



CUSTOMER DECLARATION

Individual

Date: _____

IDENTIFICATION INFORMATION OF BENEFICIAL OWNER <i>(Each party of a joint account is required to complete a separate form)</i>		
CIF#:		
Customer Name:		
Identification:	ID#:	DP#:
		PP#:
Legal Address:	Mailing Address <i>(if different from Legal)</i> :	
Date of Birth:	Power of Attorney <i>(if applicable)</i> :	
Country of Birth:		
Nationality:		
Contact#:	(H):	(W):
		(M):
Do you hold citizenship/ nationality/ residency status in another country/ countries: <input type="checkbox"/> Yes <input type="checkbox"/> No		
RESIDENCY INFORMATION OF BENEFICIAL OWNER		
Are you a person who must comply with a disclosure requirement of tax residency? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, please list country/ countries of residency for tax purposes, and your corresponding tax identification information, e.g. Social Security Number (SSN), Individual Tax Identification Number (ITIN) or Inland Revenue Number (IRN) <i>(where applicable)</i> :		
Country	Tax ID Type and Number	If Tax ID is unavailable, please state reason A,B or C. <i>(with explanation where necessary)</i>
<p>Reason A- The country/ jurisdiction where Account Holder is liable to pay tax does not issue Tax IDs to its residents.</p> <p>Reason B- The Account Holder is otherwise unable to obtain a Tax ID or equivalent number <i>(Include explanation above)</i></p> <p>Reason C- No Tax ID is required (note: only select this reason if the authorities of the country of residence for tax purposes do not require the Tax ID to be disclosed).</p>		
DECLARATION		
I, _____ do hereby solemnly and sincerely declare as follows:		
<ol style="list-style-type: none"> I hereby certify/confirm that the information on this Form is to the best of my knowledge and belief, true, correct and complete. I am not a citizen or resident for tax purposes of any country other than those listed in the section of this Form "Residency Information of Beneficial Owner". I will notify First Citizens immediately, but no later than thirty (30), in the event of any change whatsoever to the information stated on this Form. I agree that I may be required, under certain circumstances, to provide additional information/ documents confirming my tax status before an account are opened. I agree that First Citizens may provide to the United States Internal Revenue Service and to any relevant tax authority (or any party authorized to act on behalf of such an authority) any of the information provided on this Form or any information that may be required to be provided by law to the United States Internal Revenue Service or any other relevant tax authority relating to my account(s) with First Citizens. 		
Customer Signature: _____		Date: _____
*Parent, Guardian or Legal Representative Signature: _____		
<i>Only applicable when a customer is either a Minor or is otherwise Legally Represented</i>		

CSR Signature: _____

Date: _____

Authorized Signature: _____

Date: _____