

**Punjab National Bank**

**DIFC DUBAI BRANCH**

*(Regulated by Dubai Financial Service Authority)*

**ACCOUNT OPENING FORM**

Office-802, Level 8, The Gate Building, West Wing,

Dubai International Financial Center (DIFC), Dubai, P.O.Box: 506844,

United Arab Emirates

**Section 1**

**(CLIENT DETAILS, ASSESSMENT & CONSENT FORM)**

1. **Name of the Organisation (Applicant):**
2. **Constitution / Legal Status:**

A Person (applicant) qualifies to be a Professional Client; or Market Counterparty as defined by Dubai Financial Services Authority (Regulator) under Conduct of Business (COB) of DFSA and as briefly detailed below. (A Person includes any natural person, Body Corporate or body unincorporated, including a legal person, company, Partnership, unincorporated association, government or state).

Please specify the type of undertaking in case a person is an under taking:

…………………………………………………………………………………………………………………………………………………….

**Please tick as appropriate:**

I/We, the applicant hereby confirm that I/we am/are:

Please tick on the appropriate box signifying the criterion for qualifying as professional Client.

|  |  |
| --- | --- |
| 1. **Deemed Professional Clients:**   A Person (applicant) is a ‘deemed’ Professional Client if that Person is: | |
|  | 1. Supranational organization whose members are either countries, central Banks or national monetary authorities |
|  | 1. A properly constituted government, government agency, central Bank or other national monetary authority of any country or jurisdiction. |
|  | 1. Public authority or state investment body |
|  | 1. An Authorized Market Institution, Regulated Exchange or regulated clearing house |
|  | 1. A Collective Investment Fund or a regulated pension fund |
|  | 1. A Large Undertaking:   A Person is a Large Undertaking if it met, as at the date of its most recent audited financial statements, at least two of the following requirements:   1. It has a balance sheet total of at least $20 million.   *(a ‘balance sheet total’ means the aggregate of the amounts shown as assets in the balance sheet before deducting both current and long-term liabilities).*   1. It has a net annual turnover of at least $40 million; or 2. It has own funds or called up capital of at least $2 million   *(own funds’ mean cash and investments as shown in the balance sheet; and ‘called up capital’ means all the amounts paid-up on allotted shares, less any amounts owing on allotted shares)* |
|  | 1. A Body Corporate whose shares are listed or admitted to trading on any exchange of an IOSCO member country |
|  | 1. Any other institutional investor whose main activity is to invest in financial instruments, including an entity dedicated to the securitization of assets or other financial transactions |
|  | 1. A trustee of a trust which has, or had during the previous 12 months, assets of at least $10 million; or |
|  | 1. A holder of a license under the Single-Family Office Regulations with respect to its activities carried on exclusively for the purposes of, and only in so far as it is, carrying out its duties as a Single-Family Office. |
| 1. **Service Based Professional Client:**   A Person (applicant) is a ‘Service Based’ Professional Client if: | |
|  | 1. A person (applicant) who is to be provided a “Credit Facility” from the Bank is an “Undertaking” and the “Credit facility” is provided for use in the Business activities of 2. The Person 3. A Controller of the Person 4. Any member of the Group to which the person belongs: or 5. A joint venture of the person referred to in (a to c).   *In (b) above; a controller is an individual, who:*   1. *Owns a majority of the shares of the undertaking* 2. *Is able to appoint or remove a majority of the board members of undertaking; or* 3. *Controls a majority of the voting rights of the Undertaking (or that of a Holding Company of the Undertaking).* |
|  | 1. The Financial Service provided to that Person is 2. “Advising on financial products or credit” or “Arranging credit or deals in Investments”; and 3. the service in (a) is provided for the purposes of ‘corporate structuring and financing’. *The corporate structuring and financing*     1. *includes:*    2. *Providing advice relating to an acquisition, disposal, structuring, restructuring, financing and refinancing of a corporation or other legal entity or*    3. *Arranging credit for a purpose referred to in (i) and*    4. *Excludes any advice on financial products or arranging of credit or deals in investments given to an individual for the purposes of, or in connection with, the management of that individual’s investments.* |
