CBI

البنك التجاري الدولي

Individual Account – Personal Information Form

To be completed by the customer

Primary Information

☐ **New Relationship**	☐ **Existing Relationship**	**CIF No (Existing)**
Prefix: ☐ Mr	☐ Mrs	☐ Miss ☐ Other (specify)
First Name (As per passport)	**Middle Name**	**Family Name**
☐ Resident	☐ Non Resident	
☐ Male	☐ Female	☐ Child (Minor)

Nationality

Nationality:	Dual Nationality:
Passport Number:	Passport Expiry Date: DD MM YY
Place of Birth:	Date of Birth: DD MM YY
EID Number:	Expiry Date: DD MM YY

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:	Email Address:	
Home Number:	Mobile Number:	

Business Information

☐ Employee	☐ Self Employed
Employer Name:	Company Name:
Business Sector:	Business Sector:
Profession/Occupation:	Company Annual Turnover: % of Ownership/Shareholding:
☐ Retired, please provide details about your work experience: _____	☐ Other, please specify _____

Business Address

Office:	Building:	Floor:	Street/Area:
City:			Country:
Office Phone Number:		Fax Number:	

Income and Wealth

Monthly Income
Source of income

☐ Salary ☐ Business Income for Self-employed
☐ Pension ☐ Rental Income ☐ Investment Proceeds
☐ Other, please specify _____

Additional Income
Source of the additional income:

☐ Commissions ☐ Project Based Incentive
☐ Bonus ☐ Rental Income ☐ Investment Proceeds
☐ Other, please specify _____

Source of Wealth (if available)

☐ Property(ies):
☐ Investment portfolio (e.g. shares, bonds):
☐ Inheritance:
☐ Others, please specify

What will be the source of funds in the account?

☐ Salary ☐ Savings ☐ Business Ownership ☐ Investment Proceeds ☐ Other (specify) _____

Utilisation of funds; Country(ies): _____ Purpose: _____

Additional Information (Optional)

Educational Level:
☐ High School ☐ Diploma ☐ Bachelor Degree ☐ Master Degree ☐ Doctorate/PHD ☐ Student ☐ Other _____

Family Information

☐ Married ☐ Single ☐ Widow ☐ Divorced ☐ Other _____

Spouse Name:	Spouse Occupation:	Number of Children/Dependents:

PEP Status

Are any of the account holders or the authorised signatories/mandatories considered a PEP or related/associated to a PEP?
☐ Yes ☐ No
If Yes, please provide further details: _____

Banking Information

Purpose of account opening and the reason for establishing/maintaining the relationship with CBI

- Purpose (what will the account be used for): _____

- Reason for choosing CBI:

☐ Linked accounts ☐ Better pricing ☐ Service issue with existing bank ☐ Other (Specify) _____

CBI related accounts: ☐ Yes ☐ No

Opening Date	CBI CIF	Account Name	Currency	Branch

Please provide information about the bank you are currently dealing with

Bank Name	Branch	City	Country

Type of account required: _____

Currencies: ☐ AED ☐ USD ☐ EUR ☐ Others, (specify) _____

Bank Channels to be used

☐ Branch ☐ Mobile Banking ☐ Online Banking ☐ Call Center ☐ Automatic Teller Machines (ATMs)/ Cash Deposit Machine (CDMs)

Expected products

☐ CASA ☐ FD ☐ Credit Card ☐ Loan ☐ Trade ☐ Money Market ☐ FX

☐ Insurance ☐ Investment ☐ Islamic ☐ Others (Specify) _____

Expected Transaction within the Account

☐ Cash Deposit & Withdrawal ☐ Cheque Deposit & Withdrawal ☐ Incoming & Outgoing Transfers

☐ Others (Specify) _____

Initial Deposit Amount:	**Source of Initial Deposit:**
Expected account activity	
Monthly number of cash deposits (count) _____	Monthly value of cash deposits (amounts) _____
Monthly number of cash withdrawal (count) _____	Monthly value of cash withdrawals (amounts) _____
Monthly number of cheque deposits (count) _____	Monthly value of cheque deposits (amounts) _____
Annual number of inward remittances (count) _____ Annual value of inward remittances (amount) _____	From which country(ies) _____
Annual number of outward remittances (count) _____ Annual value of outward remittances (amount) _____	To which country(ies) _____

I/We hereby certify that all of the above mentioned 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/we 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.

Account Holder Name	**Signatures, Place and Date**
1 -	1 -
2 -	2 -

To be completed by the responsible CBI staff

For Bank Use Only – Branch/ Business Unit

Background Information

Customer Name: _____

☐ New Relationship ☐ Existing Relationship; CIF

Date account opened: DD MM YY Date of last review: DD MM YY Next KYC Review Date: DD MM YY

☐ Wholesale Banking Group ☐ Islamic Banking ☐ Business Banking ☐ Retail Banking _____

☐ Resident ☐ Non-resident

PEP: ☐ Yes ☐ No

Standard Customer Due Diligence (CDD) undertaken by the business unit's RM/Branch PB & 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: _____

US National TIN (Tax Identification Number): _____ Individual CRS TIN: _____

Economic Sector Code: _____

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

_____

_____

_____

Personal Banker/Relationship Manager Name | Signature | Date

Branch Manager/Department Head Remarks:

_____

_____

_____

Personal Banker/Relationship Manager Name | Signature | Date