

INDIVIDUAL CUSTOMER APPLICATION FORM (ICAF)



Please select your new account location/s

<input type="checkbox"/>	NCBCM JA:	
<input type="checkbox"/>	NCBCM KY:	
<input type="checkbox"/>	NCB KY:	
<input type="checkbox"/>	NCBCM BDS:	
<input type="checkbox"/>	NCBMB TT:	

<input type="checkbox"/> New Account	<input type="checkbox"/> Updating Account Information	Branch: <input type="text"/>
Opening/ Updating Date: <input type="text"/>		Wealth Manager: <input type="text"/>

Please print all information in BLOCK letters. Please fill out the form COMPLETELY. Kindly insert N/A where applicable.

First	Middle	Last	Account Authority
1			<input type="checkbox"/> State Relationship:
Joint Accounts With			
1			
2			
3			
4			

SECTION 1: CLIENT INFORMATION

Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Other	Date of Birth: <input type="text"/>	
First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>
Maiden Name (If Applicable): <input type="text"/>	Alias: <input type="text"/>	Occupation: <input type="text"/>
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	
Country of Birth: <input type="text"/>	Place of Birth: <input type="text"/>	Nationality: <input type="text"/>
Are you a citizen of any other country? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, provide details: <input type="text"/> TIN/SSN# <input type="text"/>		

SECTION 2: CONTACT & IDENTIFICATION

Telephone Contact Numbers

Mobile: <input type="text"/>	Home: <input type="text"/>	Work: <input type="text"/>	Other: <input type="text"/>
Email Address: <input type="text"/>			
Tax Identification Number (TIN, TRN, SSN, etc.): <input type="text"/>			Country of Issue: <input type="text"/>
ID Type: <input type="checkbox"/> Driver's Licence** <input type="checkbox"/> Passport* <input type="checkbox"/> Voter's ID <input type="checkbox"/> National ID Card <input type="checkbox"/> Other	<input type="text"/>		
<i>*Mandatory for Cayman and Barbados Clients</i>			
<i>** Driver's Licenses must be accompanied by another form of ID for NCBMBTT</i>			
ID Number: <input type="text"/>	ID Issue Date: <input type="text"/>	ID Expiry Date: <input type="text"/>	
Country of Issued (ID): <input type="text"/>			
Tax Exemption Letter: <input type="checkbox"/> Yes <input type="checkbox"/> No			

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SECTION 2: RESIDENCY AND EMPLOYMENT

Current Home Address:		Years in residence:	
Previous Home Address:		Years in residence:	
Mailing Address:		<input type="checkbox"/> Same as Home Address of Primary Holder	

CORRESPONDENCE DELIVERY METHOD (SELECT ONE) ☐ Email ☐ Send to Mailing Address ☐ Hold

CURRENT EMPLOYMENT INFORMATION

Employer/Business Name:		Telephone No.:	
Employer's Address:			
Position:		Years Employed:	
Industry of Employment:			
If Self Employed State Nature of Business/ Principal Activity:			

PREVIOUS EMPLOYMENT INFORMATION

Employer/Business Name:		Telephone No.:	
Employer's Address:			
Position Held:		Years Employed:	
Industry of Employment:			
Purpose of Opening Account:			
Reason for Opening Account (Non-Resident Client):			

ANNUAL INCOME - IN USD EQUIVALENT

☐ Less than US \$6,500 ☐ US\$6500 – US\$20,000 ☐ US\$20,001 – US\$33,500 ☐ Over US \$33,500

POLITICAL EXPOSURE DECLARATION* (PLEASE SEE BELOW FOR THE DEFINITION OF A PEP)

Are you a PEP? ☐ Yes ☐ No Are you the family member of a PEP? ☐ Yes ☐ No

If Yes, please state NAME of family member _____ and RELATION _____

Are you the associate of a PEP? ☐ Yes ☐ No Please see below for the definition of a politically exposed person (PEP).

If Yes, please state NAME _____

*The Financial Action Task Force (FATF) defines Politically Exposed Persons (PEP) as: individuals who are or have been entrusted with prominent public functions in a foreign country. Examples: Heads of State or of government, senior politicians, senior government or executive council of government, judicial, military officials, senior executives of state owned corporations, important politically party officials, ambassadors, ambassadors' attachés. Business relationships with family members or close associates of PEPs involve reputational risks similar to those with PEP themselves.

