

Account Opening Agreement - Individuals



December 2022 (E)

The Saudi National Bank, P.O. Box 6038, Dubai, United Arab Emirates. Tel: +971 4 709 1111.
Foreign Branches of The Saudi National Bank Saudi Arabia in UAE are under the supervision and oversight of the Central Bank of U.A.E.

Bank use only:

Account No.

Base No.



Saudi National Bank

The Saudi National Bank UAE, hereinafter referred to as "SNB UAE" or "Bank".

Personal Information

Title: Mr. Mrs. Ms. Other:

First Name:

Middle Name:

Last Name:

Date of Birth: **Gender:** Male: Female: **Nationality:** **Country of Residence:**

Resident status:

UAE Resident: **Passport No:** **Expiry Date:**

Non- UAE Resident: **Emirates ID No:** **Expiry Date:**

Emirates ID is mandatory for all UAE Residents (UAE Nationals, GCC Nationals and Expats)

Marital Status: Single: Married: Other:

Education: Elementary: Under- Graduate: Graduate: Post-Graduate:

Occupational Information

Occupation: Employed: Self-Employed: Housewife/Student/Not working: Retired: Other:

Employment Position: Staff: Assistant Manager: Middle Manager: Senior Manager: Executive Manager: GM/ AVP/ VP/ Director: MD/ CEO/ President:

Monthly Income (In AED Only): **Source of Income:** Salary: Business: Rental: Investments/Deposits: Pension: Others:

Current Employer/ Business Details: **Years with Current Employer/ Business:**

Previous Employer/ Business details: **Years with Previous Employer/ Business:**

(if less than 5 years with current employer/business)

Address

(1) Office Address: **Company Name:** **Department:**

Office E-mail Address: **Tel. No:**

P.O. Box: **City:** **Country:** **Mobile No:**

Building Name/ Number/Floor: **Landmark/ Street/Area:**

(2) Residence Address (In UAE)

E-mail Address: **Tel. No:**

P.O. Box: **City:** **Country:** **Mobile No:**

Building Name/ Number/Floor: **Landmark/ Street/Area:**

(3) Permanent Address (In home country)

P.O. Box: **City:** **Country:** **Mobile No:**

Building Name/ Number/Floor: **Landmark/ Street/Area:**

Telephone No: **Street/Area:**

Correspondence Address: (please Tick) Office: Residence in UAE: Permanent Address in Home Country:

Account Information

Type of Account:

Current: Currency: Savings: Currency:
(AED/ USD/ GBP/ EURO/ SAR/ Others) (AED/ USD/ GBP/ EURO/ SAR/ Others)

Purpose of opening Account:

Salary credit: Remittance: Investments: Savings: Others:

Services Needed:

Chequebook: YES NO Debit Card: YES NO

I authorize SNB UAE to enquire and review my credit history held with UAE authorities including the Credit Bureau and Central Bank

Additional Information:

Currently banking with: Name of Bank(s):

CA/SA Deposit Investments Insurance Mortgage/loan Credit Card

I/We agree that the information given above is true and complete and that I/we have received the Bank's General Terms and Conditions for Account Opening and other banking products & services agreement, which I/we understand and expressly agree and accept to be bound by them whether set out in English and/or Arabic. I/We understand that these Bank's General Terms and Conditions shall apply to any personal account(s) that I/we may hold with the Bank from time to time. I/We acknowledge that I/we are bound by any variation made to the Bank's General Terms and Conditions from time to time and an updated copy is available on the Bank's website. I/We agree and accept to be bound by the Bank's Schedule of Fees and Charges as amended from time to time, and as available at the SNB UAE branches or on its website. I/We hereby confirm that the details provided in this form are true, complete and accurate in all respects. I/We hereby also warrant that no bankruptcy proceedings have been commenced against me/us. I/We acknowledge that the Banking Accounts and Services requested by me/us in this application will be made available to me/us at the absolute discretion of the Bank.

I/We hereby confirm that I/We have applied for Bank account opening in lieu of applying for a personal finance from the Bank. I/We hereby instruct to close all our Bank accounts in case the application for personal finance is rejected and/or loan is not disbursed or upon full & final settlement of all outstanding liabilities with the Bank We acknowledge that I am/we are responsible for destroying any unused cheques which were not returned by me/us to the Bank, at the time of account closing. (Applicable for customers opening Bank Account at the time of applying for personal finance products.)

