

CIF No.	Scheme
<input type="text"/>	<input type="text"/>
MVR Account	<input type="text"/>
USD Account	<input type="text"/>

## SAVING ACCOUNT OPENING / UPDATE FORM INDIVIDUAL

### DOCUMENTS CHECK LIST (PLEASE TICK APPROPRIATE BOX)

<input type="checkbox"/> National Identity Card copy	<input type="checkbox"/> Work Permit (with QR code) / Document Copy	<input type="checkbox"/> Marriage Visa
<input type="checkbox"/> Passport size photo (pasted)	<input type="checkbox"/> Passport front page copy (mandatory for expatriates)	<input type="checkbox"/> Diplomat Visa
<input type="checkbox"/> Employer letter (mandatory for expatriates)	<input type="checkbox"/> Passport address page copy (if available)	<input type="checkbox"/> Other: _____

### ACCOUNT DETAILS

Account Type	<input type="checkbox"/> Savings With Interest	<input type="checkbox"/> Savings Without Interest
Account Currency	<input type="checkbox"/> Maldivian Rufiyaa (MVR)	<input type="checkbox"/> United States Dollar (USD)
Service Required	<input type="checkbox"/> ATM Card	<input type="checkbox"/> Statement by e-mail: <input type="checkbox"/> Daily <input type="checkbox"/> Monthly

### GENERAL DETAILS

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr
Full Name	<input type="text"/>			
Nationality	<input type="text"/>		Place of Birth	<input type="text"/>
Date of Birth	<input type="text"/>	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Other	
Educational Background	<input type="checkbox"/> Illiterate	<input type="checkbox"/> Primary	<input type="checkbox"/> Secondary	
	<input type="checkbox"/> High School / Diploma	<input type="checkbox"/> Under/Post Graduate	<input type="checkbox"/> Professional	
Purpose of Account Opening	<input type="checkbox"/> Salary Credit	<input type="checkbox"/> Savings	<input type="checkbox"/> Business Income	
	<input type="checkbox"/> Rent Credit	<input type="checkbox"/> Other; please specify: _____		
National ID / Work Permit	Number: <input type="text"/>	Issue Date: <input type="text"/>	Expiry Date: <input type="text"/>	
Passport	Number: <input type="text"/>	Issue Date: <input type="text"/>	Expiry Date: <input type="text"/>	

### SIGNATURE

<p style="font-size: 2em; text-align: center;">PHOTO</p> <p style="text-align: center; font-size: 0.8em;">Please paste your recent passport size photograph here</p>	Specimen Signature 1	Specimen Signature 2
Name	<input type="text"/>	

## CONTACT DETAILS

<b>Mobile</b>	Country Code	Mobile Number				
	+ <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				
<b>Email</b> <small>(please write in BLOCK letters)</small>						
<b>Present Address</b>	<b>House Name</b>					
	<b>Street</b>					
	<b>Floor / Apartment</b>		<b>Atoll, Island / City, State</b>			
	<b>Postal Code</b>		<b>Country</b>			
<b>Permanent Address</b>	<b>House Name</b>					
	<b>Street</b>					
	<b>Floor / Apartment</b>		<b>Atoll, Island / State, City</b>			
	<b>Postal Code</b>		<b>Country</b>			

## EMPLOYMENT AND FINANCIAL DETAILS

<b>Employment Type</b>	<input type="checkbox"/> Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired			
<b>Employment Sector</b>	<input type="checkbox"/> Government <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other: _____			
<b>Occupation / Designation</b>			<b>Worksite</b>	
<b>Employer Name</b>				
<b>Income Details</b> <small>(Please write all the sources of income generated)</small>	<b>Source of Income / Description</b>		<b>Monthly Income</b>	
	1. Salary (if salaried)		CCY	
	2. _____		CCY	
	3. _____		CCY	
	<b>Total Monthly Income:</b>		CCY	
<b>Dealing with local Banks</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes, please specify: _____			

## POLITICALLY EXPOSED PERSON (PEP) DECLARATION

*Politically Exposed Persons are individuals who are or have been entrusted with prominent public functions in a country e.g. Heads of State / Governments, Senior Politicians / Senior Governments / Judicial / Military Officers, Senior Executives of State-owned Corporations, important Political Party Officials, etc.*

- I confirm that I, or any member of my family or any of my associates, do not hold any position at a public office of prominence, nor have held any such position in the past & agree to inform the bank, whenever any change in PEP status of me, my family members and associates
- I confirm that I, or any member of my family or any of my associates, hold or held a position at a public office of prominence & agree to inform the bank whenever any change in PEP status of me, my family members and associates  
*(Please fill the PEP Details Form provided by the Bank)*

## TAX STATUS DECLARATION

Are you residing in Maldives?	<input type="checkbox"/> Yes <input type="checkbox"/> No, country of residency: _____								
Residency Start Date	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		

I undertake to inform the Bank in the event of any changes in tax residency status in future.  
(This information is required to be informed to the bank in accordance to Income Tax Act (Act no. 25/2019) of Maldives)

**Tax Information Declaration:**

I confirm that I **am not registered as a tax resident or pay taxes** in any other country/jurisdiction. I undertake to inform the Bank in the event of acquiring it at any time in the future.

I confirm that I **hold tax residency** in below mentioned jurisdiction(s) & provide the tax identification number(s) as below. I undertake to inform the Bank in the event of any changes in tax residency status in future.

Tax Payer Identification Number	Country of Tax Residency

*If you have more than two TIN, please provide the data separately*

**FATCA Undertaking:**

I confirm that I **do not possess** United States (US) green card/ nationality/ passport/ power of attorney given to or received from a US person as on date. I undertake to inform the Bank in the event of acquiring it at the material time in future and also authorise SBI to disclose the required information under FATCA to the relevant authority in such eventuality.

I confirm that I **possess** United States (US) green card / nationality / passport / power of attorney given to or received from a US person as on date and authorise SBI to disclose the required information under FATCA to the relevant authority.  
(Please fill an additional FATCA undertaking form provide by the bank)

## TERMS AND CONDITIONS

- ✓ I agree and declare that the information in this form are true and correct to the best of my knowledge. I undertake to inform the Bank any changes, therein
- ✓ I have read and agree to Bank's Terms and Conditions and agree to abide by, and be bound by the same including any changes therein from time to time (Terms and Conditions are available on bank's website <https://mv.statebank>)
- ✓ I agree to the Internet Banking Terms and Conditions and agree that internet banking (with transaction rights) can be registered on my own with the details obtained in this form

\_\_\_\_\_  
Signature

D	D	M	M	Y	Y	Y	Y
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Date

## FOR BANK USE ONLY

<b>Form Checked By:</b>  Signature: _____ Name: _____ Employee ID: _____ Date: _____	<b>Form Verified By:</b>  Signature: _____ Name: _____ Employee ID: _____ Date: _____	<b>Face to Face Verification:</b> <small>I certify that the signatures of the customer has been obtained face to face</small>  Signature: _____ Name: _____ Employee ID: _____ Date: _____	<b>World Check Screening:</b> <small>I certify that the World Check has been done and no sanctioned entities/adverse remarks found</small>  Signature: _____ Name: _____ Employee ID: _____ Date: _____
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