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SECTION 3: GENERAL ACCOUNT GOVERNANCE

EMERGENCY CONTACT

Full Name:		Telephone No.:		Relationship:	
Date Of Birth:	(DD/MM/YY)	Country of Birth:			

OTHER PERSON WITH BENEFICIAL INTEREST (NOT AN ACCOUNT HOLDER)

Full Name:		Telephone No.:		Relationship:	
Date Of Birth:	(DD/MM/YY)	Country of Birth:			
Full Name:		Telephone No.:		Relationship:	
Date Of Birth:	(DD/MM/YY)	Country of Birth:			

Beneficial owner refers to the natural person(s) who ultimately owns or controls a customer and/or the natural person on whose behalf a transaction is being conducted. It also includes those persons who exercise ultimate effective control over a legal person or arrangement such as companies/trust etc.

SOURCE OF FUNDS *Origin of funds expected to be deposited to the account*

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SOURCE OF WEALTH *The origin of the client's entire body of wealth) Example: Inheritance, Employment, Ownership of a Business*

<input type="checkbox"/> Salary/Wages/Savings	<input type="checkbox"/> Investment/Capital Gains	<input type="checkbox"/> Family/Inheritance	<input type="checkbox"/> Other (Describe)
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Indicate Your Estimated Net Worth \$:

(Net worth is the value of your total assets minus your total debt)

RISK TOLERANCE ☐ Conservative (low risk) ☐ Moderate (medium risk) ☐ Aggressive (high risk)

Conservative: Cautious, having a risk-averse investment strategy which has preservation of capital as a high priority.

Moderate: Willing to accept some risk for a potential higher rate of return.

Aggressive: An investment strategy characterized by a willingness to accept above-average risk in pursuit of above-average return.

INVESTMENT SERVICE REQUIRED ☐ Investment Advisory ☐ Discretionary Management ☐ Execution Only ☐ Custody

Investment Advisory - (Client must be contacted before execution of any trade or transaction)

Execution Only - (Client does not require investment advice)

Custody - (No discretion to trade, assets are for safe-keeping and reporting only)

Discretionary Management - (Client grants full decision-making authority to the Portfolio Manager regarding the purchase or sale of investments without the need to consult the client)

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INVESTMENT HORIZON ☐ 1 – 6 Months ☐ 6 Months – 1 Year ☐ 1 – 5 Years ☐ Over 5 Years

ACCOUNT TYPE ☐ Savings ☐ Term Deposit ☐ Loan ☐ Investment ☐ Fixed Deposit

MAIN ACCOUNT CURRENCY ☐ JMD ☐ BBD ☐ USD ☐ KYD ☐ TTD ☐ OTHER

INITIAL INVESTMENT Amount: \$ ☐ JMD ☐ USD ☐ BBD ☐ KYD ☐ TTD

TYPE OF LODGEMENT ☐ Cash ☐ Cheque ☐ Electronic Transfer ☐ Internal A/C Transfer ☐ Other:

ANTICIPATED ANNUAL TURNOVER Amount: \$ ☐ JMD ☐ USD ☐ BBD ☐ KYD ☐ TTD

ESTIMATED FREQUENCY & VOLUME OF DEPOSITS & WITHDRAWALS ☐ Daily ☐ Quarterly ☐ Monthly ☐ Annually

Deposits: #
Withdrawals: #

Amount: \$
Amount: \$

SPECIFIC INVESTMENT OBJECTIVES

☐ Home Ownership ☐ Pension/Retirement ☐ Growth ☐ Income ☐ Capital Preservation ☐ Other:

INVESTMENT EXPERIENCE ☐ None ☐ Limited ☐ Good ☐ Extensive

AFFILIATES

Are you affiliated with or employed by a stock exchange or member firm of an exchange or a securities broker-dealer?

☐ Yes ☐ No

(If “yes”, you must attach a letter from your employer approving the establishment of your account when submitting this application.)

Are you a director/officer of NCB Merchant Bank (T & T) Limited?

☐ Yes ☐ No

Are you a relative (spouse, parent, sibling, child) of a Director/Officer of NCB Merchant Bank (T & T) Limited?

☐ Yes ☐ No

Are you a person who holds 10% or more of any class of shares of NCBMBTT?