| 1. **‘Assessed’ Professional Clients**   A person (applicant) is an ‘Assessed’ Professional Client if the person is | |
|  | 1. An individual and has net assets of at least USD 1 million and   **Either**   1. The individual is, or has been, in the previous two years, an Employee in a relevant professional position of an authorised firm or a Regulated Financial Institution   **or**   1. The individual appears, on reasonable grounds, to have sufficient experience and understanding of relevant financial markets, products or transactions and any associated risks, following the analysis set out in Rule 2.4.3 |
|  | 1. A legal structure or vehicle, such as an Undertaking trust or foundation, which is set up solely for the purpose of facilitating the management of an investment portfolio of an individual assessed as meeting the requirements in (1) as a professional Client. |
|  | 1. An Individual (the “Joint account holder”) who has a joint account with an individual assessed as meeting the requirements in C (1) [the “primary account holder”] if:    * the joint account holder is a family member of the primary account holder.    * the account is used for the purpose of managing investments for the primary account holder and the joint account holder; and    * the joint account holder has confirmed in writing that investment decisions relating to the joint account are generally made for, or on behalf of, him by the primary account holder.   *In (3 a) a “family member” of primary account holder is:*   1. *his spouse* 2. *his children and step children, his parents and step-parents, his brothers and sisters and his step-brothers and step sisters and* 3. *the spouse of any individual within (ii).* |
|  | 1. An undertaking that 2. has own funds or called up capital of at least USD 1.00 mio, and appears on reasonable ground (provided the bank with sufficient proof), to have sufficient experience and understanding of relevant financial markets, products and transactions and any associated risk set out in Rule 2.4.3.   OR   1. has a controller, a holding company, a subsidiary or a joint venture partner; who meets the requirement to be classified as an ‘assessed’ Professional Client or a ‘deemed’ Professional Client.   *In this rule:*   * *the term ‘own funds’ and ‘called up capital’ in (4)(a) have the meaning given under (A. 6. iii) above.* * *the term ‘controller’ in (4)(b) means an individual who meets the criteria as mentioned (in B.1.b) above.* |
| 1. **Market Counterparties:**   A person (applicant) is a ‘Market Counterparty’ if: | |
|  | 1. That person is either    1. A ‘deemed’ Professional Client pursuant to Rule 2.3.4   **or**   * 1. An ‘assessed’ Professional Client pursuant to Rule 2.3.8(2)(b) which is wholly owned by a Holding Company that is a ‘deemed’ Professional Client pursuant to Rule 2.3.4(1)(g) or (h) and the requirement of 2. below have been met.   **or**   * 1. a ‘deemed’ Market Counterparty pursuant to Rule (1A); |
|  | 1. For the purpose of (1)(b), an Authorised firm ensures that    1. The person (applicant) have been given prior written notification of the classification as a Market Counterparty and    2. That person (applicant) has not requested to be classified otherwise within the period specified in the notice.    3. That notification in (2)(a) may be in respect of particular Financial Services or Transactions or in respect of all Financial Services and Transactions.    4. The notification in (2)(a) need only be given:       1. In the case of a Fund, either to the Fund or its Fund Manager and       2. In the case of a pension fund, either to such fund or its management company. |

1. **Addresses:**

**Registered Office:**

**Building Number / Name:** …………………………………………………………….

**Street:** .………………………………………………………………………………………….

**Town/ City**:………………………………., **Post Code**:………………………………., **Country**: ………………………………..

**Corporate Office:**

**Building Number / Name:** …………………………………………………………….

**Street:** .………………………………………………………………………………………….

**Town/ City**:………………………………., **Post Code**:………………………………., **Country**: ………………………………..

|  |  |  |  |
| --- | --- | --- | --- |
| **Telephone Number (s)** | **Fax Number** | **E mail id** | **Web site** |
|  |  |  |  |

