

DORMANT ACCOUNT REACTIVATION FORM

SECTION B: CONTACT AND ADDRESS INFORMATION Mobile Number Telephone Number Email Address Section Lot Street Name Suburb / Town / Village District / Province MAILING ADDRESS PO BOX Pest Code Country Annual Gross Salary K SECTION C: EMPLOYMENT DETAILS Employment Status Not Employed Cocupation Industry Annual Gross Salary K SECTION D: POLITICALLY EXPOSED PERSONS (PEP) DETAILS Are you related to a PEP (e.g. a politician, their family members, and / or business associates)? If yes, tick the box and provide details Relationship to PEP Relationship to PEP Purpose of Account Source of Funds Salary / Wages Informal Income Business Income Investment Royalty / Dividends Savings Other Other Other								
Included sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Section A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Section A, B, C, D, E, and K only Complete Sections A, B, C, D, E, and K only Complete Section A, B, C, D, E, and K only Complete Section A, B, C, D, E, and K only Complete Section A, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and K only Complete Section B, C, D, E, and C, D,	WHEN TO US	E THIS FORM						
Joint Account Number					Please ensure that you pr	ovide accurate details and		
Complete Sections A, B, C, D, E, and K only Complete all sections PRIMARY ACCOUNT HOLDER INFORMATION SECTION A: BASIC PERSONAL DETAILS Title			<u> </u>	_				
PRIMARY ACCOUNT HOLDER INFORMATION SECTION A: BASIC PERSONAL DETAILS Title	Individual Ac	count Number	☐ Joint Accou	nt Number				
PRIMARY ACCOUNT HOLDER INFORMATION SECTION A: BASIC PERSONAL DETAILS Title								
SECTION A: BASIC PERSONAL DETAILS Title	Complete Secti	ions A, B, C, D, E, and	K only Complete all se	ections				
First Name	PRIMARY AC	COUNT HOLDER	INFORMATION			_		
First Name	SECTION A: F	RASIC DEDSONAL	DETAILS					
Middle Name Last								
Date of Birth	\circ	○ Mrs ○ Ms	\circ	er () Male () Fen				
SECTION B: CONTACT AND ADDRESS INFORMATION Mobile Number Telephone Number Email Address RESIDENTIAL ADDRESS Section Lot Street Name Suburb / Town / Village District / Province MAILING ADDRESS PO BOX Post Code Country MAILING ADDRESS PO BOX Post Code Country MAILING ADDRESS PO BOX Post Code Country Annual Gross Salary K SECTION C: EMPLOYMENT DETAILS Employment Status Not Employed SECTION D: POLITICALLY EXPOSED PERSONS (PEP) DETAILS Are you related to a PEP (e.g. a politician, their family members, and / or business associates]? If yes, tick the box and provide details Name of PEP Position of PEP Relationship to PEP SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SOURCE of Funds Investment	First Name		Middle Name	Middle Name Last Name				
SECTION B: CONTACT AND ADDRESS INFORMATION Mobile Number Telephone Number Email Address RESIDENTIAL ADDRESS Section Lot Street Name Suburb / Town / Village District / Province MAILING ADDRESS PO BOX Post Code Country MAILING ADDRESS PO BOX Post Code Country MAILING ADDRESS PO BOX Post Code Country Annual Gross Salary K SECTION C: EMPLOYMENT DETAILS Employment Status Not Employed SECTION D: POLITICALLY EXPOSED PERSONS (PEP) DETAILS Are you related to a PEP (e.g. a politician, their family members, and / or business associates]? If yes, tick the box and provide details Name of PEP Position of PEP Relationship to PEP SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS SOURCE of Funds Investment								
SECTION B: CONTACT AND ADDRESS INFORMATION Mobile Number	Date of Birth		Place of Birth	Place of Birth		Nationality		
RESIDENTIAL ADDRESS Section Lot Street Name	DD / I	MM / YYYY						
RESIDENTIAL ADDRESS Section Lot Street Name	SECTION D. C	CONTACT AND A	DDESS INFORMATIO	ANI				
RESIDENTIAL ADDRESS Section Lot Street Name Suburb / Town / Village District / Province MAILING ADDRESS PO Box								
Section Lot Street Name Suburb / Town / Village District / Province	Mobile Number		Telephone Number	Email Address	<u>; </u>			
Section Lot Street Name Suburb / Town / Village District / Province								
MAILING ADDRESS PO Box	RESIDENTIAL AD	DDRESS						
PO Box	Section Lot	Street Name		Suburb / Town / Village	District / Provin	ce		
PO Box								
PO Box								
