen and verified by me, the undersigned.' If the document bears a photograph, then the certifier should add the following wording: 'The photo is a true likeness of [insert full name and surname of the document holder].' The certifier must then sign and date each copy (indicating his / her name clearly beneath his / her signature) and clearly indicate his / her profession, designation or capacity and his / her contact details, preferably by affixing his / her professional or company stamp. The certifier should also verify your signature on the bottom of page 11 of the application form.

* A 'Suitable Certifier' may be a legal professional, a notary public, an accountancy professional or a bank official.

a. For a Sole Trader

- Original or certified true copy of a valid and unexpired Identification Document (i.e. a valid passport / ID Card / residence card / driving license)
- Original or certified true copy of the Verification Document of Residential Address which must be not more than 6 months old (i.e. a utility bill or a bank statement)

b. For a Corporate Entity

- Original or certified true copy of the Certificate of Incorporation / Registration and a recent (not more than 3 months old) Good Standing Certificate / Certificate of Incumbency (or similar document) issued by the Registry of Companies of the State of Incorporation
- Original or certified true copy of the latest Memorandum and Articles of Association; and any special resolutions which may have affected an amendment or restriction thereto
- Ownership and control structure chart of the company
- Original or certified true copy of the list of all Directors, Shareholders and Attorneys of the Company
- For each of the authorised signatories / directors / controlling persons / ultimate beneficial owners (ultimate beneficial owners are natural persons who own or control, whether directly or indirectly, at least 10% of the shares or voting rights):
 - Original or certified true copy of a valid and unexpired Identification Document (i.e. a valid passport / ID Card / residence card / driving licence)
 - Original or certified true copy of the Verification Document of Residential Address which must be not more than 6 months old (i.e. a utility bill or a bank statement)
- For corporate directors, original or certified true copy of the Certificate of Incorporation, Good Standing Certificate and any other constitutive document evidencing the legal representation of the company
- For corporate shareholders, original or certified true copy of the latest Memorandum and Articles of Association / Share Register / recent (not more than 3 months old) Certificate of Incumbency issued by the Registry of Companies / any other similar document which evidences the registered shareholders of the company
- Latest audited financials (not more than 12 months old)
- Any other documents that the Bank might require from time to time, including notification of changes to any of the above documents

c. For a Partnership

- Original or certified true copy of the Certificate of Incorporation / Registration and a recent (not more than 3 months old) Good Standing Certificate / Certificate of Incumbency (or similar document) issued by the Registry of Companies of the State of Incorporation
- Original or certified true copy of the Deed of Partnership attesting the formation (most recent version, where applicable)
- Ownership and control structure chart of the Partnership
- Original or certified true copy of the list of Partners administering and representing the Partnership
- For each of the authorised signatories / partners / controlling persons / ultimate beneficial owners:
 - Original or certified true copy of a valid and unexpired Identification Document (i.e. a valid passport / ID Card / residence card / driving licence)
 - Original or certified true copy of the Verification Document of Residential Address which must be not more than 6 months old (i.e. a utility bill or a bank statement)
- If any of the Partners are a corporate entity, original or certified true copy of the Certificate of Incorporation and the latest Memorandum and Articles of Association / Share Register / recent (not more than 3 months old) Certificate of Incumbency issued by the Registry of Companies / any other similar document which evidences the registered shareholders of the company
- Latest audited financials (not more than 12 months old)
- Any other documents that the Bank might require from time to time, including notification of changes to any of the above documents

d. For Associations / Clubs / Foundations / Other Entity

- Original or certified true copy of the proof of registration of the Foundation / Club / Association
- Original or certified true copy of the latest Deed of Foundation or other constitutive document for the said Entity and any special resolutions which may have affected an amendment or restrictions thereto
- Explanation of the ownership and control structure chart of the Entity (where applicable)
- Original or certified true copy of the list of all Members / Administrators / Founders and any other persons vested with the administration and representation of the Entity (as applicable)
- For each of the authorised signatories / administrators / founders / members / ultimate beneficial owners (ultimate beneficial owners are identifiable natural persons who have an ownership / controlling interest, whether direct or indirect, of at least 10% in the entity):
 - Original or certified true copy of a valid and unexpired Identification Document (i.e. a valid passport / ID Card / residence card / driving licence)
 - Original or certified true copy of the Verification Document of Residential Address which must be not more than 6 months old (i.e. a utility bill or a bank statement)
- Latest audited financials (not more than 12 months old)
- Any other documents that the Bank might require from time to time, including notification of changes to any of the above documents