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SECTION A - CUSTOMER PROFILE INFORMATION Customer Details - Individual/Minor										
Name:	Mr./ Mrs./ Ms./				Account No.:					
Nationality:				Gender:	<input type="radio"/> Male	<input type="radio"/> Female	Date of Birth:	dd/mm/yyyy		
Place of Birth:	City	Country		ID Type:	<input type="radio"/> Passport	<input type="radio"/> Emirates ID				
ID No.:				ID Expiry Date:	dd/mm/yyyy					
Mobile:				Email ID:						
Customer/Guardian Details										
Name:	Mr./ Mrs./ Ms./				Account No.: (if separate and existing account)					
Nationality:				Date of Birth:	dd/mm/yyyy		Place of Birth:			
ID Type:	<input type="radio"/> Passport	<input type="radio"/> Emirates ID	ID No.:			ID Expiry Date:	dd/mm/yyyy			
Relationship w/ Minor:				Gender:	<input type="radio"/> Male	<input type="radio"/> Female				
Profile and Income Details of Customer/Guardian										
Source of Income:	<input type="radio"/> Salary <input type="radio"/> Family Savings <input type="radio"/> Business Proceeds <input type="radio"/> Other _____									
Profession:				Employer Name:						
Marital Status:	<input type="radio"/> Married	<input type="radio"/> Single	Salary / Income:	_____ Per Month						
Country of Residence:				Years in Country of Residence:						
Residence Address:	Address									
	P.O. Box:			City		Country				
Mailing Address: <small>If different from the Residence Address</small>	Address									
	P.O. Box:			City		Country				
SECTION B - SELF-CERTIFICATION										
FATCA										
Are you a US Citizen / Resident/Green Card Holder				<input type="radio"/> Yes	<input type="radio"/> No	If yes, please provide your TIN				
CRS										
Are you treated as a resident of any Country other than United Arab Emirates or USA for taxation purposes <input type="radio"/> Yes If yes, complete the below <input type="radio"/> No										
Country of Residence for Tax Purposes and related Tax Payer Identification Number ("TIN") or equivalent number										
Please complete the following table indicating the Countries you are considered as Resident for Taxation purposes along with the TIN for each Country. If the TIN is unavailable, please provide the appropriate reason A, B or C where indicated below:										
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										
Reason C: No TIN is required as per the regulation of the Country you are considered a Resident for Taxation										
Country of Tax Residence			TIN			If no TIN is available, please state the reason A, B or C. If B, please outline the reason for being unable to obtain TIN				
SECTION C - Setup myPlan										
Please issue Saving Bonds worth of		AED		In figures		In words				
in the name of the above mentioned beneficiary on the				of each month, starting on		dd/mm/yyyy				
Monthly payments are made through <input type="radio"/> Direct Debit <input type="radio"/> Standing Order <input type="radio"/> Salary Deduction mandate										
I agree to be charged a subscription fee of 0.5% of the withdrawn amount in case of redemption or cancellation of plan before completing 12 monthly payments.										
SECTION D - Upgrade existing recurring payments mandate to myPlan								Ref: _____		
Monthly payment amount		AED								
Payment date		of each month.								
Payment method <input type="radio"/> Direct Debit <input type="radio"/> Standing Order <input type="radio"/> Salary Deduction mandate										
I agree to be charged a subscription fee of 0.5% of the withdrawn amount in case of redemption or cancellation of plan before completing 12 monthly payments.										
SECTION E - Cancel an existing plan								Ref: _____		
I wish to cancel my plan with effect from:		dd/mm/yyyy								
If next payment due date is within 10 working days from cancellation date, cancellation will happen after next payment.										
Disclaimer: With effect from 1st January 2018, Services by National Bonds Corporation PJSC shall be subject to Value Added Tax ("VAT"), as applicable as per the Federal Decree-Law No. (8), 2017 on Value Added Tax ("VAT Law") and Cabinet Decision No. (52), 2017 on the Executive Regulations. In the event of any non-compliance or mis-declaration by the Customer, the Company shall not be held responsible for financial loss (if any) to the Customer. The Company reserves the right to recover VAT from the Customer as may be applicable under the provisions of the VAT Law.										
Consent and Declaration										
I confirm that all the information provided above is true and hereby indemnify National Bonds Corporation against any loss or damage that may be incurred due to incorrectness of such information. I hereby declare that I have read and agree to be bound by the Terms and Conditions set out in a separate document. I agree to provide any additional information and/or supporting documents as and when requested by the Company.										
If there is a change in the circumstances that affects the FATCA/CRS Tax Residency Self-Certification provided above or causes the information provided above to become incomplete or incorrect, I understand that I am obligated to inform The Company of the change in circumstances within 30 days of its occurrence and to provide with suitably updated details.										
								Customer Signature, Date		
For Company's Official use only										
Distributor Code										
Outlet Code										
Stamp & Signature:		<input type="checkbox"/> Signature Admitted <input type="checkbox"/> ID is verified & true copy is certified <input type="checkbox"/> All supporting documents are attached								