**Communication to be sent to:** Registered Office Corporate office

If different from the above, please specify;

**Building Number / Name:** …………………………………………………………….

**Street:** .………………………………………………………………………………………….

**Town/ City**:………………………………., **Post Code**:………………………………., **Country**: ………………………………..

**Telephone No (s)** ……………………………………………………………………………

**Fax No(s);** …………………………………………………………. **Email address:** …………………………………………………….

1. **Business Registration:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of incorporation** | **Country of incorporation** | **Registration Number,**  **Validity of license (if any) and Details of Registry with its contact number (if any)** | **Regulatory Body (if any)** |
|  |  |  |  |

**Previous name change (if any) – Name of the company (Account Name)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| **Date of incorporation** | **Country of incorporation** | **Registration Number,**  **Validity of license (if any) and Details of Registry with its contact number (if any)** | **Regulatory Body (if any)** |
|  |  |  |  |
| - ***Details of change in activity and Principal Business*** *(if any)* | | | |

1. **Name and address of Group, if applicable**

|  |
| --- |
|  |

1. **Detail of Principal Business/ with Trade License details (if any):** *Please give a brief description of present business activity and activities, which have generated the assets owned.*

|  |
| --- |
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1. **General source of receipts/credits and destination of payments/utilization of funds:** *(In case of depositors; please give full details of the source of funds to be placed in the account)*

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| --- |
|  |

1. **Nature of transactions in the account;**

|  |  |  |
| --- | --- | --- |
| Main reasons for applying for this account  *(Please specify the type of Credit Facility / Deposits / others)* | Number of transactions expected per month | Expected amount per transaction and expected total amount of transactions in a month |
|  |  |  |

1. **Details of Financials for the last 3 years**  (Amount in USD million)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S.No. | Particulars | Year ended \_\_\_\_\_ | Year ended \_\_\_\_\_ | Year ended \_\_\_\_\_ |
| 1 | Called up Share Capital |  |  |  |
| 2 | Net Assets |  |  |  |
| 3 | Net Worth |  |  |  |
| 4 | Annual Turnover |  |  |  |
| 5 | Cash and investments\* |  |  |  |
| 6 | Stock exchange where shares listed (if applicable) | |  | |

\*Applicable to Trusts/Pension Funds/Special Purpose Vehicles/Collective Investment Funds

1. **Additional Information regarding Account with PNB in India (Optional)**

Do you have an Account with PNB in India : Yes / No

If yes, Type of Account Account No. **++**

Account in the Name of

Name of the Branch/Circle/State

1. **Additional information regarding Account with Other Banks (Optional)**

Do you have an Account with another Bank : Yes / No

If yes, Type of Account : Deposit / Loan

Name of the Bank and Address:

**Section 2**

**Client Ownership Details**

1. **Details of Shareholders / Stake holders:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Value (amount) of share /stake holding** | **Percentage of share/ stake holding** | **Passport no (also mention issuing country** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total |  |  |  |

1. **Name of Directors/Beneficial Owners:**

(Give full details for each signatory/director/beneficial owner separately as per annexure I)

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No** | **Name** | **Beneficial owner Relationship**  *(Director / Manager / investor (ultimate natural person)* | **Passport no**  (also mention issuing country) |
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**Section 3**

**Account Opening Purpose /Operating Instructions / Declaration**

1. **Purpose of account** *(Applicable to “Assessed Professional Clients” only)*
2. **Purpose of opening the account/making deposits (tick whichever is applicable):**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Parking short term trading profits |  | Income, Savings and Investments |
|  | Long Term Capital Appreciation |  | Capital Preservation |
| √ | Availing of credit facilities |  | Others (give details) |

|  |  |  |
| --- | --- | --- |
| **Details** | **Yes** | **No** |
| #Whether your organization has previous experience in Credit / Deposit Instruments associated with Financial Markets: | √ |  |
| @Whether all the authorized signatories possess sufficient understanding of financial markets, financial products/ arrangements and related risks: | √ |  |
| \*Has the organization/athorized signatories relied on financial advice from financial institutions previously: |  | √ |

