HSBC Bank Middle East Limited Standard Personal Information Form





Standard Persona	l Informat	ion Form		
HSBC Bahrain Account number	-			
SECTION 1: UNDERSTANDING YOU This form aims to collect information part of our Customer Due Diligence	n with regards to yo			retivities and other relevant details as
Full name (as set out on passport)				
Former names or alias (if any)				
ID No.:			Country of birth:	
Passport No.:	Country of issue	:	Issue date:	Expiry date:
Residency status in Bahrain	Please select:	Resident	☐ Non-Resident	Residence visa under process
Nationality/Citizenship	Additional count	ry of citizenship 1:		
Former nationality (if any)				
Country(ies) where you are obliged to pay tax				
Contact Details - Current R	esidential Addi	race		
Flat no. / Villa no.:				
Building name / Street name:				
Area				
City				
Country				
Residing at this address since (date) If residing at the stated address for less than 3 years, please provide your previous residence details:				
Current mobile number:				eg. Country code_Area Code_Number
Current home telephone number:				eg. Country code_Area Code_Number
Current office telephone number:				eg. Country code_Area Code_Number
Email Address				

Customer Signature: Date:

Date://

Employment Details	
Employer's name:	
Employer's address:	
Nature of employer's business:	
Job title / role:	
Number/value of shares or share options held in employer:	
Monthly salary:	
Occupation:	
Other executive or management positions you have held:	
Country(ies) where this source of wealth was/is attained:	
Self Employed	
Name, address, and nature of business:	
Main business activity:	
Ownership interest in business:	
Number of employees, locations and estimated annual revenues	
Significant government contracts or licenses	
Name of the bank where the Customer's business account is held	
Country(ies) where this source of wealth was/is attained:	
Main purpose of the account with HSBC Bahrain:	
☐ Receipt of Monthly Salary/Income ☐ Deposits/S	Savings Mortgage/Home loan Payment
Others, please specify:	
2. Do you hold any account(s) with HSBC outside Bahrain?	
Yes, (please mention the countries and Account numbers below	/) \qquad \qqqq \qqq \qqqq \qqq \qqqq \qqq \qqqq \qqq \qqqq \qqq \qqqq \qqq \qqqq \qqq \qqqq \qqq \qqqq \qqqqq \qqqq
Country Name	Account Number
3. Please confirm if you in your individual capacity are opening or indirectly related or connected to a Politically Exposed Person senior official in the executive, legislative, administrative, military or agency, a member of a ruling royal family, whether or not elected, a government-owned or government-funded corporation, institution of Exposed Person and any Close Associate or relative of a Politically	on? (Please note: A Politically Exposed Person is defined as a rjudicial branches of a government, the head of a government a senior official of a major political party, or a senior executive of a por charity. This also includes the immediate family of a Politically
Yes,	No
Customer Signature:	Date:

	-cash tra									
		Source of F	unds		ed amount ils (BHD)	Frequency of Transactions		f Remitter/l ancial Instit		City/ Country
	Salary tra	ansfer from emplo	yer							
	Bonus /	Commission								
	Transfer bank(s)	from my account(s	s) with another							
	Transfer from third party(ies)									
	Cheque bank	from my own acco	ount with anoth	er						
	Cheque	from third party(ies	s) from another	bank						
	Others: F	Please specify:								
. In th	ne next 1	2 months, wha	it are your ex	spected cash t	ransactions?					
			,	Amou	nt Details	Frequency of		So	urce	
	Cash de	posits		(1	BHD)	Transactions				
	Self	party								
		thdrawals								
				unt funding, v	vhat is the to	tal estimated v	alue of fu	nds to be de	eposited int	o your
		the next 12 mo								
					Label Commence			0	. D. l	Disco
ote: To	otal relat					account within t ding term deposi				
HD _				e details of w ks inside and		be currently se	ending or	expecting t	o send fund	s to usin
Ove		amam account						lationship	Nam	
Ove		Total	Method	Purpose	Frequency	Beneficiary (D C'	
Ove	SBC's B	Total Value of Transactions	Method of Transfer	Purpose	Frequency	Beneficiary (the person/er receiving mo	ntity	with eneficiary	Benefic Financial I	iary's
Ove our H	SBC's B	Total Value of	of	Purpose	Frequency	the person/er	ntity	with		iary's
Ove our H	SBC's B	Total Value of Transactions	of	Purpose	Frequency	the person/er	ntity	with		iary's
Ove	SBC's B	Total Value of Transactions	of	Purpose	Frequency	the person/er	ntity	with		iary's
Ove	SBC's B	Total Value of Transactions	of	Purpose	Frequency	the person/er	ntity	with		iary's
Ove	SBC's B	Total Value of Transactions	of	Purpose	Frequency	the person/er	ntity	with		iary's
Ove our H	SBC's B	Total Value of Transactions	of	Purpose	Frequency	the person/er	ntity	with		iary's

