

CUSTOMER INFORMATION SHEET

(INDIVIDUAL ACCOUNT)

CLIENT TYPE: ☐ WALK-IN    ☐ SOLICITED    ☐ *REFERRED*

CUSTOMER CATEGORY:    ☐ BORROWER    ☐ NON-BORROWER

☐ NEW    ☐ UPDATING

CIF NO. \_\_\_\_\_

BRANCH/ UNIT : \_\_\_\_\_

I. DETAILS OF ACCOUNT					RECENT PHOTO <i>(within 1 year from the date it was taken)</i>
PURPOSE OF ACCOUNT <input type="checkbox"/> SAVINGS <input type="checkbox"/> BUSINESS <input type="checkbox"/> REMITTANCE <input type="checkbox"/> PAYROLL <input type="checkbox"/> OTHERS _____					
EXPECTED NATURE/ TYPE OF TRANSACTION/S (Please check all applicable.)					
<div><input type="checkbox"/> CASH DEPOSIT    <input type="checkbox"/> ENCASHMENT/ WITHDRAWALS    <input type="checkbox"/> FUND TRANSFER    <input type="checkbox"/> REMITTANCE    <input type="checkbox"/> FOREIGN EXCHANGE</div> <div><input type="checkbox"/> CHECK DEPOSIT    <input type="checkbox"/> CHECK ISSUANCES    <input type="checkbox"/> TRADE TRANSACTIONS    <div><div>INWARD    OUTGOING</div><div><input type="checkbox"/>    <input type="checkbox"/></div><div><input type="checkbox"/>    <input type="checkbox"/></div></div>DOMESTIC    <input type="checkbox"/> INVESTMENT</div> <div><input type="checkbox"/> OTHERS _____</div>					
II. CUSTOMER / SIGNATORY INFORMATION					
1. TITLE BEFORE NAME		2. CUSTOMER			
		Last Name    First Name    Middle Name    Suffix (if applicable)			
3. PHILIPPINE RESIDENT <input type="checkbox"/> YES <input type="checkbox"/> NO		4. PRESENT ADDRESS			
5. CITIZENSHIP <input type="checkbox"/> FILIPINO <input type="checkbox"/> OTHER _____		Unit / Floor Number    Premises / Building Name    House / Building No.    Street Name    District / Town / Barangay			
		City / Municipality    State / Province    Country    Zip Code			
6. GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		7. PERMANENT ADDRESS <input type="checkbox"/> Same with "PRESENT ADDRESS"			
8. DATE OF BIRTH (mm/dd/yyyy)		Unit / Floor Number    Premises / Building Name    House / Building No.    Street Name    District / Town / Barangay			
		City / Municipality    State / Province    Country    Zip Code			
9. CIVIL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> ANNULLED <input type="checkbox"/> OTHER _____		10. PLACE OF BIRTH (Municipality/ City, Province)		11. COUNTRY OF ORIGIN/ BIRTH	
		12. MOTHER's MAIDEN NAME			
		Last Name    First Name    Middle Name			
		13. SPOUSE NAME			
		Last Name    First Name    Middle Name    Suffix (if applicable)			
14. HOME PHONE NO.		15. MOBILE PHONE NO.		16. PERSONAL E-MAIL ADDRESS	
17. TIN		18. SSS/ GSIS NO.		19. ID TYPE AND NUMBER PRESENTED	
				ID 1: ID TYPE _____ ID NO. _____ EXPIRY DATE _____	
				ID 2: ID TYPE _____ ID NO. _____ EXPIRY DATE _____	
20.SOURCE OF FUNDS (For Business, kindly fill out <b>Supplement to Business Information</b> form) <input type="checkbox"/> SALARY <input type="checkbox"/> REGULAR REMITTANCE <input type="checkbox"/> INTEREST/ COMMISSION <input type="checkbox"/> DONATION <input type="checkbox"/> BUSINESS <input type="checkbox"/> PENSION <input type="checkbox"/> OTHERS _____			21. SOURCE OF WEALTH <input type="checkbox"/> INHERITANCE <input type="checkbox"/> WINNINGS <input type="checkbox"/> PROCEEDS OF SALE OF ASSET/S <input type="checkbox"/> OTHERS _____		
22.FUNDS/ AVERAGE MONTHLY INCOME <input type="checkbox"/> P500,000 - P999,999 <input type="checkbox"/> P9,999 AND BELOW <input type="checkbox"/> P50,000 - P99,999 <input type="checkbox"/> P1MM - P2,999,999 <input type="checkbox"/> P10,000 - P19,999 <input type="checkbox"/> P100,000 - P249,999 <input type="checkbox"/> P3MM - P4,999,999 <input type="checkbox"/> P20,000 - P49,999 <input type="checkbox"/> P250,000 - P499,999 <input type="checkbox"/> P5MM AND ABOVE			23. EXPECTED TOTAL AMOUNT OF TRANSACTIONS PER MONTH <input type="checkbox"/> UP TO P500,000 <input type="checkbox"/> ABOVE P3,000,000 <input type="checkbox"/> P500,000.01 TO P999,999.99 <input type="checkbox"/> P1,000,000 TO P3,000,000		24. EXPECTED TOTAL NUMBER OF TRANSACTIONS PER MONTH <input type="checkbox"/> 1 TO 10 <input type="checkbox"/> MORE THAN 20 <input type="checkbox"/> 11 TO 20
25. EMPLOYMENT <input type="checkbox"/> EMPLOYED <input type="checkbox"/> SELF - EMPLOYED <input type="checkbox"/> RETIRED <input type="checkbox"/> UNEMPLOYED		26. PROFESSION		27. NATURE OF WORK / TYPE OF INDUSTRY	
28. NATURE OF EMPLOYMENT <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> OFW    COUNTRY _____ <input type="checkbox"/> PRIVATE <input type="checkbox"/> SEA-BASED <input type="checkbox"/> LAND-BASED		29. NAME OF EMPLOYER / BUSINESS		30. NATURE OF BUSINESS	
31. EMPLOYER / BUSINESS ADDRESS					
Unit / Floor Number    Premises / Building Name    Building No.    Street Name    District / Town / Barangay					
City / Municipality    State / Province    Country    Zip Code					
32. OFFICE PHONE NO.		33. BUSINESS E-MAIL ADDRESS		34. LENGTH OF EMPLOYMENT	
				35. POSITION	
				36. RANK	
37. BUSINESS INTEREST WITH AT LEAST 20% OWNERSHIP. Does your Business have an existing BankCom account? <input type="checkbox"/> YES <i>(Please specify the details , and use another sheet if necessary.)</i> <input type="checkbox"/> NO					
COMPANY NAME :			% OWNERSHIP :		REG. NO./ EXPIRY :
TIN :					
ADDRESS :					
38. RELATIONSHIP TO BANK OF COMMERCE (BANKCOM) ACCOUNT HOLDER/S (up to 2nd degree of consanguinity or affinity, legitimate or common-law). Please use another sheet if necessary.					
NAME :				RELATIONSHIP :	
39. RELATIONSHIP TO BANKCOM, SAN MIGUEL CORPORATION (SMC) AND ALL ITS SUBSIDIARIES (or collectively, the "SMC GROUP OF COMPANIES") AND AFFILIATES					
Are you a Director, Officer, or Stockholder of BankCom, the SMC Group of Companies, and/or any of its affiliates? <input type="checkbox"/> YES <i>(Please specify the details, and use another sheet if necessary.)</i> <input type="checkbox"/> NO					
COMPANY :				POSITION/ AFFILIATION :	
Are you related to a Director, Officer, or Stockholder of BankCom, the SMC Group of Companies, and/or any of its affiliates (up to second degree of consanguinity or affinity, legitimate or common-law)? <input type="checkbox"/> YES <i>(Please specify the details, and use another sheet if necessary.)</i> <input type="checkbox"/> NO					
NAME :				COMPANY :	
RELATIONSHIP TO DIRECTOR, OFFICER, OR STOCKHOLDER :				POSITION/ AFFILIATION :	
40. RELATIONSHIP TO GOVERNMENT OFFICIAL (2nd degree of consanguinity or affinity, legitimate or common-law). Please use another sheet if necessary.					
NAME :				HIGHEST POSITION OCCUPIED :	
RELATIONSHIP :				PERIOD COVERED :	
41. FOR PAST/ PRESENT GOVERNMENT OFFICIALS					
HIGHEST POSITION OCCUPIED :				PERIOD COVERED :	
CURRENT POSITION OCCUPIED :				PERIOD COVERED :	
42. REPRESENTED BY TRUSTEE/ AGENT/ NOMINEE/ INTERMEDIARY/ INSURANCE BENEFICIARY/ BENEFICIAL OWNER. <input type="checkbox"/> YES (Please fill out the <b>Ultimate Beneficial Owner</b> form) <input type="checkbox"/> NO					

III. MAILING DISPOSITION						
MONTHLY STATEMENT OF ACCOUNT	MAIL TO <i>(Choose 1)</i>	<input type="checkbox"/> PRESENT ADDRESS	<input type="checkbox"/> PERMANENT ADDRESS	EMAIL TO <i>(Choose 1)</i>	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> BUSINESS
QUARTERLY STATEMENT OF ACCOUNT FOR TRUST		<input type="checkbox"/> PRESENT ADDRESS	<input type="checkbox"/> PERMANENT ADDRESS		<input type="checkbox"/> PERSONAL	<input type="checkbox"/> BUSINESS

IV. ACKNOWLEDGMENT, CERTIFICATION AND CONSENT\*

TERMS AND CONDITIONS

I confirm that I have been provided the Terms and Conditions Governing Deposits (Terms and Conditions), and have read and clearly understood the same. I hereby agree that my present and future deposit account/s with BankCom shall be governed by: **(i) the Terms and Conditions** (which are also readily available in BankCom’s website **www.bankcom.com.ph**), as maybe amended/ revised from time to time; and **(ii) the rules and regulations of the Bangko Sentral ng Pilipinas (BSP)** and the **Anti-Money Laundering Council (AMLC)** relative to the opening of accounts and the operation of bank products and services that I will or have availed of. I further agree to abide by the Terms and Conditions and the rules and regulations of the BSP and AMLC and my continued use of BankCom’s products and services shall be construed and will constitute acceptance of its subsequent amendments.

Communications and Notices

I hereby agree that all written communications including reports, correspondences and statements of accounts (“Mail”) relating to or in connection with my account/s with BankCom whether sent via: (1) courier / messenger to my mailing address on record; and / or (2) electronic delivery to my e-mail address on record shall constitute delivery and be deemed received by me on the day of transmission.

In case there is any change in my mailing address / e-mail address, I hereby agree that I will have to go and notify in writing my BankCom Branch of Account or any nearest BankCom Branches for the updating of my mailing address / e-mail address on record subject to BankCom’s standard operating policies and procedures. Should I fail to notify my BankCom Branch of Account in writing of any change in my mailing / e-mail address, all Mail shall be directed to my last known mailing / e-mail address appearing on the records of BankCom.

In case of any discrepancy or objection to the content of the Mail sent to my address on record, I agree that I should report the same my BankCom Branch of Account within twenty-four (24) hours from receipt of the Mail. I further agree that my failure to send any written objection within the period provided, said Mail shall be deemed correct, binding and conclusive on me.

Foreign Account Tax Compliant Act (FATCA)

I/ the entity further certify/ies that

- ☐ I am a US citizen or US resident alien and that as a US Person<sup>1</sup>, I have accomplished and submitted all the relevant documents as requested by the BankCom.
- ☐ I am not a US Person and in the case that there are indicia<sup>2</sup> that suggest otherwise, has attached, to this form, copies of all necessary documents to prove such status, wherein failure to submit these required documents<sup>3</sup> entitles the Bank to refuse the opening of the requested account.
- ☐ I am not a US Person, and that I have not spent more than one hundred eighty three (183) days in the US in the past three (3) years.