# if Yes, please specify briefly the size and nature of transaction and the length of time your organisation has been involved in such transactions:

@if No please mention the name(s) of the signatory (ies): ………………………………………………………………………………

\***If Yes**, please provide further information as under:

Name of institution/s: ……………………………… Period of Association: ……………………… (years)

1. **Name of Authorised Signatories:**

*(Give full details for each signatory separately as per Annexure I)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Authorised Signatories** | **Designation** | **Passport no**  *(also mention name of issuing country)* | **Specimen Signature** |
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1. **Mode of Operations** *(enclose Board Resolution, if applicable)*

(Please specify as 1) Singly or 2) Jointly or 3) Jointly No \_\_\_ or with No \_\_\_\_ or 4) Any other specific mode.)

1. **For Deposit Account:** Details and Operating Instructions

Customer ID (if case of an existing account) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Account to be opened

* Current Account
* Term Deposit Account (Interest is to be paid monthly/quarterly/cumulative)
* Short Term Deposit (less than six months)

|  |  |  |
| --- | --- | --- |
| **Particulars** | | **Please specify** |
| Currency of Deposit | USD/GBP/EURO/JPY/Any other |  |
| Which payment method shall be used | Draft/Cheque/Wire transfer |  |
| Amount : | |  |
| Rate of interest (% p.a.) | |  |
| Period | |  |
| Name of bank from which this deposit will be transferred: | |  |
| Name of the country of the bank : | |  |
| Auto renewal | Yes/ No |  |
| Mode of operation of the account | Singly/jointly/any of us/as per board resolution/other |  |
| Statement requirements | Monthly/Quarterly/Annually |  |
| Repayment instructions | On repayment, please credit my/our account no.\_\_\_\_\_\_\_\_\_\_ with (name of bank and address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SWIFT Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Details (if any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Declaration:**

1. I/We request you to open the above account in the name(s) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. We, on the behalf of the organization, authorize the person(s) whose signature(s) appear in the authorized signatories section to operate the accounts by signed written physical instructions, email instructions to the Bank and over the Internet. We further agree that all the transactions performed or effected through written/email instructions/ internet on the organisation’s request in relation to the account are binding and conclusive whether given by me/us jointly or severally.

1. **I/We, the applicant understand/ confirm / agree as under that:**
   1. Bank only carries on services of accepting deposits and other services contemplated under this Application, with Professional Clients. As such, I/We agree to be treated as Professional Client, not entitled to the retail customer protection and compensation rights under COB Rule 2.3.2.
2. in the event that I/We fall under any of the following client categories, I/We will be classified as Market Counterparty:

* Collective Investment Fund/regulated pension fund.
* Public Authority.
* Government.
* Authorised Firm/ Regulated Financial Institution.
* Authorised Market Institution.
* Supra-national Organisation.
* Body Corporate having called up share capital of at least US$1,000,000.
* Body corporate having shares listed or admitted to trading on any regulated exchange of an IOSCO member country.