Customer Signature

Please sign within the signature frame, without crossing the bold lines	 SIGNATURE CARD	For bank use only Approving officer/staff Name: Signature: Name: Signature:
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IDENTIFICATION	SPECIMEN SIGNATURE	DATE
Nationality: <input type="text"/> I.D. No.: <input type="text"/> Date Issued: <input type="text"/> Place Issued: <input type="text"/> Expiry Date: <input type="text"/> dd / mm / yy	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>	dd / mm / yy

Name:

Signature Requirements: Single Joint Others

Base Number:

Indemnity Letter on Facsimile, Telephone and Email Instruction(s)

I/We refer to my/our account(s) (the "Account(s)") maintained with you and the account opening agreement (the "Account(s) Documentation") between us governing the operation of the Account(s) and the "Money Transfer/Draft Issuance Application" (Fund Transfer Form) and I/we hereby instruct you as follows:

1. The Bank is hereby instructed and authorized by me/us to rely on, and act in accordance with, any instruction(s), authorization(s) and/or communication(s) whatsoever which may be given, or purported to be given, to the Bank through (i) telephone, or (ii) facsimile transmission or (iii) email (the "Electronic Communications") (provided that in case of email, a scanned copy of any original signed instructions, authorization or other communication are attached to the email) hereinafter together referred to as "Electronic Instructions" bearing or purporting to bear the signature(s) of the authorized signatories as identified in the Account Documentation (the "Authorized Signatories") without enquiry by you as to the authenticity or the genuineness of the signature(s) of the Authorized Signatories appearing on the Electronic Instructions and regardless of the circumstances prevailing at the time thereof.
2. I/We acknowledge that the Bank cannot detect from the inspection of the Electronic Instructions whether:
 - a. the original document from which a fax was created or the text or any other content of any email (including or any document or file attached to an email) forming part of the Electronic Instructions was forged, fabricated, unauthorized, wrongfully altered, and/or otherwise misused; or
 - b. any of the transmission details imprinted automatically on a fax, such as the name of sender, sender's fax number or the date or time of transmission, are false or fictitious; or
 - c. any of the transmission details included in a received email, such as the sender's name, the sender's email address, the date or time of sending, server details or the route through which the email travelled are false or fictitious;
 - d. the confirmation of voice instructions, and the instructions itself, received over telephone was forged, fabricated, unauthorized or compromised in any manner or the origin of the transmission through which the voice instructions travelled are false or fictitious
3. I/We understand, acknowledge and confirm my/our awareness of the numerous risks inherent and associated in conveying my/our instructions to you via Electronic Instructions (including but not limited to damages incurred as a result of interception of such electronic communications within the channels used by me/us and any risks associated with the Bank processing a forged/tampered/compromised/intercepted instruction in good faith) and hereby confirm my/our acceptance of all risks and unconditionally agree that all risks shall be fully borne by me/us and the Bank will not be liable for any losses or damages arising as a consequence of you acting (without being obliged to) on any instructions by me/us or purporting to be from me/us received by you via Electronic Instructions.
4. I/We hereby understand and acknowledge that the Bank is not obliged to act based on the Electronic Instructions and hereby indemnify the Bank and agree to keep the Bank, its Directors, Officers and Employees indemnified against all losses, claims, actions, proceedings, damages, costs and expenses whatsoever and howsoever incurred or sustained by the Bank as a result of the Bank's refusal to act based on the Electronic Instructions, without any notice to me/us. I/We fully, irrevocably and forever waive, release and discharge and relieve the Bank from any and all claims, obligations and rights whatsoever and howsoever arising, that I/ we may have against the Bank (if any) which arises or may arises a result of Bank's refusal to act based on the Electronic Instructions, without any notice to me/us.
5. I/We hereby undertake to deliver, within fifteen days, to the Bank the original documents of the copies which have been submitted through the Electronic Communications to the Bank, and I/We remain liable to the Bank whether or not I/We delivered such original documents.
6. I/We have read and understood the conditions governing the Fund Transfer Form and the Account Documentation and I/We undertake and agree to indemnify the Bank against all claims, losses, damages which may be incurred by the Bank in consequence of the Bank having agreed to transfer the funds based on the Electronic Instructions using non-bank format stationery. (e.g. personal or official letter head or any other written instruction instead of the Money Transfer/Draft Issuance Application).
7. I/we acknowledge that the provisions of this indemnity letter apply even if any Electronic Instructions were produced by, or contain, or have attached any forgery, lack of authority, wrongful alteration or other misuse of a document, text or file, or if any transmission details or information appearing on it are not genuine. This indemnity letter applies even if any Electronic Instructions were not in fact issued by me/us or with my/our authority.
8. I/We hereby indemnify the Bank and agree to keep the Bank, its Directors, Officers and Employees indemnified against all losses, claims, actions, proceedings, damages, costs and expenses whatsoever and howsoever incurred or sustained by the Bank as a result of the Bank's reliance on, and/or acting in accordance with, the Electronic Instructions. I/We fully, irrevocably and forever waive, release and discharge and relieve the Bank from any and all claims, obligations and rights whatsoever and howsoever arising, that I/we may have against the Bank (if any) which arises or may arises a result of Bank's reliance on, and/or acting in accordance with, the Electronic Instructions.
9. The terms of this indemnity letter shall remain in full force and effect unless and until you receive, and have had a reasonable time to act upon receiving, a notice of termination signed by me/us and I/we hereby confirm that any such termination will not release me/us from any liability hereunder in respect of any act performed by the Bank in accordance with and in reliance on the provisions of this indemnity letter prior to the expiry of such notice of termination or amendment.
10. The Terms and Conditions are made in bilingual Arabic and English texts however, if there is any contradiction between the Arabic and English text, the Arabic text shall prevail.
11. These terms shall be governed by and be subject to the laws of the United Arab Emirates.