Resident Status Resident Non-Resident Permanent US Resident Visited US in the last 3 years SECTION C: EMPLOYMENT DETAILS Employment Status Not Employed Occupation Industry Annual Gross Salary SECTION D: POLITICALLY EXPOSED PERSONS (PEP) DETAILS Are you related to a PEP (e.g. a politician, their family members, and / or business associates)? If yes, tick the box and provide details Name of PEP Relationship to PEP SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS Purpose of Account Source of Funds Salary / Wages Informal Income Savings Salary / Wages Informal Income Business Income Investment Royalty / Dividends Savings Other Other COMPLETE THIS SECTION IF JOINT ACCOUNT SECTION F: BASIC PERSONAL DETAILS Title Mr Mrs Ms Miss Cender Male Female First Name Middle Name Last Name	MAILING ADDRE	ESS						
SECTION C: EMPLOYMENT DETAILS Employment Status Occupation Industry Annual Gross Salary Employment Status Onto Employed Industry Employed Industry	PO Box	Post Code	Country					
SECTION C: EMPLOYMENT DETAILS Employment Status Occupation Industry Annual Gross Salary Employment Status Onto Employed Industry Employed Industry								
SECTION C: EMPLOYMENT DETAILS Employment Status Occupation Industry Annual Gross Salary Employment Status Onto Employed Industry Employed Industry								
Employment Status Employed Occupation Industry Annual Gross Salary K	Resident Status	Resident Nor	n-Resident Permanent	US Resident Visited U	JS in the last 3 years			
Employment Status Employed Occupation Industry Annual Gross Salary K			_	_				
Employment Status	SECTION C: E	MPLOYMENT DE	TAILS					
SECTION D: POLITICALLY EXPOSED PERSONS (PEP) DETAILS Are you related to a PEP (e.g. a politician, their family members, and / or business associates)?		○ Employed	Occupation	Industry	An	nual Gross Salary		
Are you related to a PEP (e.g. a politician, their family members, and / or business associates)?		_			K			
Are you related to a PEP (e.g. a politician, their family members, and / or business associates)? If yes, tick the box and provide details Name of PEP								
Name of PEP	SECTION D: P	POLITICALLY EXP	OSED PERSONS (PEP) DETAILS				
SECTION E: PURPOSE OF ACCOUNT AND SOURCE OF FUNDS Purpose of Account Source of Funds Salary / Wages Informal Income Business Income Business Income Business Income Investment Royalty / Dividends Savings Other Other Other JOINT ACCOUNT HOLDER INFORMATION SECTION F: BASIC PERSONAL DETAILS Title Mr Mrs Ms Miss Gender Male Female First Name Middle Name Last Name Middle Name Last Name Middle Name Last Name SECTION F: BASIC PERSONAL DETAILS	Are you related to	o a PEP (e.g. a politicia	n, their family members, ar	d / or business associates)?	? \prod If yes, tick the box a	and provide details		
Purpose of Account Salary / Wages Informal Income Savings Salary / Wages Informal Income Business Income Investment Royalty / Dividends Investment Royalty / Dividends Savings Other JOINT ACCOUNT HOLDER INFORMATION SECTION F: BASIC PERSONAL DETAILS Title Mr Mrs Ms Miss Gender Male Female First Name Middle Name Last Name	Name of PEP		Position of PEP	Re	lationship to PEP	tionship to PEP		
Purpose of Account Salary / Wages Informal Income Savings Salary / Wages Informal Income Business Income Investment Royalty / Dividends Investment Royalty / Dividends Savings Other JOINT ACCOUNT HOLDER INFORMATION SECTION F: BASIC PERSONAL DETAILS Title Mr Mrs Ms Miss Gender Male Female First Name Middle Name Last Name								
Purpose of Account Salary / Wages Informal Income Savings Salary / Wages Informal Income Business Income Investment Royalty / Dividends Investment Royalty / Dividends Savings Other JOINT ACCOUNT HOLDER INFORMATION SECTION F: BASIC PERSONAL DETAILS Title Mr Mrs Ms Miss Gender Male Female First Name Middle Name Last Name								
Salary / Wages	SECTION E: P	URPOSE OF ACC	OUNT AND SOURCE	OF FUNDS				
Salary / Wages								
Investment								
OtherOtherCOMPLETE THIS SECTION IF JOINT ACCOUNT SECTION F: BASIC PERSONAL DETAILS Title	Salary / Wage		_					
JOINT ACCOUNT HOLDER INFORMATION SECTION F: BASIC PERSONAL DETAILS Title	Investment	Royalty / Divid	dends	Investment Ro	oyalty / Dividends	avings		
SECTION F: BASIC PERSONAL DETAILS Title Mr Mrs Ms Miss Gender Female First Name Last Name	Other			Other				
SECTION F: BASIC PERSONAL DETAILS Title	JOINT ACCOL	UNT HOLDER INF	ORMATION		COMPLETE THIS SEC	CTION IF JOINT ACCOUNT		
Title Mr Mrs Ms Miss Gender Male Female First Name Last Name								
First Name Middle Name Last Name	SECTION F: B	SASIC PERSONAL	DETAILS					
	Title	○ Mrs ○ Ms	Miss Gend	er O Male O Fen	nale			
Date of Birth Place of Birth Nationality	First Name		Middle Name		Last Name			
Date of Birth Nationality								
	Date of Birth		Place of Birth		Nationality			

