

Application for:

Customer Category :

**SECTION A: CUSTOMER DETAILS**

**CUSTOMER INFORMATION**

Title :   
 Family Name :   
 First Name :   
 Date of Birth :  (dd/mm/yyyy)  
 Country of Birth :

National Identity Number/Passport Number :   
 Passport Expiry Date (in case passport provided) :   
 Gender :  (dd/mm/yyyy)  
 Marital Status :   
 Nationality :

**CONTACT DETAILS**

**Permanent Address :**  
 House/Apartment Number :   
 Address :   
 Town/Village :   
 Postal Code :   
 Country :

**Mailing Address : (if different from Permanent Address)**  
 House/Apartment Number :   
 Address :   
 Town/Village :   
 Postal Code :   
 Country :

**Other Details :**  
 Residential Status :   
 Phone Number :   
 e-mail Address :

Details of 'Other' :   
 Mobile Number :

**SECURITY QUESTIONS**

To confirm your mother's maiden name   
 To confirm your favourite sport   
 To confirm your favorite colour   
 Optional (Choose at least one question)   
 Answer:

**SECTION B: EMPLOYMENT/BUSINESS DETAILS**

Employment/ Business Type:   
 Employer's/ Business Name:   
 Job Title:   
 No of Year(s) of employment/ in Business :

**If 'Self-Employed' is selected:**  
 Business Registration Number:   
 Trading Name:   
 Other Applicable Licence:   
 Line of business:

**SECTION C: EXPECTED INCOME & EXPENSES**

Average Monthly Income:   
 Average Monthly Expenses:   
 Source of Income:   
 Source of Wealth (where applicable):   
 Expected Countries Transacted with (if any):

Monthly Account Turnover:   
 Any Other Source of Income:   
 Details of 'Other':

**SECTION D: TAX RESIDENCY INFORMATION**

**FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)**

**Indicia of US status**

Please confirm signatory's FATCA status by selecting Yes or No:

Are you US citizen or resident?

Were you born in the U.S. (U.S. Place of Birth)?

Do you have a current US residence or mailing address?

Do you have current US telephone number?

Do you have standing instructions to pay amounts from the account to an account maintained in the United States?

Have you granted a current power of attorney or signatory authority to a person with a US address?

Do maintain only a US "in-care-of" or "hold mail" address?

Do you receive any payment of interest, dividends, rents, salaries, wages, premiums, annuities, compensations, remunerations, emoluments, and other fixed or determinable annual or periodical gains, profits, and income from sources within the United States?

Do you receive any gross proceeds from the sale or other disposition of any property of a type which can produce interest or dividends from sources within the United States?

For the purposes of taxation, I am a resident or citizen in the following country/ies:

US Taxpayer Identification Number:

Foreign Tax Identification Number:

FATCA classification:

**INDIVIDUAL TAX RESIDENCY SELF-CERTIFICATION (CRS)**

Are you a tax resident in Mauritius?   
 (If "Yes" is selected, proceed to section G)

Are you tax resident in any other country including United States?   
 (If "Yes" is selected, please fill in the fields marked with \*)

Country of Tax Residence*	Tax Identification Number*	If no TIN available, please state why*
1 <input type="text"/>	<input type="text"/>	<input type="text"/>
2 <input type="text"/>	<input type="text"/>	<input type="text"/>
3 <input type="text"/>	<input type="text"/>	<input type="text"/>
4 <input type="text"/>	<input type="text"/>	<input type="text"/>
5 <input type="text"/>	<input type="text"/>	<input type="text"/>

If 'I am otherwise unable to obtain a TIN or equivalent number' is selected, please provide the reason:

For the purposes of INDIVIDUAL TAX RESIDENCY SELF-CERTIFICATION (CRS), kindly refer to the Common Reporting Standard Annexure ("CRS Annexure") found in the Terms and Conditions

**SECTION E: DECLARATION INFORMATION FOR NON-RESIDENT**

Which country are you resident of?

How long have you been staying in that country?

Please answer the following questions by selecting Yes or No:

Is your permanent place of abode in Mauritius?

Have you been present in Mauritius in the current income year for a period of, or an aggregate period of 183 days or more?

Have you been present in Mauritius in the income year and two preceding income years for an aggregate period of 270 days or more?