1. all the assets deposited/ to be deposited with the bank are of lawful nature and are not derived directly or indirectly from criminal, terrorist activities, or unlawful origin.
2. the bank has full discretion to approve or decline this application.
3. The data, information and records pertaining to my/our relationship with the bank may be disclosed to DFSA in accordance with the DFSA rules and regulations as the DFSA may require the Bank to provide them from time to time with it pursuant to the Federal Law no. 4 of 2002 (Criminalization of money laundering) and the requirements of the Regulatory Law and AML module of the DFSA’s Rulebook.
4. I/We have no objection to the Bank obtaining information from any source or contacting any person or entity in order to verify the accuracy and correctness of the information, data and particulars provided by me/us, but the bank is not bound to do so and is entitled to rely on the authenticity of the information provided by me/us.
5. the bank will have discretion to take a decision as to whether me/us is a Professional Client or not on the basis of the information and data provided by me/us. In case we wish to be classified as retail client , we shall make a specific request in writing to PNB DIFC.
6. I/We, on the behalf of the organization, have read and fully understood the terms and conditions of the Bank as stipulated from time to time under the Bank is willing to carry out its services.
7. The Company agrees to provide to the Bank in writing any changes in details or circumstances that may change from time to time.
8. We agree to comply with and be bound by the Bank’s rules for now and from time to time in force for the conduct of such accounts.
9. We understand the eligibility criteria of being a professional client under DIFC/DFSA rules. We undertake to comply with the same on regular basis and we undertake to inform the bank any changes that could affect our current classification of being professional client.
10. We also undertake to inform the bank from time to time with regard any major changes: in our existing policy of the company, change in commodity we are dealing with, change in geographical distribution of sales and purchases, Management / beneficial owner/ stake holder’s change or any other development that may directly affect the working of the company.

Further, we have received and read a copy of the Bank’s terms and conditions governing the accounts (client agreement), collections, remittances and electronic Banking and have understood its contents/ We agree to abide and be bound by them and any amendments/alterations and additions thereto that may be made from time to time. We consent to disclosures as provided therein and agree that all payments/Bank charges applicable be debited from the account. We are agreeable to the Bank maintaining customer account balance and transaction information with their Head Office in India and /or any disclosure of such information to the Reserve Bank of India, as permitted by the laws and regulations of the Dubai International Financial Centre (DIFC). We also agree to the condition that the Bank may outsource operations including account maintenance activities to their Head Office in India or any other person or place. The Bank may also divulge our name and account number to the printers for getting relevant documents printed, if applicable, for our account. We also consent to the Bank advising us about all products either proprietary or otherwise offered by the Bank periodically to us by email/ pamphlets/letters.

1. We hereby certify that a resolution of the Board of Directors of......................................... Company, Limited, was passed at a meeting of the Board duly convened and held on the ............................ under resolution number………………………………and has been duly recorded in the minutes book of the said Company and signed therein by the Chairman and are in accordance with the Articles of the company.
2. It was resolved that:
3. Punjab National Bank, DIFC, Dubai branch (`the Bank') be appointed the Bankers of the Company, the bank is hereby authorized and requested to open Bank Accounts in the name of the Company and:-
4. To honour and comply with all Cheques, Drafts, Bills of Exchange, Promissory notes, Acceptances, Negotiable instruments and orders expressed to be drawn, accepted, made or given on behalf of this Company at any time or times whether the banking account or accounts of this company are overdrawn or any overdraft is increased by any payment thereof or in relation thereto or are in credit or otherwise but without prejudice to the Bank's right to refuse to allow any overdraft or increase of overdraft, and
5. To honour and comply with all instructions to deliver or dispose of any securities or documents or property held by the bank on behalf of the company; to hold the company liable on all agreements and indemnities in connection with the issue of letter of credit, drafts, and telegraphic transfers and with all banking transactions. Provided any such Cheques, Drafts, Bills of Exchange, Promissory notes, Acceptances, Negotiable instruments and orders instructions agreements and indemnities are signed by the persons holding the under mentioned offices for the time being:

................................................................................................................................................

1. To treat all Cheques, Drafts, Bills of Exchange, Promissory notes, Acceptances, Negotiable instruments and orders as being endorsed on behalf of the company and to discount or otherwise deal with them provided such endorsements purport to be signed for the time being by:

................................................................................................................................................................................................................................