Banker's Draft/Cashier's Order	Value (BHD)	Frequency	Purpose	Beneficia	ry (i.e. the person to be paid)
SECTION 2: CONNECTED PART	IFS				
Please list the connected/associa		avo control or i	nfluence over veu	account: (Plass	so use continuation shoot if
equired)					
☐ Supplementary cardholder ☐ Power of Attorney ☐ Gu	ardian/Parent				
Contributor to your source of NBHD 3,780 per month where this				(e.g. a spouse	or parent) that provides more than
			Connected Pa	arty 1	Connected Party 2
Full Name				, .	30111100100 T art y 2
Former names or alias (if any)					
Date of birth					
Country of birth					
Country of residence					
Residential address					
nesidential address					
Email address					
Telephone Number					
Nationality/Citizenship (including all r	nationalities/ citizen	ships held)			
Relationship to you					
Section 3: Any additional inforr	nation/details:				
Declaration of Account holder I	n case of face to	face meeting	<u>!</u>		
any information I have provided as HSBC, I agree to notify HSBC imn	s part of, or supple nediately of this.	ementary to, thi Lacknowledge a	s form changes at a and agree that my b	all during the co panking relations	ccurate and complete. To the extensurse of my banking relationship with the Kingdom of are available from time- to-time on
Pustomor Signaturo			D	0.	
Customer Signature:			Dat	e	

IMPORTANT INFORMATION

A. The supporting documents required along with this form are:

- 1) Passport
- 2) Residence Visa page (non GCC national only)
- 3) Local ID with Smart card printout (GCC Local ID for GCC nationals)
- 4) Proof of address: Please provide any one of the documents in the table below, depending on your employment and/or circumstances.

Please also carry the originals of all the above mentioned documents.

All customers	Updated Bahraini Smart card with residential address or
	Utility Bill dated within the last four months or
	 Landline phone / Internet bills dated within the last four mon[†]hs or
	 Current valid tenancy contract or Contracts must be verified by the local Authorities, the following link is the Bahrain's E-Government portal having more information about the process Link
	Bank statements, or credit/debit card statements dated within the last four months (or annual bank statements) if they state the full residential address
Salaried Individuals	Salary transfer letter or salary certificate or employer letter dated within the last four months confirming the employer PO Box and full physical address
Sole Trade or Business owner	 Valid trade license of their business entity owned by the individual with the PO box & full physical address or
	Utility bills dated within the last four months of the business entity owned by the individual or
	 Current valid tenancy contract of the business entity owned by the individual Contracts must be verified by the local Authorities, the following link is the Bahrain's E-Government portal having more information about the process Link
Student	Letter from the university confirming their enrolment status and university address
Other including not employed and retired	 Letter from sponsor (Husband/ Wife/ Father/ Mother/ Brother/ Sister/ Daughter/ Son) confirming residential address AND the sponsor's proof of address as per other categories listed above

5) Proof of source of funds: Please provide any **one** of the options listed in the table below:

Salaried	Salary transfer letter or salary certificate or employer letter dated with the last four months or
	Copy of last 3 months bank account statements of the business
Sole Trade or Business	Valid trade license of their business entity owned by the individual
owner	Copy of last 3 months bank account statement
Pensioner / Retired	Annual pension statement, pension pay slips dated within the last four months
In case of cash deposit	Proof of source of cash
Student	Letter from University with the course end date
	 Where the contributions are made to a student account equal or more than BHD 28,000, the contributor's details (connected party) such as full name, date of birth and residential address must be obtained
Non employed	Proof of source of funds from the sponsor or contributor.

- A. In the case of Joint Accounts, a separate KYC form should be completed for each Joint Account holder.
- B. In the case of Child account, a separate KYC form should be completed for the Child and the Parent/Guardian.
- **C.** For Unclaimed / Dormant account activation any outstanding unpaid charges on the account will be debited automatically once the account is activated.

For Office Use Only:								
10.0.0000000000000000000000000000000000								
No. 44 hard ask assilted	Periodic Review							
New to bank onboarding	Face to face	Phone						
Is the Customer a Vulnerable Person or subject to another special c If yes, please select the category:	rase? Yes No							
Benefit or Social Welfare claimants								
☐ Individuals in care homes/sheltered accommodation/refuge								
☐ Students								
Minors	☐ Minors							
Individuals who lack the capacity to manage their own affairs								
Economic migrants /Refugees/Asylum seekers								
Customer's Market sector:								
Has the customer been linked in the Global Customer Directory (GC	CD): Yes No							
Conducted by:								
Name:	Designation:							
Signature:	Date:							