**SECTION F: FOREIGN RESIDENT**

Type of Permit :

Permit Number :  Expiry Date:  (dd/mm/yyyy)

Residence Permit :  Expiry Date:  (dd/mm/yyyy)

Non-Citizen ID Number(NCID) :  Expiry Date:  (dd/mm/yyyy)

**SECTION G: DECLARATION OF ULTIMATE BENEFICIAL OWNER**

Declaration of Ultimate Beneficial Owner:

Others :

**SECTION H: ACCOUNT DETAILS**

	Account Type	Currency	Initial Deposit	Source of funds for Initial Deposit
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**For Term Deposit (TD) Account**

Period:  Months Interest Rate:

Pay interest on TD  to the credit of a/c number

**MODE OF OPERATION :**

In case of Joint Account :  Details of 'Other' :

Joint account with :

**SECTION I: OTHER SERVICES**

Statement of Account:

**Debit Card Application**

Name to appear on card:

(24 characters including spacing)

Accounts to be linked :

Primary Account :  Account Number 2 :  Account Number 3 :

Card to be collected at :  Branch

**Cheque Book application (applicable for Current Accounts and Emma Accounts Only)**

Please supply me with 1 cheque book of 25 sheets :

The cheque book will be collected at :  branch

**Bank One Internet Banking - ONE CLICK**

Enable Internet Banking:

**SMS Top Up Registration**

Account Number to be debited :	<input type="text"/>	Any additional mobile phones you can Top Up :	
Select Service Providers :	Mobile Number from which Top Up will be initiated :	Select Service Providers :	Additional Mobile Numbers
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>

**CUSTOMER DECLARATION:**

By signing the present Declaration, I hereby acknowledge having received, read and understood all the provisions of the Terms And Conditions bearing reference BankOne/TermsandConditions/Individual/2019/05 (copy of which has been handed over to me) relative to the opening and operation of above mentioned products and services.

Such Terms and Conditions have been explained to me and I fully agree to be bound by them and acknowledge that the Bank may amend same from time to time.

- I certify that I am the account holder (or I am authorised to sign for the Account Holder/s) of all the accounts to which this form relates.
- I hereby declare that the statements and details given in this declaration are true, correct and complete and all documents provided are genuine.
- I understand that the information supplied by me may be used and shared by the Bank in line with the Terms And Conditions governing my relationship with the Bank as to opening and operation of abovementioned products and services.
- I authorise the Bank to use any information from this form for opening any other account in my name in the future, and to retain photocopies of my Know Your Customer (KYC) documents.
- I acknowledge that the information contained in this form and information regarding my account(s) may be provided to local tax authorities and exchanged with foreign tax authorities in which I may be tax resident pursuant to intergovernmental agreements to exchange financial account information.
- I undertake to advise the Bank within 30 days of any change in circumstances which affects my tax residency status identified as above or causes the information contained herein to become incorrect or incomplete and to provide the Bank with a suitably updated self-certification and declaration within 30 days of such change in circumstances.
- I am fully aware of the provisions applicable under the Financial Intelligence and Anti-Money Laundering Act 2002 and the Prevention of Corruption Act 2002, as may be amended from time to time. The true source of funds and purpose of transactions will be declared and all money will be duly accounted and no money laundering will be made.

I agree that my personal information may be used for marketing purposes. I agree to receive emails and/or SMS from the Bank and I understand that I may opt out of the Bank’s subscriptions of emails and/or SMS at any time.

**Primary Account Holder’s Signature**

*PLEASE SIGN IN THE MIDDLE OF THE BOX*

**Date:** (dd/mm/yyyy)

**Additional Applicant's Signature**

*PLEASE SIGN IN THE MIDDLE OF THE BOX*

**Date:** (dd/mm/yyyy)

Documents required (Indicative Checklist - additional documents may be requested)

Type of Customer	National Identity Card	Passport Valid	Proof of Address (< 3 months old)	Birth Certificate (in case of Minor)	Work / Residence / Occupation permit	Any other document acceptable by the Bank	Bank Reference	CV
Mauritian Resident	√		√	√		√		
Foreign Resident		√	√	√	√	√		
Non-Resident		√	√				√	√

**For Office Use Only:**

Branch/Department:

Customer Code:

Account Number 1:

Account Number 2:

Account Number 3:

Segment:

For Term Deposit:  % per annum (Floating Rate:  % above Savings Rate per annum)

Attended by:

Signature:

Verified by:

Signature:

**Introducer's Details**

Name:

Address:

Mobile: