



All fields are mandatory, unless otherwise indicated

Section A

Documents that we need from you, the applicant

I acknowledge that some information is needed in order to comply with South African law.

- 1 One certified copy of the relevant pages of your valid passport (photo must be clear and we only accept certified copies with the original certificate of the commissioner of oaths).
- 2 One passport-size colour photographs certified at the reverse as a true likeness of the individual. (only if the passport photo is not clear)
- 3 Three months' bank statements not older than three months if applying for a transactional account.
- 4 Documentary evidence relating to source of funds.
- 5 Proof of Address (not older than 3 months).

If another person must have signing authority on the account, we will also need the following:

- 1 One original certified copy of relevant pages of the authorised signatory's passport or if they are a South African citizen, we will need their identity document. (photo must be clear and we only accept certified copies with the original certificate of the commissioner of oaths).
- 2 Section G, accountholder record must be signed by the authorised signatory.
- 3 Consent to check credit references in Section D must signed by the authorised person(s).
- 4 Proof of address (not older than 3 months).
- 5 Personal Information form for authorised signatory.
- 6 The above information needs to be couriered to the address below:

Courier
4th Floor 6 Simmonds Street
Marshalltown
Johannesburg
2001

Bank documents signed by the applicant not in the presence of one of our officers (mandatory)

The below section and any supporting documents must be completed, certified and stamped by one the following people or financial institution.

- Any foreign bank within a Financial Action Task Force (FATF) member country (FATF)
- A Standard Bank correspondent bank, if outside FATF territories
- A Commissioner of Oaths
- Lawyer or Notary Public
- Justice of the Peace
- Embassy, consulate or High Commission Office
- A member of the judiciary or senior civil servant

One of the above must certify the documents in English and include the following details on all the documents they certify:

- 1 Where the document that is being certified is a bank statement they must write "I confirm that this is a true and accurate copy of the original document that I have seen". Where the document being certified is proof of identity and has a photograph, the certifier must also write "I confirm that this is a true and accurate copy of the original document that I have seen and that the photograph bears a true likeness to the holder".
- 2 They must sign and date the document.
- 3 They must state their name and address in BLOCK CAPITALS and include their professional position or capacity, for example, lawyer.
- 4 They must state their contact details, for example, telephone number or email address (for use if there are any queries).
- 5 Your relationship with the certifier must be of a professional rather than personal nature.

Certifier's details - please give details of the person certifying your document.

Certifier's name	Profession
Address	
Telephone number	Email address

Section B - Personal Information		
First name	Surname	
Date (YYYY-MM-DD)		
Contact Details		
Contact method	Country or country code	Number
Contact method	Country or country code	Number
Email address		
Contact number (Authorised signatory)		
Of the above contacts methods, how would you prefer to be contacted?		
Preferred contact time	<input type="checkbox"/> Day	<input type="checkbox"/> Evening <input type="checkbox"/> Anytime
Identification		
Identification number	Issuing country	
Residence		
Nationality	Country of residence	
Country of birth	Country of citizenship	
Were you ever a South African resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have dual citizenship? <input type="checkbox"/> Yes <input type="checkbox"/> No
Residential address (Proof of address required)		
Street name	Building number	
Suburb	City	
Country	Postal code	
Domicile address (the place where you live most often – if different from your residential address)		
Street name	Building number	
Suburb	City	
Country	Postal code	
Since when have you lived at this address? (YYYY-MM-DD)		
Tax/VAT		
Are you an SA tax resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a VAT vendor? <input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes", provide your SA income tax number		If "Yes" provide your VAT registration number
Foreign Account Tax Compliance Act (FATCA)/Automatic Exchange of Information (AEOI)		
Tax residency		
Please indicate your place(s) of tax residence. ¹ If you are a tax resident in more than one jurisdiction, you must detail all jurisdictions and provide an associated Tax Identification Number ² (TIN) for each jurisdiction.		
Jurisdiction of Tax Residence	Tax Identification Number (TIN)	If no TIN available, enter Reason A, B or C from list below

¹ The criteria for tax residence vary from country to country. Generally, a person will be a tax resident in a jurisdiction if, under the laws of that jurisdiction (including tax treaties), he/she pays or should be paying tax in that jurisdiction by reason of, for example, domicile, residence or any other criteria of a similar nature and not only from sources in that jurisdiction. Please consult your relevant tax authority or a professional tax adviser if you are uncertain about your tax residency status. Alternatively, please consult the OECD website to determine your tax residence: <https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency/>. Standard Bank cannot provide tax advice.