DD / MM / YYYY



DORMANT ACCOUNT REACTIVATION FORM

SECTION G: CONTACT AND ADDRESS INFORMATION												
Mobile Number		Telephone Numb	er	Email Address]						
RESIDENTIAL AD	DDRESS			_								
Section Lot	Street Name		Suburb /	Town / Village	District / Pro	ovince						
MAILING ADDRE	SS				1							
PO Box	Post Code	Country										
		🖂 –										
Resident Status	Resident Nor	n-Resident 💹 Pe	rmanent US Resider	nt U Visited US in th	ne last 3 years							
SECTION H: E	MPLOYMENT DE	TAILS										
	○ Employed	Occupation		Industry		Annual Gross Salary						
Employment Status	Not Employed					K						
SECTION I: POLITICALLY EXPOSED PERSONS (PEP) DETAILS												
Are you related to a PEP (e.g. a politician, their family members, and / or business associates)? 🔲 If yes, tick the box and provide details												
Name of PEP		Position	of PEP	Relation	ship to PEP							
	CCEPTABLE FOR											
We need to verify identification doc		ccepted identifica	tion documents liste	ed in the subsequent to	able. Please pr	ovide the originals of two (2)						
	(2) photographic ident	tification										
	(1) photographic iden											
·	.,.		.,	c identification of your		auda maitti mar tuura (2) aa maralata d						
If you are unable to to provide any of the identification documents listed above, you may still open an account by submitting two (2) completed Referee Forms with a passport sized photo attached, subject to certain conditions. Please speak to our Bank Staff for assistance.												
If you are a stude	nt, housewife, unemp	loyed, employed i	n the informal secto	r, or with an annual inc		00 or less, please provide: one						
	identification or one	(1) one Referee F	orm with your pass	sport sized photo.								
PHOTOGRAPHIC	CIDENTIFICATION	NON-PHOTOGR	ON-PHOTOGRAPHIC IDENTIFICATION		R	EFEREE FORM						
National Iden Drivers License			Birth Certificate Confirmation Letter from			Please complete the Referee Form (available						
	Drivers LicenseEmployment ID			Other Bank StatementTIN Certificate		from any Customer Service						
Passport		Marriage Certificate Sala al Cartificate (5) years		· Clinic Book		Officer) and attach a recent						
Superannuation ID Student ID		 School Certificate (5 years validity) 		· Court Document		passport-size photograph.						
· Work Permit			Jtility Bill									
SECTION K: CUSTOMER STATEMENT AND DECLARATION												
	tions (T&Cs) are availe				565.4	DOD						
						nt to BSP processing and to meet BSP's obligations in						
sharing my personal information (1) with credit agencies, BSP Group entities, regulators, and service providers, (2) to meet BSP's obligations in respect of sanctions, anti-money laundering, counter-terrorism financing and proceeds of crime; and with the United States Internal Revenue												
Service regarding	the Foreign Account	Tax Compliance A	Act (FATCA).									
Tax Compliance Act Consent. I consent to BSP disclosing my information under FATCA.												
\square I/We request BSP to reactivate the above dormant account(s) and I/We certify that I/we are the owners of the account(s).												
Primary Accoun	t Holder's Signature	Joi	Joint Account Holder's Signature									
						DD / MM / YYYY						
BANK USE ONLY												
I certify that the	above details have b	een fully complete	ed and verified. The c	ustomer's image, sign	nature, and ID i	n the system have been						
confirmed Due	diligence has been po	erformed in accord	dance with Bank's D	olicy								

Checking Officer

Date

DD / MM / YYYY

Actioning Officer

CIF Number