☐ Yes ☐ No

Are you a controlling or significant shareholder of NCBMBTT?

☐ Yes ☐ No

If yes to any of the above, please provide details:

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DIRECTORS

Are you a director, 10% and more shareholder or policy-making officer of a publicly held company?

☐ Yes ☐ No

If "yes", state all company name(s)

and trading symbol(s)

Are you the holder of a beneficial interest in a casino or operate a casino account? ☐ Yes ☐ No

If "yes", state all company name(s)

Are you involved in internet gambling? ☐ Yes ☐ No

If "yes", state all company name(s)

REFERRAL SOURCE

☐ Staff ☐ Customer ☐ Social Media ☐ Advert ☐ Website ☐ Other:

POWER OF ATTORNEY

Does any other person have a Power of Attorney over this account? ☐ Yes ☐ No

If Yes – Provide Copy of registered document and Name of Appointed Attorney

FOR NCBCM JAMAICA CLIENTS ONLY

REFERENCE INFORMATION

(Eligible persons are: NCBJ or another bank staff, NCB account holder for at least 3 years, Justice of the Peace, Minister of Religion, Doctor, Employer, workers of Government Ministries, Jamaica Defence Force member, Police Officer). See appendix for additional list for references and requirements

WHO ARE YOU? ☐ NCB Staff ☐ Existing NCBCM Account Holder

A/C #

☐ Not a NCB Staff or Existing NCBCM Account Holder

FIRST REFEREE (NON NCB STAFF/NON NCBCM ACCOUNT HOLDER ONLY)

Full Name:

Telephone No.

Mailing Address:

Occupation:

SECOND REFEREE (NON NCB STAFF/NON NCBCM ACCOUNT HOLDER ONLY)

Full Name:

Telephone No.

Mailing Address:

Occupation:

NCBCM ONLINE BANKING SERVICES

NCBCM Online will automatically link all investment account(s) to your NCB Jamaica Internet Banking profile.

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ACCOUNT CLASSIFICATION

☐

Private Client

Individuals and small businesses. Reasonable care regarding advice on suitability and understanding of risk are the minimum basic protections afforded under the regulations.

☐

Professional Client

A public authority, Securities Investment Business Intermediary, High Net Worth Individual (Assets \geq \$4M), Closed-ended funds, Sophisticated Clients who exhibit sound knowledge and experience in business and financial matters and a Private Client that has been re-classified as a professional client under regulation 12(2). Note that the protection afforded under the regulatory regime is lower than that offered to a private client.

☐

Market Counterparty

Experienced professional with full understanding of the market works and the risks and rewards involved. A government, central bank or other national monetary authority, state investment body or public debt management body, supranational whose members are countries or central banks and a professional client where classified as a market counterparty under the provisions of Regulation 12

I understand and agree to the terms and definitions outlined in the selected classification

.....
Primary Account Holder Name and Signature

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PLEASE SIGN IN THE SPACES PROVIDED BELOW

Individual and Company Declaration

I/We hereby certify, declare and confirm that:

