

Title:

Given Name/s: State full-name as on passport/drivers license

Alternative Name/s:

Surname:

Passport Number:

Passport Country:

Gender:

M **F**

Date Of Birth: DD/MM/YY

Refer to Tax Certification

Resident

Non-Resident

Home Phone:

Mobile Phone:

Work Phone:

Email:

Residential Address:

Town/Street

Suburb/Village/Country/Passcode

Tick Box if same as Mailing Address

Unemployed

Employed

Occupation

Employer

Self-Employed

Business Name

Nature/Type of Business

Individual Self-Certification

Account Holder Tax Residence/s

(Please note, US citizens are considered to be Tax Residents of the US.)

1.1 I Confirm

- I am only a Tax Resident in the Cook Islands (Go to 1.2)
- I have included in 1.3 all countries in which I am a Tax Resident (Other than the Cook Islands)

1.2 Cook Islands Tax Resident

What is your RMD number/s

1.3 Overseas Tax Residency

- 1** Country of TAX Residence - Attach necessary documents (Foreign tax confirmation)
- 2** Tax identification number (TIN) (Or country equivalent)
- 3** Reason code (If TIN not provided)
- 4** Explanation (Only if Reason is code "Z")

1.3 Overseas Tax Residency

- A - TIN Not issued (The Country does not issue TIN)
- B - TIN Not required (The Country does not require collection of TIN)
- C - TIN Applied for (I have applied for a TIN and will inform you upon receipt)
- Z - TIN Unobtainable (I am unable to obtain a TIN) Please provide an explanation.

Are you in one of the following categories?

- U.S Citizen/Resident
- U.S Power of attorney holder
- ex U.S Citizen/Resident
- Holder of a U.S address or "care of" address in the U.S
- Issuer of instruction to a U.S financial institution
- Green card holder
- Holder of a U.S telephone number

Source of Funds



BCI has responsibilities under the laws of the Cook Islands in relation to financial transactions. For this reason we require your responses to the following questions prior to the opening of an account or transacting on an account. We thank you for your understanding and co-operation with this requirement.

How will you use your account?

- Personal transactions Business transactions Savings & Investments Fundraiser or non for profit
- Other (Specify below)

What is the estimated value of credits or deposits into your account?

- Amount \$ Weekly Fortnightly Monthly Other (Specify)

Will you receive regular CASH deposits into your account?

- No Yes Amount \$ From what activity?
- Weekly Fortnightly Monthly Other (Please Specify)

Do you intend to receive international payments with your account?

- No Yes Amount \$ From what entity, activity and from what country?
- Weekly Fortnightly Monthly Other (Please Specify)

Do you intend to send international payments with your account?

- No Yes Amount \$ For what activity/purpose and to what country?
- Weekly Fortnightly Monthly Other (Please Specify)

Are you the Ultimate Principal* of the funds deposited into this account?

Yes/No

If NO - state owners full-name

** Ultimate Principal: For personal: the rightful owner of the funds, For business: 25% of the shareholding or more AND/OR you the person(s) who can control or influence the control of the funds on behalf of another entity.

COMPLETE THE SIGNING AUTHORITY TABLE WITH THE:

- Name of the Authorised Signatory
- Methods of the signing to be used e.g. alone, jointly, any two jointly, etc.
- Complete a Personal Details Form for each authorised signatory

Full Name	Method	Type of Access				Authority
		A	B	C	D	

If signed or initiated electronically in accordance with the method of signing (subject to the BCI General Terms and Conditions 20 January 2016 and Electronic Banking Terms and Conditions 01 August 2020) by the authorised signatories as listed in the signing Authority Table, the customer authorises the Bank to:

(A) INFORMATION: Disclose information to the relevant Authorised Signatories on any of the customer’s accounts;

(B) TRANSFER FUNDS: Where the function is available, transfer funds between any of the customer’s accounts;

(C) DEBIT/PROPERTY:

- (i) Debit to any of the customer’s accounts (whether or not in credit) all cheques or other payment orders (excluding fund transfers under (B) above);
- (ii) Act upon any request to deal with any property which the bank may at any time hold on behalf of the customer;

(D) OTHER SERVICES: Accept or act on any documents for loans, finance facilities or any other banking services not referred to in (B), or (C);

AUTHORITY: The customer authorises the Bank to accept or act on any new authority or amendment to an existing Authority if signed by all persons named as the customer.

Services - Electronic Banking and Cards

Individual Account

Joint Account

Client Number:

Product Type:

Select which account suits you best, you may pick more than one depending on your circumstances.

Electronic Banking Services:

Vaka Debit Mastercard

Nominate Account to Link to Card
Client Number/Product Type:

My Internet Banking (MyIB)

Nominate Account to Link to MyIB
Client Number/Product Type:

Select/Tick box that applies to you

<p>Peoples Saver Account - S1 <input checked="" type="checkbox"/></p> <p>This is a Pay as you go account, best for those wanting to spend less and save more.</p>	<p>My First Saver Account - S3 <input type="checkbox"/></p> <p>My First Saver is specifically designed for children up to 16 years of age. It rewards you and your child with competitive interest rates. After the 16th birthday, the S3 will switch to a 12 month term deposit if we don't receive any instructions from you</p>	<p>Everyday Account - S6 <input type="checkbox"/></p> <p>Our Everyday account is best used for those customers who make daily transactions while on the go.</p>
<p>Cheque Account - S7 <input type="checkbox"/></p> <p>Suited to individuals, small business, community groups and clubs, NGO's, associations and large businesses alike.</p>	<p>Golden Saver Account - S8 <input type="checkbox"/></p> <p>Designed for customers ages 55 years and over.</p>	<p>Bonus Saver Account - S9 <input checked="" type="checkbox"/></p> <p>Every month: ONE deposit + NO withdrawals = BONUS INTEREST</p>
<p>Term Deposit <input checked="" type="checkbox"/></p> <p>Watch your money grow and have a Term Deposit as your second source of income.</p>	<p>Passbook Account - S21 <input type="checkbox"/></p> <p>Designed for outer islands. This account has the basic necessities to provide a means of banking transactions, withdraws or deposits.</p>	<p>Our Community Saver - S15/16 <input type="checkbox"/></p> <p>Designed for non profit NGO's, service clubs and or charities.</p>

Declaration

If you agree to these terms and conditions sign off at the bottom of this page

- Authorise the signatory(ies) provide on this form to operate the accounts opened pursuant to this account application.
- Certify that the information contained in this application is true, correct and complete in every respect and is supplied by me/us with the intent that it may be relied upon by the Bank in opening of the account for me/us, and no information has been withheld which may affect the Bank's decision to proceed with this application.
- Acknowledge and agree that BCI may not necessarily accept transactions to the account until all due diligence requirements are satisfied and original signed documents are received by BCI.
- Agree to keep the Bank advised of any changes to the signatory(ies) name and address.
- Agree to and acknowledge receipt of a copy of the Service Fees & Charges which I/we confirm has been read and understood.
- Have been provided with, understand and accept the Bank of Cook Islands General Terms and Conditions 30 September 2022, and the Electronic Banking Terms and Conditions 1st August 2020.

Full Name	Signature	Date
Full Name	Signature	Date
Full Name	Signature	Date
Full Name	Signature	Date