² A TIN or functional equivalent is a unique reference that could consist of letters, numbers or a combination of letters and numbers issued by a tax jurisdiction to an individual for the purpose of collecting taxes (e.g. tax reference number in South Africa).

³ These examples may be subject to change and taxpayers should obtain external tax advice if uncertain about their TIN.

⁴ This may be subject to change and taxpayers should obtain external tax advice if uncertain about their TIN.

Reason A – The country/jurisdiction of residence does not issue TINs (for example, Bermuda, the British Virgin Islands, the Cayman Islands and the ³United Arab Emirates do not currently collect personal tax).

Reason B* – The accountholder is unable to obtain a TIN or equivalent number (please explain in the space below why you are unable to obtain a TIN).

Reason C – The country/jurisdiction of residence does not require the TIN to be disclosed (currently only valid for Australia).⁴)

*Please explain why you are unable to obtain a TIN if you selected **Reason B** above:

Declarations and signature

I acknowledge that Standard Bank has a mandatory duty to collect tax-related information about the accountholder and, where applicable, the ultimate beneficial owner(s). Under certain circumstances, Standard Bank may be obliged to share this information with the relevant tax authorities in accordance with applicable tax laws and regulations. Should the tax residence information of the accountholder or the ultimate beneficial owner(s) change, I will provide Standard Bank with an updated self-certification and declaration within 60 days from such change. I certify that I am the accountholder (or authorised to sign for the accountholder) of all the accounts relating to this self-certification. I declare that the information provided is, to the best of my knowledge, correct and complete.

Print name _____

Date (YYYY-MM-DD) _____

Client's signature _____

If you are signing on behalf of someone else, specify below in what capacity (e.g. as a legal guardian or custodian). If you are signing under a power of attorney, attach a certified copy of the power of attorney.

Capacity _____

VAT Declaration

We need to request the following declaration from non-resident clients in order to apply the VAT rate of 0%:

- 1 I, _____
(insert name of individual)
of: _____
(address)
do hereby declare that I, being the recipient of the services, am not nor is any other recipient of the services:
 - a resident of the Republic of South Africa; or
 - carrying on any enterprise or activity in the Republic of South Africa.
- 2 I further declare that neither I nor any other recipient of the services will be present in the Republic of South Africa at the time the services are rendered.
- 3 I warrant that all the information provided to the Bank is true, complete and accurate.
- 4 To the extent permitted by law, I indemnify the Bank against any loss or damage suffered by the Bank as a result of the Bank's reliance on any information given by me in connection with the services rendered.

Note: Should any of the abovementioned circumstances change or no longer apply to you or to any other recipient of the services, kindly notify the Standard Bank of South Africa Limited by telephone at **+27 10 249 0234** or by email at **NonResNewbusiness@standardbank.co.za**.

Signed at _____
(place)

on _____
(date)

for _____
(name of individual)

Signature _____
(who warrants that he/she is duly authorised to sign)

_____ Name

Accounts Required			
Rand Account	<input type="checkbox"/>	Rand	
Transactional Account			
<input type="checkbox"/>	MyMo Account	<input type="checkbox"/>	MyMo Plus Account
Pricing Option on Transactional account (Please refer to the pricing brochure before selecting the pricing option)			
<input type="checkbox"/>	Rebate	<input type="checkbox"/>	Pay-as-you-transact
<input type="checkbox"/>			Bundled
Savings and Investment account			
<input type="checkbox"/>	Fixed deposit Please specify period of fixed deposit. _____	<input type="checkbox"/>	Flexi Advantage
<input type="checkbox"/>	MoneyMarket Call	<input type="checkbox"/>	Marketlink
<input type="checkbox"/>			Notice Deposit Account Specify period eg 7 or 32 days _____
<input type="checkbox"/>			Puresave
Foreign Currency Account			
<input type="checkbox"/>	USD	<input type="checkbox"/>	GBP
<input type="checkbox"/>	EUR	<input type="checkbox"/>	Other
	(Please specify currency) _____		
Section C - Employment/Occupation			
Employed	<input type="checkbox"/>	Yes	<input type="checkbox"/>
		No	
	If you are unemployed, please give a reason(s)		
Employment status	Industry	Designation/Occupation	
Employment start date (YYYY-MM-DD)	Employer		
Address	Number	Suburb	
City	Country	Postal code	
Salary cycle (Select the applicable one)			
<input type="checkbox"/>	Not applicable	<input type="checkbox"/>	Daily
<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Fortnightly
<input type="checkbox"/>	Quarterly	<input type="checkbox"/>	Half-yearly
<input type="checkbox"/>	Annually	<input type="checkbox"/>	Once
Payslip date (YYYY-MM-DD)	Payment date (YYYY-MM-DD)		

