Country of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent ("TIN") *				
 3. 4. 6. 	 CIF Number: Name: Please of Birth: Please complete the following table indicating: Where the Account Holder is tax resident and The Account Holder's TIN for each country indicated If the Account Holder is tax resident in more than three countries, please use a separate sheet If a TIN is unavailable, please provide the appropriate reason A, B or C where indicated below: Reason A: The country where the Account Holder is liable to pay tax does not issue TINs to its residents. Reason B: The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason.) Reason C: No TIN is required. (Only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed.) 			
	Country of tax residency	TIN *	If no TIN available enter reason A, B or C	
1				
2				
3				
4. Please explain in the table below why you are unable to obtain a TIN if you have selected Reason B above.				
1				
2				
3				
Declaration and Undertakings				
I understand that the information supplied by me is covered by the provisions of the terms and conditions governing the Account Holder's relationship with CBI setting out how CBI may use and share the information supplied by me. I acknowledge that this form, the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to any relevant tax authority, including the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be resident for tax purposes pursuant to bilateral or multilateral agreements between governments to exchange financial account information. I certify that I am the Account Holder (or am authorised to complete this form and sign for the Account Holder) of all the account(s) to which this form relates. I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.				
I undertake to advise CBI within 30 days of any change in circumstances which affects the tax residency status of the individual identified in Part 1 of this form or causes the information contained herein to become incorrect and to provide CBI with a suitably updated self-certification and declaration within up to 30 days of such change in circumstances. Print name:				
Signature:				
Date	:			
Note: If you are not the Account Holder, please ensure you have filled the Account Holder's details and indicate the capacity in which you are signing the form. If signing under a Power of Attorney, please also attach a certified copy of the Power of Attorney.				

Capacity: