



CLIENT INSTRUCTIONS

Due to International and local legislative requirements, the South African Revenue Service (“SARS”) requires FNB to collect and report certain information about a client’s tax obligations and requirements. If you are required to pay tax or are tax resident outside of South Africa, FNB is legally obliged to pass on the information to SARS. Whether you are a resident for any tax purposes in another country will depend on the laws of that foreign country.

1. Please ensure that all fields are completed.
2. If you were born in the United States of America or hold an American citizenship or nationality, an IRS Form W-9 must be completed in addition to this form (found on the IRS website, www.irs.gov) and you must provide your United States of America Tax Identification Number (TIN). Should you claim to not be a U.S. Person and provide an IRS Form W-8, a declaration of loss of citizenship / nationality must be attached thereto.
3. FNB will not give tax advice, if you have any questions about this form or defining your tax residency status, please speak to your tax advisor or local tax authority. You can also find out more at the OECD automatic exchange of information portal: www.oecd.org/tax/transparency/automaticexchangeofinformation.htm.
4. You may decline the request to provide the information, however, should the requested information not be provided, we advise that we will be required to report the non-compliant status of your account to SARS and your account may be subject to penalties for non-compliance and/or be frozen.
5. If the account holder/owner of the account is a minor, or a person under curatorship or an unrehabilitated insolvent, then this document must be still be completed for the account of the minor, person under curatorship or insolvent and it must be signed by the parent/legal guardian, curator or trustee of the account holder.

A. CLIENT DETAILS

Title:	Firstname:
Surname:	Date of Birth:
Country of Birth:	Town/City of Birth:
Citizenship:	
Nationality:	ID Number:
Mobile Number:	Telephone Number Including Code:
Email Address:	
Physical Address:	
Country:	Postal/Zip Code:
If Applicable:	
Passport Number:	Country of Issue:
Are you a permanent resident of South Africa?	Yes <input type="checkbox"/> No <input type="checkbox"/>
What country are you a permanent resident of?	

Are you required or registered to file a tax return or pay taxes in South Africa, or are you a resident for the purposes of any tax imposed by South Africa? Yes No

If Yes, please provide your South African tax number if available:

Are you required or registered to file a tax return in a country outside of South Africa, or are you resident for the purposes of any tax imposed by a country outside of South Africa? Yes No

If Yes, please indicate all jurisdictions in which you are registered for tax, obliged to pay tax, tax resident and/or required to submit a tax return:

Country of Issue	Tax Identification Number	TIN (1) Not Issued	TIN (2) Not Present

TIN 1 Where the jurisdiction indicated does not provide, or has not yet provided a TIN or a unique identification for purposes of tax.

TIN 2 Where the TIN is not available or known at the time of request, but the jurisdiction has issued one.

B. DECLARATION AND ACCEPTANCE

By signing this form, I declare that:

1. I/We confirm that all information and declarations provided by me in this form and all supporting documentation in connection with this form are true, correct and accurate in every respect and I / We undertake to inform FNB of any changes thereto, within 30 days, that may impact my legal status as a Client of FNB.
2. I confirm that FNB has not given me any advice in respect of the tax, legal, accounting, regulatory and/or financial consequences in respect of completing this self-certification.
3. I have read, understood and agree to be bound by the relevant and latest terms and conditions available on www.fnb.co.za
4. I have read and understood the portion relating to the processing of my personal information in the terms and conditions. (Kindly refer to our Privacy Policy located on www.fnb.co.za for more information on our privacy practices.)
5. I hereby confirm that I hold no other residencies for tax purposes other than those disclosed above in this form and will inform FNB in writing of any change of this status within 30 (thirty) days of the change of the disclosed status.
6. I hereby indemnify FNB against any liability for any loss or damage suffered by me as a result of inaccurate or incomplete information contained herein.

Completed in my capacity as (Select one):

Account holder: Parent/Guardian/Curator:

Signature:

Name and Surname: Signed at: Date:
