



NATIONAL BANK OF ANGUILLA LTD

APPLICATION FOR AN INDIVIDUAL TO OPEN AND OPERATE A BANK ACCOUNT

This application is to be completed by an individual applicant who wishes to open and operate a bank account.

TO APPLY FOR THIS ACCOUNT:-

- (1) Complete this application form.
- (2) Submit evidence substantiating the source of the funds to be deposited.
- (3) Submit required documents

The above requirements are not exhaustive in that some applicants may be required by the Bank to submit additional documents and information. In order to avoid delay it is to your advantage to submit documentation which is as complete as possible when submitting your application.

1. Surname/family name (exactly as in passport):-		
2. First and middle names:-		
3. Other names (Maiden, religious, professional, or alias) :-		
4. Marital status:-	5. Gender:-	6. Date of Birth (m/d/yr):-
7. Country of Birth:-	8. Passport number :-	9. Driver's License number:-
10. Nationality :-	11. Social Security number :-	12. Email address:-
13. Politically exposed person (PEP):- <input type="checkbox"/> Yes <input type="checkbox"/> No		
14. If non-resident, the reason for choosing NBA, a bank based in Anguilla:-		
15. Home address (include apt no. , street, city, province, and postal zone):-		
16. Full residential address { for past three (3) years if different from (15) above}:-		

17. Home telephone number and Cell number:-	18. Occupation:-
19. Employer/Name of Business :	
20. Employer/Business address:-	
21. Employer's/Business telephone number(s):-	Facsimile
22. If self employed, state the nature of the business:-	
23. Have you ever been convicted of any criminal offence even though the subject of a pardon, amnesty, or such legal action? <input type="checkbox"/> Yes <input type="checkbox"/> No	
24. If Yes, please give the following details:- (i) offence for which convicted, (ii) country; (iii) time; (iv) sentence	
25. Are there any pending criminal charges against you or your associates? If yes, please specify.	
26. Are you presently the subject of any criminal investigation? If so, state details.	

27. If you have any obligations that are in default, these should be indicated below. If there is insufficient space, please give full details on an additional sheet of paper and attach.

Name of organization / Individual owed:

Amount owed: _____ Time that debt is outstanding

Name of organization / Individual owed:

Amount owed: _____ Time that debt is outstanding

28. Are you or your associates in compliance with all the regulations of your country to open and operate this account? If not, please give details.

29. Please give your bankers name and address, and names and addresses of two (2) other persons from which the Bank, if it wishes can obtain character references.

Transaction Profile PERSONAL ACCOUNTS NATIONAL BANK OF ANGUILLA LIMITED

30. Please indicate the purpose and intended nature of the business relationship (Reason for Account):-

Daily Banking Savings Other (Please Specify)

31. Details of any existing relationship with the bank.

32. Please state the estimated largest transaction on the account:

33. Estimated number of transactions per month:

1-10 10-20 20-40 60-100

34. Please state the amount of the initial deposit:

35. Please state the origin of the initial deposit:

36. Please state the source of the initial deposit (generated from what transaction or business):

37. Please state the main source(s) and the country of origin for ongoing deposits into this account (from what transactions):

If the Bank opens an account in your name and any single deposit to this account exceeds USD 9,999.99 or its equivalent, you are required by law to state the source of said funds. You will also be required to disclose the source of funds if, over a 30 day period, deposits made to your account exceed USD 9,999.99 or its equivalent.

You hereby authorize the Bank and/or its agents to verify the information presented in this document.

Further, you agree to pay to the Bank all costs incurred.

Dated at The National Bank of Anguilla Ltd, The Quarter Anguilla, on this ___ day of

_____20_____

Applicant's Signature

Witness

As soon as we receive your application and if your eligibility to hold the account can be determined on the basis of the application form and the documents submitted therewith, the Bank will promptly open the account as requested. If there are questions concerning your documentation or eligibility, the Bank will conduct inquiries if you, are prepared to cover the costs.

Official Use:

Were all the required documents/information obtained and certified where necessary? ____yes ____No

Source used to verify individual: Letter of Introduction: _____ Personal visit to residential address: _____

Bank Statement: _____ Utility Bill: _____
Call Social Security: _____ Call Inland Revenue: _____
Call Financial Intelligence Unit: _____ Check Voter's List: _____
World Check: _____ Internet: _____
Birth Certificate: _____ Other Third Party Source: _____
Correspondence from Local Government Agency: _____

Please ensure the evidence used to verify the individual is maintained on file.

Customer Risk: _____High _____Medium _____Low

Prepared by: _____

Authorizing Officer Signature: _____

Authorizing Officer Code:

I have checked the references indicated above Find details below or attached hereto.