

Account Number																				
Unique Customer ID Card																				
Date																				

The Manager
State Bank of India
_____ Branch

Dear Sir,
I/We am/are applying to open an account in your Branch. I/We furnish below personal and Account related information:

FIRST PART: ACCOUNT RELATED INFORMATION

1	Account Title (In Bangla)	
	(In English Block Letter)	

2.	a. For Fixed/Term Deposit						
	Amount in Fig Tk.		In word(Taka-				
	Term & Rate of Interest	Year		Month		Days	
		Issue date		Maturity date		ROI (%) pa	
	For renewal (Please Tick)	Renew Principal with Interest as per prevailing rate of Interest					
		Please renew Principal & credit Interest to mother (SB/CD) Account No.					
		Not applicable		Others			
	b. Savings Scheme/Special Scheme						
	Name of Savings Scheme				Tenure		
		Installment Frequency		Number of Installment			
		Installment Amount (Tk)		Word: Taka-			
		Maturity value (Tk.)		Word: Taka-			
	Special Scheme name						
		One time Deposit (Tk)		Word: Take			
		Payment Frequency		Total Installment payable			
		Payable per Installment (Tk)		Word : Taka-			
3.	Mode of Account Operation(Please Tick)	Singly/Any One	Jointly	Either or Survivors	Others (please specify)		

SECOND PART: INSTITUTION/COMPANY/FIRM RELATED INFORMATION

1	Name of Institution/Company/Firm (In Bangla)			
	(In English Block Letter)			
2	Trade License No.		Issue Date	
		Issuing Authority		

Account Number																				
Unique Customer ID Card																				
Date																				

3	Registration No.		Date	
	Registration authority		Country	
	Registered Address			

4	VAT Registration No/BIN.	
5	Tax ID No./TIN (if any)	
6	Business Place/Office Address	

7	Types of Institution/Company (Put Tick)				
		Sole proprietor	Partnership	Joint Venture	Private Ltd. Co
		Public Ltd. Co	Trust	NGO/NPO	Club/Society
		Educational Institute	Religious Organization	Others (mention details)	

8.	Type of Business(Please Tick)				
		Trading	Services	Manufacturing	Others (Please specify)
9.	Nature of Business (details)				
10.	Annual Turn-over				

11.	Information of Introducer (for applicable cases except Govt./Semi Govt/Autonomous/Listed Company in Stock market/ Joint stock listed Company/Registered Educational Institute etc) :	
i.	Name:	
ii.	A/C No.	Branch:
iii.	Mobile No.	Email:
iv.	Relation of customer with Introducer	
iv.	Signature with date:	v. Signature verified by SBI official with seal & date

Account Number																				
For Bank Use Only																				

THIRD PART: PERSONAL INFORMATION

(This form to be filed in by Account's operator/Proprietor of firm/Director of Ltd Company/each partners of partnership & JV firm/Trustee of trust/Director of NGO, NPO, Club, Society, School, Charity etc)

Account Holder's Photo

1	Account Holder's /Director Name (In Bangla)																			
	(In English Block Letter)																			
2. (a)	Date of Birth																			
		Day/Date			Month			Year												
(b)	Place of Birth	Place/District:						Country:												
3.	Father's Name																			
4.	Mother's Name																			
5.	Husband/Spouse's Name																			
6.	Nationality																			
7.	Gender(Please Tick)																			
		Male			Female			Trans Gender/Third Gender												
8.	Resident Status(Please Tick)																			
		Resident			Non-Resident															
9.	Profession (in details with Designation)																			
	Relation with Organization(if applicable)																			
	(1 st /2 nd /3 rd Applicant, Director, Partner, Proprietor, Trustee, Others, if any)																			
10.	Monthly Income																			
11.	Sources of Fund(details)																			
12.	Tax Identification Number (if any)																			
13	a. Present Address	Road/Village/ House:						Post Office:												
		P.S/Upazilla:						District:												
		Phone:						Mobile:												
		E mail :						Post Code/PIN:												
	b. Permanent Address	Road/Village/ House:						Post Office:												
		P.S/Upazilla:						District:												
		Post Code/PIN:						Country:												
		Phone/Mobile:						Email:												
14.	Identification Document																			
a.	National ID/NID No.																			
b.	Birth Registration/Certificate No.																			
c.	Passport No.											Expiry Date:								
15.	Information of Introducer (if applicable) :																			
i.	Name:																			
ii.	A/C No.											Branch:								
iii.	NID No.											Mobile No.								
iv.	Signature with date:											v. Signature verified by SBI official with seal & date								

