

Bank use only	
Branch	
Account No.	
CID No	

### Know Your Customer-KYC

(Requirement in terms of Financial Transaction Reporting Act No. 6 of 2006)

Mandatory to present acceptable documents as a proof of identity.

Individual KYC form should be completed by all joint holders.

If the account is a minor saving, the guardian's KYC details should be completed as minor's KYC detail

#### A . Basic Information of the Individual Customer.

1 Name in Full																												
2 Permanent Address																												
3 Correspondence Address																												
4 Identification Number & Type of Identity Card											6 Date of Birth	D D		M M		Y Y Y Y												
<input type="checkbox"/> National Identity Card											7 Civil Status	Married/Unmarried																
<input type="checkbox"/> Passport											8 Nationality & Citizenship																	
<input type="checkbox"/> Driving Licence											a. Sri Lankan	<input type="checkbox"/>		Resident	<input type="checkbox"/>													
<input type="checkbox"/> Other - Pl. Specify														Non-resident	<input type="checkbox"/>													
5 Contact Number and E-mail Address											b. Sri Lankan with dual citizenship	<input type="checkbox"/>																
Fixed											c. Foreign National with dual citizenship in Sri Lanka	<input type="checkbox"/>																
Mobile											d. Foreign National resident in or employed in Sri Lanka	<input type="checkbox"/>																
E-mail											e. Other - Pl. Specify																	

9 Occupation / Profession																													
10 Sector Code of Occupation											11 Customer Segment																		
<input type="checkbox"/> Commercial	<input type="checkbox"/> Tourism												<input type="checkbox"/> Tourism	<input type="checkbox"/> Wholesale		<input type="checkbox"/> Retail Trade													
<input type="checkbox"/> Financial	<input type="checkbox"/> Consumption												<input type="checkbox"/> Agriculture, Forestry & Fishing	<input type="checkbox"/> Financial Services															
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Services												<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Arts, Entertainment & Recreation															
<input type="checkbox"/> Industrial	<input type="checkbox"/> Others												<input type="checkbox"/> Transportation & Storage	<input type="checkbox"/> Education															
<input type="checkbox"/> Housing & Property Development													<input type="checkbox"/> Construction	<input type="checkbox"/> Health Care, Social Services & Support Services															
													<input type="checkbox"/> Infrastructure Development	<input type="checkbox"/> Information Technology & Communication Services															
													<input type="checkbox"/> Professional, Scientific & Technical Activities	<input type="checkbox"/> Consumption															

12 Name & Address of the employer / Business																												
13 Mother's maiden Name																												

14 Purpose of the account opening & usages																												
<input type="checkbox"/> Business Transactions	<input type="checkbox"/> Professional/ Employment Income		<input type="checkbox"/> Family Inward Remittance				<input type="checkbox"/> Upkeep of Family/Personal																					
<input type="checkbox"/> Utility bills payments	<input type="checkbox"/> Savings		<input type="checkbox"/> Loan Repayment				<input type="checkbox"/> Investment Purpose																					
<input type="checkbox"/> Share Transactions	<input type="checkbox"/> Donation		<input type="checkbox"/> Other - Pl.Specify																									

15 Sources of funds ( Expected source and nature of credits into the account)																												
<input type="checkbox"/> Salary	<input type="checkbox"/> Sales & Business Turnover		<input type="checkbox"/> Profit Income				<input type="checkbox"/> Commission Income				<input type="checkbox"/> Investment Proceed																	
<input type="checkbox"/> Gifts	<input type="checkbox"/> Family Remittance		<input type="checkbox"/> Sales of Property/Assets				<input type="checkbox"/> Membership Contribution				<input type="checkbox"/> Export Proceed																	
<input type="checkbox"/> Contract Proceed	<input type="checkbox"/> Donation/Charities		<input type="checkbox"/> Rent Income				<input type="checkbox"/> Other - Pl.Specify																					