Where I have stated that I am not a US Person, I hereby affirm and confirm the truth of this declaration of non-US status and I undertake to inform the Bank in writing of any change in circumstances that will affect the accuracy of my declaration within thirty (30) calendar days from the occurrence of such change. I understand that the Bank shall operate my account/s on the basis of such declaration. In the event that the Bank discovers that I am a US Person, (i) I hereby waive my right to confidentially under bank secrecy laws including but not limited to **Republic Act Number 1405 (The Law on Secrecy of Bank Deposits)**, **Republic Act Number 6426 (The Foreign Currency Deposit Act)** and **Republic Act Number 8791 (General Banking Law of 2000)**, including the amendments of each law, and signify my agreement and consent to the processing and updating of all information relative to my account/s under **Republic Act Number 10173** or the **Data Privacy Act of 2012**; and (ii) the Bank, its subsidiaries and affiliates are hereby absolutely and unconditionally authorized to directly and indirectly report and disclose to the US IRS and/or the Bureau of Internal Revenue of the Philippines (BIR) any details regarding my name, address, US TIN, account balance and transaction history with the Bank and for this purpose, I undertake to provide the Bank with such information upon request.

DATA PRIVACY ACKNOWLEDGMENT AND CONSENT

Acknowledging and exercising my rights under **Republic Act No. 10173**, otherwise known as the **Data Privacy Act and its Implementing Rules and Regulations**, I hereby give my consent to BankCom and/or its branches, units, agents, authorized representatives, representative offices, affiliates, subsidiaries, and accredited third-party partners, counterparties, correspondent banks and service providers to process, use and share among themselves the personal information written on the application for the opening of my account/s as well as the information obtained in the course of my transactions with BankCom , its branches or units in relation to my account/s, or obtained from third parties for purposes of the opening of my account/s and for client identification, client risk profiling/assessment, product development and improvement, market research, communications relevant to the life cycle or usage of my account/s, compliance with BSP rules and regulations, anti-money laundering laws, rules and regulations, FATCA, and such other purposes as may be allowed or required by law.

I also acknowledge that my **Personal Data (refers to ALL types of personal information – personal, sensitive and privileged as defined under the Data Privacy Act and its Implementing Rules and Regulations)** shall be retained for a period of not less than five (5) years from the time any of my account is closed, cancelled or terminated as required or allowed under applicable laws, rules and regulations, unless a longer period is necessary in view of an investigation being conducted, or a criminal, civil, or administrative case has been filed in a competent judicial or administrative body where I or my account/s is/are is involved or impleaded as a party to the case or investigation, in which case/s, to the extent necessary, my Personal Data shall be preserved beyond the five (5) year period until such time that a final judgment has been reached by the judicial or administrative body.

I likewise hereby give my consent to BankCom and/or its branches, units, agents, authorized representatives, representative offices, affiliates, subsidiaries, and accredited third-party partners, counterparties, correspondent banks and service providers to offer especially selected products and services to me through mail, email, fax, SMS, or by telephone to ensure that I will have the opportunity to avail of the a wide range of products, services and facilities of BankCom, its subsidiaries and affiliates, third party partners, counterparties, correspondent banks and service providers.

The foregoing constitutes my written, express, specific and informed consent for any transfer or disclosure of my name, address, contact details, account balances and numbers and other relevant information to and among BankCom and/or its branches, units, agents, authorized representatives, representative offices, affiliates, subsidiaries, and accredited third-party partners, counterparties, correspondent banks, service providers, and any government entity exercising executive, legislative, judicial, quasi-judicial, regulatory or administrative functions, such as but not limited to the Bureau of Internal Revenue, the Social Security System and other similar government agencies.

I, in my own capacity/ for and on behalf of the entity undertake to indemnify and hold the Bank, its directors, stockholders, officers, employees, representatives, agents or relevant units of the Bank, free and harmless from and against all liabilities, claims, demands, actions, proceedings, losses, expenses and all other liabilities of whatever nature or description that may be suffered or incurred by the Bank, its directors, stockholders, officers, employees, representatives, agents or relevant units of the Bank, arising from or in connection to the implementation of this acknowledgment.

I further confirm that I have read and understood this Acknowledgment or have had the same read and explained to me in a language known to me and have understood its import. I attest that all information voluntarily provided in connection with this form is true and correct. In case the account is held by an Entity, I make the same representations for/ on behalf of the Entity to further certify that I am duly authorized to do so as evidenced by the Authorization attached hereto.