(Signature)
Seal (if applicable)
Date:

16	If Account Holder is Minor (Guardian's information & declaration to be given):
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Declaration by Guardian:

I being the Legal Guardian of above referred Account holder hereby declare that Account Holder is(are) minor. His/her/their relevant information is/are provided in the attached Form. The Account will be operated by my signature as guardian/legal guardian until the Account Holder become adult or until my further declaration/notice. (Guardian means father, mother or any other legal guardian in absence of both). I furnish below my relevant information:

a.	Guardian's Name of Minor Account Holder						
	Date of Birth						
		Day/Date		Month		Year	
	Father's Name						
	Mother's Name						
	Husband/Spouse's Name						
	Nationality						
b.	Present Address	Road/Village/ House:				Post Office:	
		P.S/Upazilla:				District:	
		Phone:				Mobile:	
		E mail :				Post Code/PIN:	
	Permanent Address	Road/Village/ House:				Post Office:	
		P.S/Upazilla:				District:	
		Post Code/PIN:					
c.	Relation with Minor Account Holder						
d.	Identification document of Guardian/Legal Guardian						
i.	National ID/NID No.						
ii.	Passport No.					Expiry Date:	

Signature of Guardian/Legal Guardian		Signature of Account Holder	
Name :		Name	
Date:		Date :	

Nomination/guardianship Recording Bank's Official signature	
Name & Seal:	
Date :	

FOURTH PART: NOMINEE RELATED INFORMATION

(This form to be filled in by the Individual & owner of sole proprietorship/Partnership Firm)

Nominee's Photo
(to be attested by
A/C holder)

1. Nominee Related Information :

I/We hereby nominate the following person(s) to receive the fund of this Account after my/our death. I/We reserve the right to cancel/amend /replace this nomination at any time. I/We further declare that the Bank will make the payment according to my/our instruction and if the Bank pay the fund, it will be treated that the Bank has paid the deposit related all liabilities accordingly.

a.	Name of Nominee																			
	Date of Birth																			
		Day/Date				Month				Year										
	Father's Name																			
	Mother's Name																			
	Husband/Spouse's Name																			
	Nationality																			
b.	Present Address	Road/Village/ House:												Post Office:						
		P.S/Upazilla:												District:						
		Phone:												Mobile:						
		E mail :												Post Code/PIN:						
	Permanent Address	Road/Village/ House:												Post Office:						
		P.S/Upazilla:												District:						
		Post Code/PIN:																		
c..	Percentage																			
d.	Relation with Account Holder																			
e.	Identification document of Nominee																			
i.	National ID/NID No.																			
ii.	Birth Registration/Certificate No.																			
iii.	Passport No.													Expiry Date:						

(Nominee Related information should be kept with this part separately for each nominee in case of multiple nominee)

Signature of Nominee		Signature of Account Holder	
Name :		Name:	
Date:		Date :	

Nomination Recording Bank's Official signature	
Name & Seal:	
Date :	

1. Guardian of Minor Nominee(If any):

If nominee(s) is /are minor, information of Recipient of deposits after death of the Account Holder(s) keeping the nominee minor as per Bank Company Act 1991, Section 103(2)

a.	Guardian's Name of Minor Nominee						
	Date of Birth						
		Day/Date		Month		Year	
	Father's Name						
	Mother's Name						
	Husband/Spouse's Name						
	Nationality						
b.	Present Address	Road/Village/ House:				Post Office:	
		P.S/Upazilla:				District:	
		Phone:				Mobile:	
	E mail :				Post Code/PIN:		
	Permanent Address	Road/Village/ House:				Post Office:	
		P.S/Upazilla:				District:	
Post Code/PIN:							
c.	Relation with Minor Nominee						
d.	Identification document of Nominee's Guardian						
i.	National ID/NID No.						
ii.	Birth Registration/Certificate No.						
iii.	Passport No.						Expiry Date:

Signature of Guardian/Legal Guardian		Signature of Minor Nominee	
Name :		Name	
Date:		Date :	

Nomination/guardianship Recording Bank's Official signature
Name & Seal:
Date :

Declaration and Signature

I/We consciously declare that the information provided above is/are true/correct. I/We will provide you any other necessary information/documents in addition to the above as per requirement of the Bank. I/We also do hereby solemnly affirm that I/We have read all the rules/terms and conditions of the account with your Bank and will be bound to comply the same.