16 Anticipated Transaction Volumes																												
Expected / Usual average volumes of deposits into the account in rupees per month																												
<input type="checkbox"/> Less than Rs.100,000	<input type="checkbox"/> Rs.100,001 - 500,000				<input type="checkbox"/> Rs.500,001 - 1,000,000																							
<input type="checkbox"/> Rs.1,000,001 - 5,000,000	<input type="checkbox"/> Rs.5,000,001- 10,000,000				<input type="checkbox"/> Above the 10,000,001																							

17 Expected Transaction Mode

Cash                       Electronic Fund Transfer                       Cheque                       All mode of forms (cash, cheque, fund transfer)  
 Other- Pls Specify

18 Delivery Channel

Face-to-Face     Payment received through known or associated third parties  
 Non-Face-to-Face     Payment received through unknown or un-associated third parties  
 Face-to-Face & Non - Face-to-Face

19 Applicant's ownership of wealth and estimated value (approx.)

<input type="checkbox"/> Residential Property	-	Rs. <input type="text"/>	<input type="checkbox"/> Financial Assets	-	Rs. <input type="text"/>
<input type="checkbox"/> Business	-	Rs. <input type="text"/>	<input type="checkbox"/> Investment	-	Rs. <input type="text"/>
<input type="checkbox"/> Motor Vehicles	-	Rs. <input type="text"/>	<input type="checkbox"/> Others (specify)	-	Rs. <input type="text"/>

20 Source of wealth (Wealth generated from)

Business Ownership/Income                       Investment                       Profession/Employment                       Inheritance                       As gift  
 Others (specify)

I confirm that the given information is true & correct and, if required I hereby consent the bank to access the Department of Registrations of Persons (DRP) system to validate my NIC information and agree to debit my/our Savings Account for the cost of DRP charges.

.....  
Customer Signature

.....  
Date

Office Use only	
<b>B . Mandatory Check.</b>	
<b>Tick <input checked="" type="checkbox"/> the Appropriate Boxes</b>	
1	Identity Verification (Name, Date of Birth, Nationality, Occupation)
<input type="checkbox"/> National Identity <input type="checkbox"/> Passport <input type="checkbox"/> Driving Licence <input type="checkbox"/> Birth Certificate for Minor <input type="checkbox"/> Other Documents <input type="text"/>	
2	Address Verification
<input type="checkbox"/> National Identity <input type="checkbox"/> Utility Bills <input type="checkbox"/> Lease Agreement <input type="checkbox"/> Driving Licence <input type="checkbox"/> Bank Statement <input type="checkbox"/> Receipt of Income tax <input type="checkbox"/> Other Documents (specify) <input type="text"/>	
3	Does the client or any member of his immediate family is a Politically Exposed Person * (PEP) ? <span style="float: right;">Yes/No</span>
If " Yes " -please specify <input style="width: 100%;" type="text"/> Please forward relevant formats along with supporting documents to Head Office for approval.	
4	Does the client appear on the known suspected Terrorist List / UN Sanction List or any other alert list ? <span style="float: right;">Yes/No</span>
(Confirmation should be done through screening the AML system) If " Yes " -please specify <input style="width: 100%;" type="text"/> If "yes", the account shall not be opened & inform to the Compliance Officer	
5	More information about the customer ( if necessary )
6	Risk Categorization <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
1 Risk categorization should be done according to the result of the AML system 2 If the account is a minor saving, the guardian's risk category should be considered as the minor's risk category.  ..... Authorized Officer Signature & Service No. <span style="float: right;">Date</span>	
<b>Note</b> <i>All photocopies obtained for the above 1 &amp; 2 must be certified by the bank Officer as "True Copy".</i>	
*"Politically Exposed Person" means an individual who is entrusted with prominent public functions either domestically or by a foreign country, or in an International Organization and includes a Head of a State or a Government, a Politician, a Senior Government Officer, a Judicial Officer or Military Officer, a Senior Executive of a State Owned Corporation, Government or Autonomous Body but does not include a middle rank or junior rank individuals;	