Other Products and Services

I hereby authorize BankCom to share my personal information with the other units of BankCom for purposes of cross-selling bank products and services (e.g., **Auto Loan, Home Loan, Cash Card, Credit Card, Investments, Trust Arrangements, Remittance, Sikap Pinoy Asenso Business / Entrepreneurship Program, BankCom Online Banking**, etc.); and, consequently, the said units are allowed to contact me for this purpose (i.e., by e-mail, telephone, text, etc.).

I further give my consent to BankCom to share my personal information with the San Miguel Corporation Group of Companies for purposes of receiving any marketing materials (such as product/ service promotions, discounts, etc.) relevant to me whether or not I will avail of any its products/ services.

By affixing my signature below, I have read, understood, and agree to the following provisions declared herein:

- ☐ Terms and Conditions
- ☐ Data Privacy Acknowledgement and Consent
- ☐ Other Products and Services

SIGNATURE VERIFIED BY:

<div>_____</div> <div><i>Client’s Signature Over Printed Name</i></div>	<div>_____</div> <div><i>Date</i></div>	<div>_____</div> <div><i>Bank Personnel’s Signature Over Printed Name</i></div>
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\*The Client/s shall be referred to as “I”, “my” and “me” in this document.

<sup>1</sup> US Person, as defined by the United States Internal Revenue Service in the US Internal Revenue Code, with respect to individuals, is any person who is at least one of the following: a. Holds a US Passport; b. Holds US citizenship (sole or dual); c. Holds a Green Card; d. Is a resident of the United States; e. Was born in the United States unless the person has renounced his US citizenship; e. Is a non-US citizen who has substantial presence in the US: (i) Is present in the US for at least 183 days by counting the sum of all the days in the current year, 1/3 the days in the immediately preceding year, and 1/6 the days in the second preceding year; and (ii). Is not a diplomat, teacher, student, or athlete; (f) Is a US taxpayer for any other reason.

<sup>2</sup> For the purposes of this Acknowledgment, entities in which US persons hold at least ten percent (10%) of the stock or profit interest of such entity (“US-owned entity”) are included in the scope of the definition of a United States Person.

<sup>3</sup> The following are considered US indicia: (i) US citizens or lawful permanent residents (i.e. Green Card holders); (ii) US birthplaces; (iii) A current US residence address or US mailing address (including a US P.O. Box); (iv) US telephone numbers (regardless of whether such number is the only telephone number associated with the account holder); (v) With standing instructions to pay amounts from the account to an account maintained in the US; (vi) Power of attorney or signatory authorities are granted to persons with US address; and (vii) A US “in-care-of” or “hold mail” address that is the sole address the Bank has identified for the account holder.

FOR BANK’S USE ONLY

<input type="checkbox"/> CUSTOMER IS INCLUDED IN THE BANK’S WATCHLIST <input type="checkbox"/> YES _____ OFAC/ FATF/ OTHER SANCTION LIST <input type="checkbox"/> NO _____ INTERNAL LIST _____ PEP	<input type="checkbox"/> CUSTOMER IS A PEP <input type="checkbox"/> CUSTOMER IS A PEP-RELATIVE <input type="checkbox"/> CUSTOMER IS A PEP-AFFILIATE <input type="checkbox"/> CUSTOMER IS A PEP-CLOSE RELATIONSHIP <input type="checkbox"/> CUSTOMER IS A PEP-CLOSE ASSOCIATE <input type="checkbox"/> CUSTOMER IS A BANK OF COMMERCE RELATED PARTY	<input type="checkbox"/> CUSTOMER IS A RELATIVE OF A BANKCOM EMPLOYEE (UP TO 2ND DEGREE OF CONSANGUINITY/ AFFINITY, LEGITIMATE/ COMMON-LAW) NAME OF EMPLOYEE _____ RELATIONSHIP _____ <input type="checkbox"/> CUSTOMER WAS RISK PROFILED: <input type="checkbox"/> LOW <input type="checkbox"/> MEDIUM <input type="checkbox"/> HIGH CRP NO.: _____ RISK SCORE: _____
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SOLICITING OFFICER NAME, SIGNATURE AND DATE	OPENED/ PROCESSED BY AND DATE
REVIEWED BY AND DATE	APPROVED BY AND DATE