

Date: \_\_\_\_\_  
 CIN / A/C #: \_\_\_\_\_

**Part 1 - Identification of Individual Account Holder**
**A. Name of Account Holder**

Name: \_\_\_\_\_

**B. Emirates ID**

Number: \_\_\_\_\_

**C. Place of Birth**

Town or city of birth: \_\_\_\_\_

Country of birth : \_\_\_\_\_

**D. Please enter the legal name of the relevant entity account holder of which you are a controlling person**

Legal name of entity 1: \_\_\_\_\_

Legal name of entity 2: \_\_\_\_\_

Legal name of entity 3: \_\_\_\_\_

**Part 2 - Country of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent ("TIN")**

Please complete the following table indicating

(i) where the Account Holder is a tax resident,

(ii) the Account Holder's TIN for each country indicated. If a TIN is unavailable please provide the appropriate reason **A, B or C**:

**Reason A** - The country/jurisdiction where the Account Holder is liable to pay tax does not issue TINs to its residents.

**Reason B** - The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason).

**Reason C** - No TIN is required. (Note. Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

If the Account Holder is tax resident in more than three countries, please use a separate sheet.

	Country of Tax Residence	Taxpayer Identification Number	If no Taxpayer Identification Number available enter Reason A, B or C
1			
2			
3			

Please explain in the following boxes why you are unable to obtain a Taxpayer Identification Number if you selected **Reason B** above.

1	
2	
3	

**Part 3 - Type of Controlling Person**

(Please only complete this section if you are a tax resident in one or more Reportable jurisdictions)

Please provide the Controlling Person's status by ticking the appropriate box.		Entity 1	Entity 2	Entity 3
a)	Controlling Person of a legal person - control by ownership			
b)	Controlling Person of a legal person - control by other means			
c)	Controlling Person of a legal person - senior managing official			
d)	Controlling Person of a trust - settlor			
e)	Controlling Person of a trust - trustee			
f)	Controlling Person of a trust - protector			
g)	Controlling Person of a trust - beneficiary			
h)	Controlling Person of a trust - other			
i)	Controlling Person of a legal arrangement (non-trust) - <b>settlor-equivalent</b>			
j)	Controlling Person of a legal arrangement (non-trust) - <b>trustee-equivalent</b>			
k)	Controlling Person of a legal arrangement (non-trust) - <b>protector-equivalent</b>			
l)	Controlling Person of a legal arrangement (non-trust) - <b>beneficiary-equivalent</b>			
m)	Controlling Person of a legal arrangement (non-trust) – <b>other-equivalent</b>			

#### Part 4 - Declarations and signature

I understand that the information supplied by me is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with **Bank of Sharjah** setting out how **Bank of Sharjah** may use and share the information supplied by me. I acknowledge that the information contained in this form and information regarding the Controlling Person and any Reportable Account(s) may be reported to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which [I/the Controlling Person] may be tax resident pursuant to intergovernmental agreements to exchange financial account information. I certify that I am the Controlling Person, or am authorized to sign for the Controlling Person, of all the account(s) held by the Entity Account Holder 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 advise **Bank of Sharjah** within **30** days of any change in circumstances which affects the tax residency status of the individual identified in Part 1 of this form or causes the information contained herein to become incorrect or incomplete and to provide **Bank of Sharjah** with a suitably updated self-certification and Declaration within **60** days of such change in circumstances.

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_

**Note:** If you are not the Controlling Person, please indicate the capacity in which you are signing the form. If signing under a power of attorney, please also attach a certified copy of the power of attorney.

Capacity: \_\_\_\_\_

#### Notes:

**1. As a financial institution, Bank of Sharjah is not allowed to give tax advice.**

Your tax advisor may be able to assist you in answering specific questions on this form. Your domestic tax authority can provide guidance regarding how to determine your tax status. You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested, on the [OECD automatic exchange of information portal](http://www.oecd.org/tax/transparency/automaticexchangeofinformation.htm) (<http://www.oecd.org/tax/transparency/automaticexchangeofinformation.htm>).

**2. Please refer to explanatory notes available on [www.bankofsharjah.com](http://www.bankofsharjah.com).**

#### For Bank Use Only

Signature(s) verified by: \_\_\_\_\_

Authorised by: \_\_\_\_\_