	1 st Applicant	2 nd Applicant	3 rd Applicant
Signature			
Name			
Designation			
Date:			

	4 th Applicant	Signature Verified
Signature		
Name		
Designation		Signature verifying Bank's Official sign(seal with name)
Date:		Date:

For Bank's Use only	
Remarks:	
Signature of A/C opening Officer(seal with Name)	Signature of Authorized Officer/ Branch Head (seal with Name)
Date:	Date:

Annexure: FATCA Compliance Checklist (To be kept with Account Opening Form (AOF))

	Particulars (Put Tick)	Yes	No
A.	Individual Customer		
i.	Are you a US Citizen (By Birth or Naturalization) ?		
ii.	Are you a US Resident?		
iii.	Do you hold a US Permanent Resident Card (Green Card)?		
iv.	Have you taken dual Citizenship (including one of the USA) ?		
v.	Do you have US resident Address or US correspondence Address or a US Telephone number or a US Tax ID?		
vi.	Is your Country of Birth in USA?		
vii.	Have you received or given Power of Attorney (POA) from or to the US person?		
viii.	Have you been in USA for 31 days during current calendar year?		
ix.	Have you been in USA for 183 days in last 3 years period including current year?		
	If you have answered YES to any of the above questions from Sl. No.(i. to vi), please provide your US Tax ID Number or Social Security Number		
a.	US TIN :		
b.	Social Security No.		
B.	Non Individual/ Corporate Customer (Put Tick)		
i.	Is the Registration/Incorporation Address in USA?		
ii.	Is the permanent address in USA?		
iii.	Is the Company having any US Telephone Number?		
iv.	Is the Company having any US Tax ID Number?		
v.	Have the Company received or given POA from or to the US person?		
vi.	Do you have any stakes in US partnership firm/companies/LLC/Trust or Estate/US Govt./State/District of Columbia (or any agent or instruments thereof)		
	If the answer is YES to any of the above questions from Sl. No.(i. to iv), please provide US Tax ID Number & Incorporation No. of the Company		
a.	US TIN of Company :		
	Company Incorporation No. Date		

Declaration: I/we solemnly declare that the above mentioned information is true, accurate and complete. I/We shall be bound to produce any information, document related to my/our Bank Account when required by any competent authority of USA in future. I/We undertake to notify the Bank within 30 calendar days if there is a change if any information which I/We have to provide to the Bank.

“Subject to applicable laws, I/We hereby consent for State Bank of India (SBI) to share my information with domestic or overseas regulators, or to the US Internal Revenue Service (IRS) or Tax Authorities where necessary to establish my tax liability in any jurisdiction. Where required by domestic or overseas regulators or tax authorities, I/We consent and agree that the Bank may withhold from my/our account(s) such amounts as may be required according to applicable laws, regulations and directive”.

	1st Applicant	2nd Applicant	3rd Applicant
Signature			
Name			
Date:			

(Seal may be used, if applicable)

For Bank's use only			
	Description (Put Tick)	Yes	No
i.	Documents are submitted as proof of the information provided by the Customer		
ii.	The Customer(s) is/are not US citizen & not related to FATCA compliance		
iii.	The Customer(s) is/are US citizen & related to FATCA compliance		
iv.	In case of Customer(s) is/are under US FATCA, whether approval has been taken & granted from Country Office to open the account		

Signature of Account Opening Officer with seal & date

Signature of Branch Head/Senior Official with seal & date

CHAPTER 10: SBS-2 & SBS-3 REPORTING FORM

(To be filled in English by the bank officials)

A. আমানতকারীর তথ্য (Depositor's Information)
(For SBS-2 Reporting)

হিসাব নম্বর (Account No.) :

ব্যক্তির ক্ষেত্রে (For Individual):

১। আমানতকারীর নাম (Depositor's Name) :

(in Block Letter) :

Sector Code: (See page 100 of Guidelines for SBS-1.2 & 3 Returns)									
Type of Deposit Code: (See page 101 of Guidelines for SBS-1.2 & 3 Returns)									

২। পেশা (Profession) :

৩। হিসাবের ধরন (Type of Account) :

প্রতিষ্ঠানের ক্ষেত্রে (For Institution/Office/Company/Farm etc.) :