1. The information given by me in this Application is true and correct.
2. I/We have read and fully understand and agree to each of the terms and conditions contained in the respective agreement pertaining to the account(s) in respect of which I/We am submitting this Application (the "Account/s").
3. ☐ NCB Capital Markets Limited, ☐ NCBCM (Cayman) Limited, ☐ NCBCM (Barbados) Limited, ☐ NCB Merchant Bank (Trinidad and Tobago) Limited collectively or individually referred to as "NCB", is authorized to deal with me/our and each joint holder or authorized signatory on the Account(s) ("Authorized Person") to accept all orders for purchases and sales and all instructions given verbally or in writing by me, him or her without further inquiry as to my, his or her authority; to receive any funds, securities or other property for the Account(s); to honour written instructions from each Authorized Person to deliver either in bearer form, in street certificates, in any names or in any other manner any funds, securities or other property held for the account.
4. I/We are not engaged in Money Laundering, Drug Trafficking, Fraud, Identity Theft or any other money laundering, criminal activities and I/we are aware that I/ we are required by the Account terms and conditions to deposit only good items to the Account and to refrain from using the Account for money laundering, criminal activities, specified offences or for furthering criminal purposes and conducts.
5. I/We have not assumed the identity of any other person and the funds/deposits are beneficially owned by myself/us and no one else.
6. I/We hereby consent and agree that NCB is entitled to at any time and with such notice to me/us as may be required by law:
 - disclose this application, any information contained in it, other related confidential information regarding me/us and current and future transactions on the Account to law enforcement agencies, regulatory authorities, credit bureaus, other financial institutions, or regulated persons as may be required to comply with legal or regulatory requirements, execute activities in relation to the Account(s) or otherwise as deemed necessary or appropriate by NCB and I/we waive my/our rights of confidentiality in that regard;
 - disclose information relating to me/us (including, but not limited to, information set out in this Application) to affiliates of NCB and NCB's third party service providers, where NCB, in its sole discretion, deems it necessary and/or appropriate to do so in providing me/us with accurate and up to date services provided by NCB or its affiliates or for marketing products and services provided by NCB or its affiliates and I/we waive my/our rights of confidentiality in that regard. I/we agree that NCB may use or share the information provided by me/us to NCB in this Application or otherwise in order to augment and update information currently held by it or its affiliates;
 - make enquiries about me/us and to the retention of this application and all documents tendered by me/us in support of this application to any third parties as NCB may deem necessary;
 - withhold the funds (or part thereof) standing to the credit of the Account(s) in accordance with the requirements of the Foreign Account Tax Compliance Act (the 'FATCA') or any other applicable legislation;
 - close the Account(s) (or terminate the obligations, as the case may be) and/or sell all the assets standing to the credit of the Account(s), where such Account(s) produce (or could produce) withholdable payments (as defined in the FATCA); terminate its/their relationship with me/us and close all accounts in my/our name, where NCB considers it necessary to do so or, otherwise, in compliance with NCB's obligations under any applicable law or regulation.

NAME:

SIGNATURE:

DATE:

NCB reserves the right to reject any application. The grounds for rejection will be communicated to the applicant. NCB will at its sole discretion close any account suspected to be operated for the purpose of laundering money, or supporting any illegitimate enterprises or which fails to provide mandatory information requested within a timely manner or falsifies mandatory information or whose continued operations compromises the values of the Company and the rules and regulations governing our business.

Date Opened:

NCB Representative:

Checked by:

Approved by:

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APPENDIX

Individual KYC:

- ☐ Certified copy of valid passport
- ☐ Certified copy of current utility bill within the last 3 months
- ☐ Financial Reference Letter with bank for at least 3 years
- ☐ Professional Reference Letter relationship known for 2 years
- ☐ Self Certification of Residency Form

Source of Wealth

- ☐ **Earned Income**
 - Proof of salary, employment contracts, affidavits from past employers with bank statements showing deposits, income tax records and bank statement showing deposits over time.
- ☐ **Investment Proceeds – bank statement and documentation of sale of the investment**
 - Documentation showing that the initial investment proceeds had been legally obtained
 - Documentation showing the investor owned the investment
 - Receipts showing the sale of the investment proceeds
- ☐ **Sale of Property**
 - Purchase contracts of the property, title to the property showing ownership, and tax receipts paid on the property
- ☐ **Loans**
 - Property Loans: documentation of the mortgage or loan contract, the notation of the lien on the ownership documents, evidence of the value of the property compared to the value of the loan, and any relevant bank records.
 - Company Loans: investor must show that the company has enough assets to make the loan to the investor. If the investor is a shareholder, include financial audit reports, bank statements. The investor should submit a copy of the shareholder meeting minutes documenting and approving the loan.
- ☐ **Ownership in a Company**
 - Evidence of the lawful money used to buy interest in the company
- ☐ **Gifts/Inheritance**
 - The donor must show how they lawfully obtained the money to give the money to the investor (i.e. if earned income, please provide evidence per the above-mentioned).

Acceptable Forms of Identification

- Valid Driver's Licence
- Valid Passport
- Valid National Identification Card
- Valid Social Security Card
- Valid Residence Card
- Valid Voter Registration Card

Acceptable Forms of Identification

Where the Applicant is a non-resident the following shall apply:

- One of the forms of identification presented MUST BE a valid passport.
- The Applicant must supply two (2) letters of reference from the approved list of referees one of which must be from the Applicant's overseas bankers.
- The applicant must indicate the reason for opening the account
- For self-employed and non-resident applicants – two (2) referees/references including a Bank reference are also required