

c. If you have answered "Yes" to points iv. and v. please provide details below:

	<i>Passport No.</i>	<i>Resident Card No.</i>
<i>Nationality/Permanent Residency 1</i>		
<i>Nationality/Permanent Residency 2</i>		
<i>Nationality/Permanent Residency 3</i>		

If you have U.S. Passport or Green Card, please fill in IRS Form **W9**.

d. If you have answered "Yes" to point vi. please fill in the following table:

<i>Year</i>	<i>Length of stay in the U.S.</i>	<i>Calculation</i>
<i>Current</i>		<i>Stay x 1 = days</i>
<i>Previous</i>		<i>Stay x 1/3 = days</i>
<i>Year before previous</i>		<i>Stay x 1/6 = days</i>
	<i>Total</i>	<i>days</i>

If the total as per the table is greater than or equal to 183 days, please fill in IRS Form **W9**.

- e. If you have answered "Yes" to point vii. please enclose a copy of Form I-407 and fill in IRS Form **W8-BEN**.
- f. If you have answered "Yes" to point viii. please enclose a copy of Form DS-4083 and fill in IRS Form **W8-BEN**.
- g. If you have answered "Yes" to point xi. please provide the following additional info

Name of US Person to whom POA has been granted: _____

Address: _____

h. If you have answered "Yes" to points ix. to xii. please fill in IRS Form **W8-BEN**.

5. Declaration

I hereby confirm that the information provided in this Form is true, accurate and complete, under penalty of perjury. Subject to applicable local laws, I hereby consent for the Bank to share my personal information with respect to any of my accounts with the Bank directly or individually with the Overseas Regulators or Tax Authorities where necessary to establish my tax liability in any jurisdiction.

I hereby undertake to comply with and act in accordance with all requirements that the Bank may have from time to time and any direction given to me by the Bank in relation thereto. I undertake to provide the Bank with any undertakings and/or declarations, including signing any form, within the specified timeframe, which in the opinion of the Bank is deemed necessary and appropriate. I understand that failure to do so could result in the Bank terminating the relationship at its own discretion.

I undertake to notify the Bank within 30 days if there is a change to any information provided herein.

Signature

Capacity in which signing (please tick one):

Self

Guardian

Attorney

Date _____