১। প্রতিষ্ঠানের নাম (Name of The Institution) :

(In Block Letter)

Sector Code: (See page 79-100 of Guidelines for SBS-1.2 & 3 Returns)									
Type of Deposit Code: (See page 101 of Guidelines for SBS-1.2 & 3 Returns)									

২। প্রতিষ্ঠানের ধরন (Type of Institution) :

৩। হিসাবের ধরন (Type of Account) :

B. ঋণ গ্রহনকারীর তথ্য (Borrower's Information) :-
(For SBS-3 Reporting)

হিসাব নম্বর (Account No.) :

ব্যক্তির ক্ষেত্রে (For Individual):

১। ঋণ গ্রহনকারীর নাম (Borrower's Name) :

(in Block Letter) :

Sector Code: (See page 100 of Guidelines for SBS-1.2 & 3 Returns)									
Economic Purpose Code: (See page 106-109 of Guidelines for SBS-1.2 & 3 Returns)									
Sector Code: (See page 110 of Guidelines for SBS-1.2 & 3 Returns)									
Product Code: (See page 116 of Guidelines for SBS-1.2 & 3 Returns)									
SME Code: (See page 113 of Guidelines for SBS-1.2 & 3 Returns)									

২। পেশা (Profession) :

৩। ঋণ গ্রহনের উদ্দেশ্য (Purpose of Loans/Advances) :

৪। জামানত (Security) :

৫। ঋণের ধরন (Category of Loan) :

৬। এসএমই কি না (SME) : হ্যাঁ/না।

প্রতিষ্ঠানের ক্ষেত্রে (For Institution/Office/Company/Farm etc.) :

১। ঋণ গ্রহনকারীর প্রতিষ্ঠানের নাম (Name of the Borrowing Institution) :

(in Block Letter) :

Sector Code: (See page 100 of Guidelines for SBS-1.2 & 3 Returns)									
Economic Purpose Code: (See page 106-109 of Guidelines for SBS-1.2 & 3 Returns)									
Sector Code: (See page 110 of Guidelines for SBS-1.2 & 3 Returns)									
Product Code: (See page 116 of Guidelines for SBS-1.2 & 3 Returns)									
SME Code: (See page 113 of Guidelines for SBS-1.2 & 3 Returns)									

২। ঋণ গ্রহনের উদ্দেশ্য (Purpose of Loans/Advances) :

৪। জামানত (Security) :

৫। ঋণের ধরন (Category of Loan) :

৬। এসএমই কি না (SME) : হ্যাঁ/না।

Prepared by

Verified by

Approved by

**Customer Identity Form (KYC Profile Form)
(Term Deposit/Special Deposit Scheme Account)**

Account Number																				
Unique Customer ID Card																				
Date																				

1.	Name of Account Holder				
2.	Type/Nature of Account				
3.	Customer's Profession(in details)				
4.	Customer's monthly probable Income				
5.	Source(s) of Fund(in details)				
6.	Document(s) has/have been collected to ascertain the source(s) of Fund(s):				
a.					
b.					
c.					
	Whether document(s) has/have been checked? (please Tick)			Yes	No
7.	How the Address of the Account Holder has been verified (in details) :				
8.	Whether Actual Beneficial Owner of the exists(Tick)		Yes	No	Not applicable
(If answer is yes, KYC of Beneficial Owner is/are to be completed as per annexure (KYC Annexure-1) In case company , KYC of each director who are holding 20% or more share to be completed as per Annexure-19(Beneficial Owner) including active share holder director)					
9.	Identity (any one)				
	Document		Copy Received	Verified/Checked	Put Tick
a.	Passport No.				
b.	National ID/NID No.				
c.	Birth Registration Certificate No.				
d.	E TIN				
e.	VAT Registration/BIN				
f.	Registration/Incorporation No.				
g.	Others (mention please)				
10.	For Account of Non Resident and Foreigner				
	Purpose of Account opening:				
a.	Type of Visa		Expiry Date		
b.	In case of opening account of Work Permit holder, whether the copy of work permit and approval of the appropriate authority have been obtained or not ?			Yes	No
(Photocopy of passport for Non Resident Bangladeshi and Passport copy with visa for foreigner must be collected)					
11.	Whether the Customer(s) is/are Politically Exposed Person (PEP)/Influential Person (IP)/Chief or High Level Officer of international organization and their family member(s) or close associates?(as per definition of the BFIU circular) If answer is yes :			Yes	No
a.	Whether the approval has been taken from Senior Management?			Yes	No
b.	Whether the interview of customer has been taken face to face?			Yes	No
12.	In the light of the related Act, Rules and Circular whether the name of the customer is/are found in OFAC list of United Nations Security Council and any person suspected to be listed for any Act of Terrorism, engaged in Terrorist Financing and proliferation of any weapons/Arms of mass destruction and any similarity observed on checking with any persons declared forbidden or black listed by Bangladesh Government? If answer is yes			Yes	No
a.	Provide the details of the measures taken:				