Foreign Banking Details			
Bank name	Account number		
Bank address			
Do you have any accounts with any other financial institution in South Africa?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes please provide details			
Do you own property in South Africa?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the property rented out? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, where is it situated?			
If yes, please state the amount of rent earned (copy of rental agreement is needed)			
Are you a South African resident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, please state your country of citizenship
Were you ever a resident in South Africa?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, date of emigration (YYYY-MM-DD)
Have you applied to SARS (South African Revenue Services) to be regarded as a non-resident of South Africa. If yes, please provide the confirmation from SARS.			
Name of bank and branch in South Africa that attended to the exchange control formalities on your departure from South Africa			
Reserve bank reference number			
Source of Funds (Mandatory)			
South African law requires that you declare all sources of income.			
Source of funds	Amount		
Source of funds	Amount		
Source of funds	Amount		
Source of Wealth, Funds and Income			
(South African legislation requires that you declare all sources of income; if more than one, please refer to the addendum form 00172132).			
*Source of funds (the activity that generates the funds for a business or an occasional transaction, for example, funds generated from trading activities or an insurance pay-out)			
Amount			
Source of income (the regular income that may be expected from the client: eg. Profits or income generated from business activities)			
Source of wealth (the activities that have generated the total net worth of the client)			
Type of activity expected on the Account (for example, cash deposits, debit orders)			
Please advise the purpose of opening an account in South Africa			
Additional Information			
All additional documents that were not supplied on the above Mandatory sections must be attached in a separate annexure.			
Checklist (for office use only)			
<input type="checkbox"/> Application form	<input type="checkbox"/> Certified copy of passport	<input type="checkbox"/> Account holder record	<input type="checkbox"/> Exchange control letter
<input type="checkbox"/> Product Specific Terms and Conditions	<input type="checkbox"/> Fax and email indemnity	<input type="checkbox"/> Note pad BDS	<input type="checkbox"/> Proof of Address
Prominent Influential Persons (PIPs)			
Prominent Influential Persons (PIPs) are individuals entrusted with prominent public functions either domestically or by a foreign country. Examples are heads of state or heads of governments, important political party officials, military officials or senior executives of state-owned corporations. This term also includes immediate family members and close associates.			
Are you a public official in a position of authority?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you related to or associated with a public official in a position of authority?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
What is the nature of the relationship or association?	<input type="checkbox"/> Business partner	<input type="checkbox"/> Close associate	<input type="checkbox"/> Parent
	<input type="checkbox"/> Sibling	<input type="checkbox"/> Son/Daughter	<input type="checkbox"/> Spouse/Partner
Please provide full name and surname of relative or associate			

Section D - Authority for an authorised person to operate generally on the account

I (full names of account holder), _____, authorise

(insert full names and identity number of authorised person) _____

to operate on the account(s) selected in Section A on this document. I _____

understand and accept that there is risk in giving the above authority to the authorised person. Standard Bank, its agents and employees accept no liability for any loss suffered by you for giving the above authority. The authorised person is authorised to operate generally on the above account(s) including requesting and collecting of statements. They are not authorised to open any additional accounts in my name.

This authority will remain in full force and effect until cancelled in writing by me. Yes No
Should the account(s) be linked to the authorised person's card?

Signature of applicant _____ Date (YYYY-MM-DD) _____

Signature of authorised person _____ Date (YYYY-MM-DD) _____

Consent to check credit references by authorised person (for South African residents only)

I _____ (insert full name(s) of authorised person)

Identity number/registration number _____ and residential address _____

consent to you making enquiries about my credit record with any credit reference agency and any other party to confirm any or all of the information provided by me. I also consent to you giving credit reference agencies regular updates about the conduct of my accounts, including the failure to meet the agreed terms and conditions. I also agree that the credit reference agencies may make my records and details available to other credit grantors. I further consent to you carrying out identity and fraud prevention checks and sharing information through the South African Fraud Prevention Service, relating to this application.

Signature of authorised person _____ Date (YYYY-MM-DD) _____

Section E - Release and Indemnity: Facsimile transmission or email message

I request The Standard Bank of South Africa Limited ('the bank') to act on instructions I send to it by facsimile transmission or email message. Yes No

I acknowledge that it is not practical for the bank to find out the authenticity of all facsimile transmissions or email messages which claim to come from me. The bank has informed me that it is prepared to act on such facsimile transmissions or email messages which claim to come from me provided that it receives a release and indemnity.

