

INDIVIDUAL TAX SELF CERTIFICATION - FATCA/CRS

Customer Name: Base#:

Place of Birth (As per passport) City: Country:

Section A: Mandatory for all customers

1. Are you a tax resident of any country or countries for tax purpose outside of UAE? YES NO
2. If "Yes", please specify which country or countries
3. Will you have Standing Instructions to transfer money to an account in United States? YES NO
4. Will you give power of attorney or signatory authority to a person with a US address? YES NO
5. Will this account have a hold mail or 'in care of address'? YES NO
6. Did you obtain UAE tax residency under a residency by investment scheme? YES NO
7. Are you a resident in any other jurisdiction(s)? YES NO
8. In which jurisdiction(s) have you been subject to personal income tax during the previous calendar year?

Section B: Mandatory for all US Citizens and US tax residents

9. US Tax Identification Number (TIN)

Section C: Mandatory for all those born in the US, but claiming not to be a US citizen or a US resident for tax purpose

10. If you were born in the US, but never obtained US citizenship please provide a reason why:
11. If you were born in the US, but have either lost or relinquished your US citizenship please provide a copy of your Certificate of Loss of Nationality of the US or a explanation as to why you do not have such a Certificate:

Section D: Mandatory for all NON US Citizens and NON US tax residents

	Country of residence for tax purposes	Tax Identification Number (TIN)	Reason if TIN is not available
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If a TIN is not available, provide reason A, B or C where appropriate:

- **Reason A** - The country where the Account Holder is resident does not issue TINs to its residents
- **Reason B** - The Account Holder is otherwise unable to obtain a TIN (please explain why Account Holder is unable to obtain a TIN)
- **Reason C** - No TIN is required (Only if the country of residence for tax purposes entered does not require the TIN to be disclosed)

Reason B Explanation:

Customer Declaration

<p>I hereby certify that the information I have provided in this form is true, correct and complete, I confirm that under no circumstances shall the Bank, its employees or its contractors be liable for any direct, indirect, incidental, special, punitive or consequential damages that may result in any way from their reliance on the information I have provided. I confirm that I have provided this Self Certification willingly without advice or help from the Bank. I understand that providing false information, withholding relevant information or responding in a misleading way, may result in rejection of my application or other appropriate action taken against me. I understand that the information supplied by me is subject to the terms and conditions governing the Account Holder's relationship with Samba Financial Group and its subsidiaries and affiliates where the Account Holder's financial relationship is maintained. I acknowledge that the information contained in this Form and information regarding the Account Holder and any Reportable Account(s) may be provided, directly or indirectly, 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 sign for the Account Holder) of all of 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 submit a suitably updated Form within 30 days of any change in circumstances which affects the tax residency status of the Account Holder or where any information contained herein to become incorrect.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%; text-align: center;">Account Holder</td> </tr> <tr> <td></td> <td style="text-align: center;">Power of Attorney</td> </tr> <tr> <td></td> <td style="text-align: center;">Guardian</td> </tr> <tr> <td></td> <td style="text-align: center;">Other (Please specify below)</td> </tr> <tr> <td colspan="2" style="text-align: center;">Date of Signature</td> </tr> </table>		Account Holder		Power of Attorney		Guardian		Other (Please specify below)	Date of Signature	
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