1. To cancel all existing mandates (if any) in force at the date hereof with regard to the Company's said Account(s) which mandates are hereby terminated. Provided that all authorities, instructions, instruments and transactions authenticated in accordance with any existing mandate and purporting to have been given, made issued or entered into prior to receipt by Punjab National Bank, DIFC, Dubai of notice of this resolution shall have effect as between the company and Punjab National Bank, DIFC, Dubai as though this resolution had never been passed.
2. A list of the names and specimen signatures of the persons at present authorised to sign under this resolution be furnished to the Bank. The foregoing mandate and list of names remain in force until receipt by the Bank of a duly certified copy of resolution rescinding or amending the same.

The Company agrees that any indebtedness or liability incurred by the Company under this authority shall in the absence of any express written agreement by the Bank to the contrary be due and payable on demand.

1. The Bank be and is by this resolution authorised to provide the Company's auditors for the time being and from time to time with such information as the Company's auditors may request from time to time until notice in writing to the contrary is received by the Bank.
2. The Company Secretary/Chairman shall, as and when necessary, supply to the Bank a list of the current directors and, if applicable, other officials authorised to do above acts, with specimen signatures and the Bank may act on such lists signed by the Secretary/Chairman.
3. The Company hereby confirms that none of the directors are or have been disqualified under the applicable law or any similar overseas legislation covering the disqualification of directors or other officers of a company.
4. These resolutions be communicated to the Bank and shall constitute the Company's Mandate to the Bank and remain in force until an amended resolution is passed by the Board of Directors and a copy thereof, certified by the Chairman and the Secretary or by any Director or the Secretary acting or purporting to act on behalf of the Company shall have been received by the Bank.
5. In this resolution the expressions `Directors' and 'Secretary' shall be construed as Director(s) and Secretary for the time being of the Company and shall, in the case of Director(s) include alternate Director(s) and in the case of Secretary shall include any Joint Secretary, Assistant Secretary or Temporary Secretary and/or any other person appointed to perform the duties which may be performed by Secretary.
6. We certify that the signatures set down within Section 3 of this account opening form are those of all the Directors, the Secretary and of any other Officers of the Company authorised to sign, that such signatures are the genuine signatures of such persons and that such signatures operate as the specimen signatures of each of such persons.

We declare that the above information is correct and confirm that the company/ association/ club/trust/ society is not insolvent, wound-up nor placed in liquidation, judicial management or receivership.

Yours faithfully,

**Authorised Signatory (Signature):** **Authorised Signatory (Signature):**

Name in Capitals \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name in Capitals \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Date:

**Authorised Signatory (Signature):** **Authorised Signatory (Signature):**

Name in Capitals \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name in Capitals \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Date:

**Company Seal**

**Attestation by Branch: “Signed in my Presence”**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of official: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Designation of official; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PF NO \_\_\_\_\_\_\_\_\_\_\_\_\_ GBPA No. \_\_\_\_\_\_\_\_\_\_\_.**

**ANNEXURE**

**DETAILS OF AUTHORISED SIGNATORY/DIRECTORS/BENEFICIAL OWNERS**

*(Use separate sheet/s for each signatory, Director, Beneficial owner etc.)*

|  |  |  |
| --- | --- | --- |
| Title |  | Affix  Your latest  Passport  Size  Photograph |
| Name (as per passport) |  |
| Current Address  Post code: |  |
| Country |  |
| Residing since |  | |
| Passport No. |  | |
| Citizenship |  | |
| Marital Status |  | |
| Date of birth |  | |
| Residence Telephone no. |  | |
| Mobile No. |  | |
| Residence Fax No. |  | |
| E-mail Address |  | |
| Previous Address  (Only if less than 3 years  at current address) |  | |
| Post Code |  | |
| Country |  | |
| Residing Since |  | |
| Occupation |  | |
| Position held in the company/Branch where posted |  | |
| Year (s) of Service |  | |
| Board Resolution Number and date  (Empowering to sign) |  | |
| **Signature of the Authorized Signatory/Director/Beneficial Owner:** | | |