I do hereby:

- 1 agree that all facsimile transmissions, email instructions, mandates, consents, commitments, resolutions, minutes of meetings and any other documents that claim to come from me will be seen to have been given by me in the form actually received by the bank (claimed facsimile transmission or email message) - which may, as a result of the malfunction of the equipment, the distortion of communication links and the like, be different to that intended or sent - and I will be bound by them.
- 2 waive any rights I may have or get against the bank arising directly or indirectly from any losses or damages which I may suffer because the bank acts on any facsimile transmissions or email instructions. I indemnify the bank in respect of any claims, demands or actions made against it or losses or damages suffered by it because it so acted.
- 3 agree that the bank is not to be held liable for errors or delays in transmissions, or the misinterpretation on receipt, or for any loss or damage from whatever cause as a result of the bank permitting this arrangement, excluding losses arising from the proven unlawful or fraudulent acts of the bank's employees.
- 4 agree to implement and keep to any procedures and/or restrictions imposed on me by the bank regarding the sending of facsimile or email instructions to the bank.
- 5 agree that the release and indemnity will not be affected by any failure by the bank to impose any or sufficient procedures or restrictions or to make sure that any, or all of them are kept to.
- 6 agree that the bank will not be obliged to act on any instructions and that it may at any time, on written notice sent to me, withdraw from the arrangements made in this document.
- 7 agree to hand the original document(s) about the underlying agreement for which payment is made and that are needed for the payment(s) made on our behalf, to the bank for endorsement as needed in terms of Exchange Control Regulations. We understand that the bank is required by the South African Reserve Bank ("SARB") to endorse such original documents as we do not have authority from the SARB to not present original documents for payment.

Signature of applicant _____ Date (YYYY-MM-DD) _____

Signature of authorised person _____ Date (YYYY-MM-DD) _____

Exchange Control Declaration

- 1 Any deposit originating from a non-resident source, including a local non-resident account, payment for goods imported by a local resident/business or any funds that would normally be transferable abroad in terms of South African Exchange Control Regulations.
- 2 All deposits other than direct bank transfers from abroad, and these should state the purpose of the funds, must be supported by documentary proof given by the depositor. In the case of payments for imports, original import documents, which must include an invoice, transport document as proof of shipment to South Africa and the prescribed SARS customs declaration bearing the MRN (Movement Reference Number) are needed.
- 3 All documents presented by the depositor for payments from resident sources will be stamped "Exchange Provided" by the accepting bank, and must be kept by the person or business making the payment for at least five years.
- 4 Deposits of South African bank notes to non-resident accounts is prohibited unless it can be established that the notes were acquired through the conversion of foreign currency by the account holder or introduced from outside the CMA.

Note that where transactions do not comply with exchange control requirements or are not supported by the required documents, the funds will either be refused or placed in a suspense account pending finalisation. Where finalisation cannot be reached within a reasonable time, the funds will be returned. If this is not possible for any reason, the funds will be placed in a blocked account and held to the order of the exchange control authorities.

Signature of applicant _____

Date (YYYY-MM-DD) _____

Declaration and Confirmation by Applicants

I declare to the best of my knowledge and belief that the details in this application are true and correct and that no information which may affect your decision has been withheld.

- 1 May we contact you using the details provided to us to tell you about other products and services:
 - offered by us, including special offers, upgrades and/or new products? Yes No
 - offered by subsidiaries of the Standard Bank Group? Yes No
 - offered by other companies? Yes No
- 2 May we, or a company contracted to us, contact you for research purposes? Yes No
- 3 I have read and agree to the general terms and conditions together with the terms and conditions for the account(s) I have chosen. Yes No

Signature of applicant _____

Date (YYYY-MM-DD) _____

Consent

Fraud (Mandatory)

I hereby give Standard Bank permission to carry out identity and fraud prevention checks on me and to share the information provided in this application with the South African Fraud Prevention Service.

Yes No

Data Protection

I agree and confirm that:

- Standard Bank Group may collect and process my personal information where lawful and reasonable, in order to provide me with products and services. This may include using my personal information for credit, fraud and compliance purposes.
- Standard Bank may share my personal information within the Standard Bank Group and/or with their third-party service providers, and these third parties may not be within the jurisdiction where the product and service is provided.

Standard Bank may process my Personal Information to carry out statistical and other analyses to identify potential markets and trends, evaluate and improve their business (this includes improving existing and developing new products and services).

Yes No

If I provide Standard Bank with Personal Information about or on behalf of another person (including, but not limited to, account signatories, shareholders, principal executive officers, trustees and beneficiaries), If yes, please tick the boxes below.