Customer Name:

Base#:

Customer Signature:

Date:

(Day) (Month) (Year)

INDIVIDUAL TAX SELF CERTIFICATION - FATCA/CRS

Customer Name: Base#:

Place of Birth (As per passport) City: Country: Date of Birth:

Section A: Mandatory for all customers

1. Are you a tax resident of any country or countries for tax purpose outside of UAE? YES NO If "Yes", please specify which country or countries
2. Resident complete address:
3. Will you have Standing Instructions to transfer money to an account in United States? YES NO
4. Will you give power of attorney or signatory authority to a person with a US address? YES NO
5. Will this account have a hold mail or in care of address? YES NO
6. Did you obtain UAE tax residency under a residency by investment scheme? YES NO
7. Are you a resident in any other jurisdiction(s)? YES NO
8. In which jurisdiction(s) have you been subject to personal income tax during the previous calendar year?

Section B: Mandatory for all US Citizens and US tax residents

9. US Tax Identification Number (TIN)

Section C: Mandatory for all those born in the US, but claiming not to be a US citizen or a US resident for tax purpose

10. If you were born in the US, but never obtained US citizenship please provide a reason why:

11. If you were born in the US, but have either lost or relinquished your US citizenship please provide a copy of your Certificate of Loss of Nationality of the US or a explanation as to why you do not have such a Certificate

Section D: Mandatory for all NON US Citizens and NON US tax residents

	Country of residence for tax purposes	Tax Identification Number (TIN)	Reason if TIN is not available
12	<input type="text"/>	<input type="text"/>	<input type="text"/>
13	<input type="text"/>	<input type="text"/>	<input type="text"/>
14	<input type="text"/>	<input type="text"/>	<input type="text"/>

If a TIN is not available, provide reason A, B or C where appropriate

- **Reason A**-The country where the Account Holder is resident does not issue TINs to its residents
- **Reason B**-The Account Holder is otherwise unable to obtain a TIN (please explain why Account Holder is unable to obtain a TIN)
- **Reason C**-No TIN is required (Only if the country of residence for tax purposes entered does not require the TIN to be disclosed)

Reason B Explanation:

Customer Declaration

I hereby certify that the information I have provided in this form is true, correct and complete, I confirm that under no circumstances shall the Bank, its employees or its contractors be liable for any direct, indirect, incidental special punitive or consequential damages that may result in any way from their reliance on the information I have provided. I confirm that I have provided this Self Certification willingly without advice or help from the Bank. I understand that providing false information, withholding relevant information or responding in a misleading way, may result in rejection of my application or other appropriate action taken against me. I understand that the information supplied by me is subject to the terms and conditions governing the Account Holder's relationship with Saudi National Bank and its subsidiaries and affiliates where the Account Holder's financial relationship is maintained. I acknowledge that the information contained in this Form and information regarding the Account Holder and any Reportable Account(s) may be provided, directly or indirectly, to any relevant tax authority, including the tax authorities of the country in which this accounts) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be resident for tax purposes pursuant to bilateral or multilateral agreements between governments to exchange financial account information. I certify that I am the Account Holder (or an authorised to sign for the Account Holder) of all of the accounts) to which this Form relates. declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete. I undertake to submit a suitably updated Form within 30 days of any change in circumstances which affects the tax residency status of the Account Holder or where any information contained herein to become incorrect.

Customer Signature

Capacity of Signature

Account Holder

Power of Attorney

Guardian

Other (Please specify below)

Date of Signature