

## CREDIT CARD – PERSONAL INFORMATION FORM

To be completed by the customer

Primary Information		
<input type="checkbox"/> New Relationship <input type="checkbox"/> Existing Relationship CIF No (Existing): .....		
Prefix: <input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> Miss <input type="checkbox"/> other (specify) .....		
First Name (As per the passport)	Middle name	Family Name
<input type="checkbox"/> Resident <input type="checkbox"/> Non – Resident		
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Child (Minor)		
Nationality		
Nationality: ..... Dual Nationality: .....		
Passport number: .....	Place and Date of Birth (DD/MM/YY):	
Passport expiry date: .....		
EID number: .....	Expiry date: .....	
Residential Address		
Apartment/Villa:	Building:	
Floor:	Street/ Area:	
City:	Country:	
PO Box:		
Email Address:		
Home Number:	Mobile Number:	
Home Country Address		
Apartment/Villa:	Building:	
Floor:	Street/ Area:	
City:	Country:	
PO Box:		
Home Number:	Mobile Number:	
Business Information		
<input type="checkbox"/> Employee	<input type="checkbox"/> Self Employed	
Employer Name:	Company Name:	
Business Sector:	Business Sector:	
Profession/ occupation:	Company Annual Turnover: % of ownership/sharholding : .....	
<input type="checkbox"/> Retired, please provide details about your work Experience: .....	<input type="checkbox"/> Others, please specify details, .....	
Business Address		
Office:	Building:	
Floor:	Street/ Area:	
City:	Country:	
Office Phone Number:	Fax Number:	

## For Bank Use Only - Branch/ Business Unit

## Background Information

Customer Name: .....

☐ New Relationship      ☐ Existing Relationship; CIF: .....

Date relationship commenced: ..... , Date of last review: .....

☐ Wholesale Banking Group   ☐ Islamic Banking   ☐ Business Banking   ☐ Retail Banking, ..... Branch

☐ Resident      ☐ Non-resident

PEP:      ☐ YES      ☐ NO

Standard Customer Due Diligence ( CDD) undertaken by the business unit's RM/ Branch PB &amp; BOM

☐ YES      ☐ NO

Customer Risk Rating:      ☐ Standard Risk      ☐ High Risk, reason: .....

Case referred to Compliance:      ☐ NO      ☐ YES; specify the reason: .....

Did you identify that the customer has any business relations with a sanctioned country (ies)?

☐ YES      ☐ NO

If Yes, specify name of the country(ies) ..... , reason/nature of relationship: .....

Next KYC Review Date: .....

Comments on your knowledge of the customer's background (business experience, business detail, previous relationship):

.....  
.....  
.....

Personal Banker /Relationship Manager Name, Signature and Date:

Branch Manager / Department Head Remarks:

.....  
.....  
.....

Personal Banker /Relationship Manager Name, Signature and Date:

## Income and Wealth

**Monthly Income:** Amount: \_\_\_\_\_

Source of income

☐ Salary ☐ Business income for self-employed

☐ Pension ☐ Rental income

☐ Investment proceeds

☐ Other , please specify: .....

**Additional Income:** Amount: \_\_\_\_\_

source of the additional income

☐ Commissions ☐ Project based incentive

☐ Bonus ☐ Rental income

☐ Investment Proceeds

☐ Other , please specify: .....

**What will be the source of funds for the repayments in the Credit Card?**
☐ Salary ☐ Savings ☐ Business Ownership ☐ Investment Proceeds ☐ Other

(specify) .....

Are any of the account holders or the authorized signatories/ mandatories considered a PEP or related /associated to a PEP?

☐ Yes ☐ No

**If Yes**, please provide further details: .....

## Repayment Information:

**Expected Credit Card Repayment transactions**
☐ Cash Deposits ☐ Cheque Deposit ☐ Wire Transfer

☐ Others (Specify): .....

**Expected Credit Card Repayment frequency**
☐ Monthly ☐ More than once a month

☐ Others (Specify): .....

*I/We hereby certify that all of the abovementioned information and all of the documents provided and/or to be provided are true and reflect the accurate situation to date and that, following the date of such information and documents, I will notify the bank immediately of any event, likely to affect my/our financial and legal situation, especially my/our resident or non-resident status. Moreover, I/we hereby undertake to provide the Bank, along with supporting documents, with all of the information that the Bank might request and notify the latter of any change in my/our situation.*

**Credit Card holder name:**
**Signatures, place and Date:**

1- Primary Credit Card Holder

2- Secondary Credit Card Holder