Yes No

I confirm that I am authorised to:

- a Provide their Personal Information:
- b consent on their behalf to the Processing of their Personal information; and
- c receive any privacy notices on their behalf.

Yes No

Yes No

Yes No

Signature

I acknowledge that some information on this form is needed in order for Standard Bank to comply with South African law. It is my responsibility to let Standard Bank know if any of the information on this form changes.

Customer signature _____

Date (YYYY-MM-DD) _____

Section F - Your Financial Services Provider

Name	The Standard Bank of South Africa Limited (SBSA)
FSB licence	11287
Street address	5 Simmonds Street, Johannesburg, 2001
Email address	information@standardbank.co.za
Postal address	PO Box 7725, Johannesburg, 2000
Telephone number	011 636 9111
Fax number	011 631 8580
FAIS Act registered	Sue Chetti
Compliance Officer name and contact details	011 547 1183 GroupFAISComplianceofficer@standardbank.co.za

Legal status of SBSA

- Company Registration Number 62/00738/06
- A public company established in 1962.
- A registered bank in terms of the Banks Act, 1990.
- A wholly owned subsidiary of Standard Bank Group Limited.
- (Insert name of area) is a business area of SBSA.

Professional Indemnity Insurance

We hold professional indemnity insurance.

Complaints

If you have a complaint, please contact our Customer Resolution Centre by telephone **0860 101 101**, by email on **ComplaintResolutionCentre@standardbank.co.za** or by fax on **011 636 8860**. A copy of our complaints handling process is available on request or can be viewed on **www.standardbank.co.za**.

FAIS Ombud

You can request assistance from the Ombud if you believe that your complaint has not been resolved satisfactorily by us within 6 weeks of lodging your complaint. You need to refer the dispute to the Ombud within 6 months of the issue remaining unresolved.

The details of the Ombud:

Street address:	Sussex Office Park Ground Floor, Block B 473 Lynnwood Road Cnr Lynnwood Road and Sussex Ave, Lynnwood 0081
Postal address	PO Box 74571, Lynnwood Ridge, 0040
Contact details	
Telephone	+27 (0)12 762 5000 / +27 (0)12 470 9080
Facsimile	+27 (0)867 641 422 / +27 (0)12 348 3447
E-mail address	info@faisombud.co.za
Website	www.faisombud.co.za

Conflicts of Interest and General Disclosures

We have shareholding in other companies, details of which can be supplied on request or can be viewed at **www.standardbank.co.za**. The Standard Bank Group has also entered into an agreement with the Liberty Group to distribute its products, and the profits that derive from the sale of them are shared between the Group entities.

We subscribe to the Group's FAIS Conflict of Interest Management Policy, which can be found on **www.standardbank.co.za**. SBSA is the product supplier for the products mentioned in this application form.

Our staff are salaried and may also be motivated through a variety of performance based incentives.

We accept full responsibility for the actions of our representatives (who are authorised by SBSA) when they render financial services to you. Some representatives may be working under supervision and/or an exemption.

Declaration by Customer

- No undertaking; warranties or guarantees have been provided by our representatives in respect of the product/s chosen by you.
- While we provide information on tax-related matters, we do not give tax advice. Please consult your tax adviser before entering into any transaction.
- My choice was made based on the factual information on the products provided to me, including the different features, benefits and pricing options, which enabled me to make an informed decision about the product/s suitable to my needs or the product was executed on my instruction.
- I was not asked nor forced to waive any of my rights in terms of the FAIS Act.
- All documents were completed before I signed them.
- That I have read and understand this notice and have been given a copy of this document.
- I undertake to provide all the required documentation within 3 months from date of my application, should I not meet the stipulated deadline my application will be considered invalid.

Signature of applicant _____

Date (YYYY-MM-DD) _____

Section G - Contact Details (Mandatory - Please complete your name and passport number)

Branch name

Account type Current account Investment PlusPlan/account type Saving Other

Account name Title Initials

Account Identity number or

Passport number

Contact Details (Bank official to complete)

Telephone number Cellphone number

Account Holder

Signatory action required Add Delete

Instruction Sign alone Any two to sign Both to sign jointly

Mandate Sign alone No rights Plus any other

**The signatory must sign in block
(Do not sign over the lines)**

Signature of applicants

Account Signatories

Signatory action required Add Delete

Surname Title Initials

Date of birth (YYYY-MM-DD)

Telephone number

Identity type Identity number

Instruction Sign alone Any two to sign Both to sign jointly

Mandate Sign alone No rights Plus any other

(Do not sign over the lines)

**Signature of authorised
person (if applicable)**

Standard Bank internal use New customer Amend existing customer information

BPID/CIF Number _____