## **CUSTOMER INFORMATION SHEET (INDIVID**

PERSONAL INFORMATION

Last Name

	🖗 BPI			
RM NO.:				
		Cuffin		
Middle Name		Suffix		
Citizenship	Sex			
	🗆 Male	□Female		
ID Presented (ID ty	ID Presented (ID type, number)			
	Middle Name Citizenship	RM NO.:       Middle Name       Citizenship     Sex       Male		

Date of Birth (mm-dd-yyyy)	Place of Birth (City, Country)			Citizenship	Sex □ Male	Female		
Marital Status	Mother's Maiden Name			ID Presented (ID type, number)				
	1	( Os antes Os de Anes Os de Tel	(					
Mobile (+Country Code-Area Code-Tel.no.)	Landline (+Country Code-Area Code-Tel.no.)			Email Address				
Address (House/Lot/Block/Unit no., Floor & Building , Street, Subdivision/Barangay/Village)								
District/Town	City/Municipality/Province		Country		Zip Code			
FINANCIAL INFORMATION								
Employer / Business Name Nature of Work (Job Title) Nature of Business / Self- Source of Income/Wealth								
			employ					
FATCA DECLARATION								
□ I am not a U.S. Person □ I am not a U.S. Person but with U.S. Indicators □ I am a U.S. Person								
$\Box$ U.S. Place of Birth		Documents (Subn	nitted)		U.S. Citizen	, en		
$\Box U.S. Telephone Number (1) \qquad \Box 1. W8 BEN$				$\Box$ U.S. Resident	(Green Card)			
$\Box U.S. Address (1)$				U.S. TIN:				
Output of attorney or signatony authority     Octificate of Loss of US Nationality     U.S. ID:								
granted to a person w	• •	ldress (1) 🛛 Written expl	lanation o	f not having such	□ W9 (Submitted	d)		
□ Standing instruction			-	renunciation				
to an account mair		citizenshin r						
☐ "in-care-of" or "hole	d mail" U.S. a	address (1)						
I authorize the Bank to rely upon the same and, if I am a US Person or have US indicators that render my account reportable under FATCA, I consent to								
the reporting and disclosure of the required information by the Bank to the Internal Revenue Services (IRS) and/or Bureau of Internal Revenue (BIR) in								
compliance with FATCA. In consideration of the foregoing, I agree to hold the Bank, its directors, officers, employees, representatives and agents free and harmless from any liability, action and suits, costs, and expenses, arising from or in connection with the Bank's compliance with FATCA regulations and/or								
as a result of disclosure made to the US IRS and/or		es, ansing nom or in connectio	n with th	e Bank's compliance	with FATCA regul	ations and/or		
CERTIFICATION AND AUTHORIZATION	DIR.							
By signing this form, I hereby certify that the information I provided herein is true, accurate and complete, and I agree to notify/update the Bank of any change in any of the information supplied in this form.								
I acknowledge to have read and understood, and I agree to be bound by, the terms and conditions of the deposits, products, services, facilities and/or								
channels which I open/avail of, as the same may be amended from time to time. Such terms and conditions are provided and/or are made available to me								
via www.bpi.com.ph/terms and/or other channels.								
Likowise acknowledge to have read and understoo	d the Bank	a Data Brivaov Statement, pos	tod on w	www.bni.com.nb.and.ir	hranch promiso	and Lagroo		
I likewise acknowledge to have read and understood the Bank's Data Privacy Statement, posted on www.bpi.com.ph and in branch premises, and I agree that the Bank and/or its agents may, as described in said Data Privacy Statement, process, obtain, collect, record, organize, store, update, modify, use,								
access, share and/or disclose to the Bank's subsidia								
The consent given herein is deemed to be the consent required under bank deposit confidentiality laws of the Philippines or other jurisdictions including but								
not limited to RA 1405 (An Act Prohibiting Disclosure of or Inquiry into, Deposits with any Banking Institution and Providing Penalty Therefor), RA 6426 (The Foreign Currency Deposit Act) and RA 8791 (The General Banking Law) and under data privacy laws of the Philippines or other jurisdictions, including but								
not limited to RA 10173 (The Data Privacy Act).		and the later data prive	aby laws			, molaaling bat		
If I am, become, or apply to become a client of any of the Bank's subsidiaries or affiliates, I agree that the latter has the option but not the obligation to rely on the above information for any and all of the concerned subsidiary's or affiliate's account opening, maintenance and transaction requirements.								
NOTE: Should you wish to change your elected mailing address for any of your accounts, please visit any of our branches to submit an Amendment Form.								
Customer's Signature:				Date:	(mm-dd-yyyy)			
FOR BANK USE ONLY Remarks:								
Processed and signature verified by:		Approved by:						