



# Supplementary Joint Account Personal Information Form

Standard Chartered Brunei Darussalam

<b>Account Details</b>		Relationship No. (For bank use only)	Primary																										
			Joint (where applicable)																										
<b>1. Personal Details</b>																													
Full Name: (as per Identity Document)																													
Surname as per Identity Document: <small>Surname not applicable</small> <input type="checkbox"/>										Mobile No.:					+673														
Identity Document No.:										Residential No.:					+673														
Email Address:										Office No.:					+673														
The Information in Box A is as per my Identity Document <input type="checkbox"/> Yes <input type="checkbox"/> No										Box A																			
<small>Please do NOT fill in Box A if 'Yes' is checked</small>																													
Place of Birth: _____										Date of Birth:					<table border="1" style="font-size: 8px; text-align: center;"> <tr> <td>D</td><td>D</td><td>/</td><td>M</td><td>M</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>					D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y																				
Current Residential Address										Box B																			
_____										_____																			
_____										_____																			
Kampong _____					Mukim _____					City/District _____					Postal Code _____														
<small>This mailing address (including any future amendments made thereto) will be your primary address for all communication purposes and/or product and services.</small>										Box C																			
Mailing Address <small>(Fill in only if it is different to Current Residential Address)</small>																													
_____										_____																			
_____										_____																			
Kampong _____					Mukim _____					City/District _____					Postal Code _____														
<small>Mandatory for foreign nationals only</small>										Box D																			
Foreign Residential Address																													
_____										_____																			
_____										_____																			
City/District _____					Postal Code _____					Country _____																			
Foreign Phone Number + _____																													
Ethnic Type <input type="checkbox"/> Malay <input type="checkbox"/> Chinese <input type="checkbox"/> Indian <input type="checkbox"/> Other										Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other																			
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female					Highest Education <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Diploma <input type="checkbox"/> Degree																								
					<input type="checkbox"/> Master					<input type="checkbox"/> PhD					<input type="checkbox"/> Others														
I do not wish to sign up for these services:																													
<input type="checkbox"/> Online Banking					<input type="checkbox"/> Banking Alerts																								
<b>2. US Status</b>																													
Citizenship _____										Country of residence _____					Domicile Country _____														
<small>in case of multiple nationalities, please list all nationalities/citizenships held</small>																													
Are you a U.S Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No										Do you hold a U.S Permanent Resident Card (Green Card)? <input type="checkbox"/> Yes <input type="checkbox"/> No																			
Are you a U.S Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No																													
<small>If "Yes" is answered for any of these boxes, please submit a Form W-9.</small>																													



<b>3. Tax Residence Information</b>																																									
Please complete the following table indicating (i) the country/jurisdiction where you are a resident for tax purposes and (ii) your Taxpayer Identification Number or functional equivalent (hereafter referred as TIN) for each country/jurisdiction indicated.																																									
If you are a resident for tax purposes in more than three countries/jurisdictions, please use a separate sheet.																																									
If a TIN is unavailable, please provide reason A, B or C where appropriate:																																									
<ul style="list-style-type: none"> <li>• Reason A: The country/jurisdiction where you are resident does not issue TINs to its residents.</li> <li>• Reason B: You are unable to obtain a TIN (please explain why you are unable or not required to obtain a TIN in the table below if you have selected this reason).</li> <li>• Reason C: No TIN is required (note: only select this reason if the authorities of the country/jurisdiction of residence for tax purposes entered below do not require the TIN to be disclosed).</li> </ul>																																									
No.	Country or Jurisdiction of Tax Residence	TIN	If no TIN or functional equivalent is available enter Reason A, B or C																																						
1																																									
2																																									
3																																									
If Reason B is selected above, explain why you are unable or not required to obtain a TIN in the corresponding row below																																									
1																																									
2																																									
3																																									
<b>4. Employment details</b>																																									
Name of Employer/School:			Designation/Position:																																						
Employment Address:			Job Status <input type="checkbox"/> Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Unemployed																																						
Postcode:																																									
Work Type		Profession																																							
<input type="checkbox"/> Salaried (Controller/Owner/Directors) <input type="checkbox"/> Salaried (General) <input type="checkbox"/> Student <input type="checkbox"/> Self-employed/Business Owner <input type="checkbox"/> Home Maker <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed		<input type="checkbox"/> Labourer <input type="checkbox"/> Clerical <input type="checkbox"/> Other <input type="checkbox"/> Professional <input type="checkbox"/> Technician _____ <input type="checkbox"/> Uniform Sales/Commission Earner																																							
Nature of Business (for self-employed only)		Length of Employment <input type="text"/> Years <input type="text"/> Months																																							
<input type="checkbox"/> Import <input type="checkbox"/> Export <input type="checkbox"/> Retailer <input type="checkbox"/> Manufacturing <input type="checkbox"/> Wholesaler <input type="checkbox"/> Commission <input type="checkbox"/> Other _____		Contract Expiry Date (If applicable)																																							
		<table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">/</td><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">/</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td> </tr> </table>		D	D	/	M	M	/	Y	Y	Y	Y																												
D	D	/	M	M	/	Y	Y	Y	Y																																
<b>5. Debit Card</b> <i>(applicable if the joint account is either one to sign)</i>																																									
<b>Name to be appear on Card</b> (Minimum 5 to Maximum 19 characters)																																									
<small>If this information is not provided, the Bank shall have the discretion to decide on the name to appear on your card)</small>																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>																																									
<b>Card Type</b>		<input type="checkbox"/> Visa Debit Gold <input type="checkbox"/> Visa Debit Elite (for EB Elite) <input type="checkbox"/> Visa Debit Platinum (for Priority Banking)																																							
<b>Account to be link</b>		(Second/Subsequent account)																																							
(Main account)																																									
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		-			-			-																																	
<b>Card Delivery</b>																																									
Please be informed that your card will be delivered to your registered mailing address*, unless otherwise specify below;																																									
<input type="checkbox"/> Residential Address		<input type="checkbox"/> Card to be collected at _____ branch.																																							
<small>*In case of unsuccessful delivery, we will send your card(s) to the branch nearest to your Mailing address. We will not deliver to overseas address and P.O.Box. where mailing address is P.O.Box we will mail to the registered residential address.</small>																																									