

As required under the Financial Institutions (Customer Due Diligence) Rules, No. 01 of 2016 issued by the Financial Intelligence Unit of Central Bank of Sri Lanka in terms of Section 02 of the Financial Transactions Reporting Act, No 06 of 2006.

Please tick ($\sqrt{}$) appropriate boxes.

E-mail

Customer Due Diligence (CDD) Form – Individuals

For Office Use Only			
Client Code		Branch	
Introducer Code		Date	

Personal Details				
Full name : Mr/Mrs/Miss/Dr/Rev				
(Please underline the title)				
National Identity Card No (NIC)				
(Indicate valid Passport Number in the	he case	of Foreign Nationals)		
Date of Birth		D D M M Y Y Y Y		
Nationality	Sri Lankan			
		Resident		
		Non Resident - Country of Residence		
		Sri Lankan with Dual Citizenship - Country		
		Foreign National with dual citizenship / resident in or employed in Sri Lanka		
		Country		
		VISA Expiry Date		
Contact Information				
Permanent Address				
Mailing Address				
Maning Address				
Foreign address (If applicable)				
Contact No.	Res:	Mobile: Office: Fax:		

Employment Information					
Employment Status	Self employed Part-time emp		ployed	Retired	
	Full-time employed	Not currently	y employed	Others (Specify)	
Occupation/ Position held					
Name of the Employer					
Address of the Employer					
Nature of Business	Manufacturing		Import/ Export		
	Finance/Insurance Construction Retail		Wholesale		
			Communications		
			Business Services		
	Transport	Transport		Real Estate	
	Restaurants	Restaurants		Public Services	
	Hotel/ Boarding house	Hotel/ Boarding house		Gem and Jewelry	
	Casino / Gambling house / Night Clubs		Others (Specify)		
	Personal & Household Ser	Personal & Household Services			

Family Information	
Marital Status	Married Single Other
Name of Spouse	
Spouse's Occupation/ Position Held	
Spouse's Employer	
No. of Children (Dependent)	

Ather Information	Other Information					
	Desidential monenty	Financial assets				
Ownership of wealth (If property is on rent/ lease, please indicate)	Residential property					
on rent/ lease, please indicate)	Business premises	Investments				
	Motor Vehicles	Other (Specify)				
Source of Wealth:	Business/ Ownership	Inheritance				
Wealth generated from	Investments	Other (Specify)				
	Profession/ Employment					
Other connected Business/						
Professional activities and Interest						
Are you or any of your immediate						
family or closed associate is a	Yes No					
politically exposed person (PEP)?						
(Refer definition below)						
If yes please specify						
 FIU Definition As per these CDD Rules, "politically exposed person" means an individual who is entrusted with prominent public functions either domestically or by a foreign country, or in an international organization and includes a head of a State or a Government, a politician, a senior government officer, judicial officer or military officer, a senior executive of a State. Immediate Family Member - Includes the spouse, children and their spouses or partners, parents, siblings and their spouses and grandchildren and their spouses. 						
Expected Mode of Transactions						
Cash Cheque	Electronic Fund Transfer	Other (Please Specify)				
D						
Purpose for opening, maintaining a	nd the account usage					
Savings	Utility Bill Payment	Loan Repayment				
Investment Purpose	Business Transactions	Share Transactions				
Employment/ Professional Incon	he Family Remittance	— Other				
	•					
U I	ens / Resident in or Employed in Sri Lanka)					
(Please give the reason for opening th	ie account in Sri Lanka)					
Source of Funda Expected Source	and nature of credits into the account (As	anneonriata)				
Family Remittances C	Commission Income 🛛 🗌 Contract H	Proceeds Sale/ Business Turnover				
Investment Proceeds S	ale of property/assets Gift					
		Salary/ Profit Income				
		Salary/ Profit Income				
Others (Please specify)		Salary/ Profit Income				
Others (Please specify)		Salary/ Profit Income				
		Salary/ Profit Income				
Others (Please specify)		Salary/ Profit Income				
Average Monthly Income						
		Salary/ Profit Income				
Average Monthly Income	☐ 100,001 to 250,000	500,001 to 1,000,000				
Average Monthly Income						
Average Monthly Income Less than 50,000	☐ 100,001 to 250,000	500,001 to 1,000,000				
Average Monthly Income □ Less than 50,000 □ 50,001 to 100,000	☐ 100,001 to 250,000	 500,001 to 1,000,000 More than 1,000,000 				
Average Monthly Income □ Less than 50,000 □ 50,001 to 100,000 Anticipated Volumes : Expected/Us	□ 100,001 to 250,000 □ 250,001 to 500,000	 500,001 to 1,000,000 More than 1,000,000 account in Rupees per month 				
Average Monthly Income □ Less than 50,000 □ 50,001 to 100,000 Anticipated Volumes : Expected/Us	□ 100,001 to 250,000 □ 250,001 to 500,000	 500,001 to 1,000,000 More than 1,000,000 account in Rupees per month 				
Average Monthly Income Less than 50,000 50,001 to 100,000 Anticipated Volumes : Expected/Us * Expected / Usual average volumes of the second se	□ 100,001 to 250,000 □ 250,001 to 500,000 sual average volumes of deposits into the account in rupees per mo	 500,001 to 1,000,000 More than 1,000,000 				
Average Monthly Income □ Less than 50,000 □ 50,001 to 100,000 Anticipated Volumes : Expected/Use	□ 100,001 to 250,000 □ 250,001 to 500,000	 500,001 to 1,000,000 More than 1,000,000 account in Rupees per month 				
Average Monthly Income □ Less than 50,000 □ 50,001 to 100,000 Anticipated Volumes : Expected/Us * Expected / Usual average volumes of the second secon	□ 100,001 to 250,000 □ 250,001 to 500,000 sual average volumes of deposits into the account in rupees per mo	500,001 to 1,000,000 More than 1,000,000 account in Rupees per month				

Declaration	of the Customor					
	of the Customer					
I confirm	that the details given	above are true and correc	et.			
	······					
Si	ignature	Date				
Mandatory (Checks (For Office use (Only)				
			apported by one of the following	ng.		
	National Identity Card Passport (Unexpired) Driving License Marriage Certificate (Name Change)					
	Verification: Residentia - Mobile phone bills are		one of the following accepted	1 documents		
	ational Identity Card	Bank Statement	Letter	from a public authority		
🗌 Те	enancy agreement	Utility bill** (Spe	cify) Incom	ne Tax Receipt/ Assessment Notice		
	riving License	Employment Cont		(Specify)		
(Photoco	Passport Any Other Identification Document (Photocopies of the above documents should be obtained and certified by the Company Officer as 'Original Seen')					
		·	are allowed, not over 3 month			
		-		/ 1267) or any other Alert List:		
⊥ Y€ 4. If custon			v from their permanent addı	ress. Please mentioned the reason:		
	······································		, P			
Documents	Reviewed by	(Signature)	Emp No			
	Authorized by	(Signature)	Emp No			
System Entry						
In	put by	Checked by	Activated by	Scanned by		