**Customer Identity Form (KYC Profile Form)
(Term Deposit/Special Deposit Scheme Account)**

13.	Risk Grading/ Calculation of overall risk (As per KYC annexure 2) :	
	Sum of Risk Score	Overall Risk rating
	15 or above	High
	Below 15	Low
	Comments:	

NB: Customer(s) may be graded as High Risk on the basis of subjective criteria (of Customer & Beneficial owner, if any) even though the score of the customer is less than 15.

Prepared by : Account Opening Officer/Relationship Manager		Reviewing & Compliance Officer (Branch Head/Branch Money Laundering Prevention Compliance Officer)	
Signature, Name with seal		Signature, Name with seal	
Date:		Date:	

Approval of Senior Official/Branch Head in case of PEP/IP/Senior Official of International Organization	
Signature, Name, seal	
Date:	

15. Date of latest Review & Update related to Customer and Account: _____

(Name, Seal & signature of Reviewing & updating Officer with date)

[Influential Persons(IPs) meaning “ individuals who are or have been entrusted domestically with prominent public functions, for example Head of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials”

Politically Exposed Persons (PEPs) meaning “ individuals who are or have been entrusted with prominent public functions by a foreign country, for example Heads of State or of Government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials”]

**Customer's Risk Score Identification
(Ref: BFIU Circular 26 dated 16.06.2020)**

A.	Business type of Customer/Based on business	Score	A.	Business type of Customer/Based on business	Score
1.	Jewellery/Gold/Precious Metal Business	5	47.	Poultry /Dairy/ Fishing Firm	2
2.	Money Changer/Courier Service/Mobile Banking Agent	5	48.	Agro Business/Rice Mill/Beverage	2
3.	Real Estate Developer/Agent	5	49.	Micro/Small Business (Investment below 5 mio BDT)	2
4.	Promoter/Contractor of construction Firm	5	50.	Computer/Mobile Phone Dealer	2
5.	Painting/ Antique Dealer	5	51.	Producer(except Arms)	2
6.	Restaurant/Bar/Night Club/Beauty Parlor/Residential Hotel Business	5	52.	Others (mention specifically)	1-5
7.	Import/Export & Import-Export Agent	5			
8.	Manpower Export Business	5	B.	Based on Customer's Profession/Activities/Service	Score
9.	Arms Business	5	53	Pilot/Flight Attendant	5
10.	Garment Business/Garment accessories/Packaging/Buying House	5	54	Trustee	5
11.	Share/Stock Dealer, Broker, Portfolio Manager, merchant Banker	5	55	Professional (Journalist, lawyer, Doctor, Engineer, CA, FCA etc)	4
12.	Software/Information Technology Business	5	56	Director(private/Public Ltd Co)	4
13.	Offshore/Non Resident Corporation	5	57	High official of multinational Co.	4
14.	NGO/NPO	5	58	House wife	4
15.	Film Producing/Distribution Corporation	5	59	Service holder in IT sector	4
16.	Mobile Phone Operator/Internet/Cable TV Operator	5	60	Sports Person/player/media Celebrity/Producer/Film Director	4
17.	Land/House/Flat selling-buying broker/Agent	5	61	Freelance Software Developer	4
18.	Insurance/Brokerage Agency	5	62	Government Service Holder	3
19.	Religious Institution & Educational Institution	5	63	Landlord/House owner	3
20.	Trust	5	64	Non Govt. Service holder Managerial position	3
21.	Petrol pump/CNG Station Business	5	65	Teacher(Govt/ Non Govt/Autonomous Institution)	2
22.	Software Business	5	66	Non Govt/Private Service holder	2
23.	Ship Breaking Business	5	67	Self Employed Professional	2
24.	Bank/Leasing/Finance Company	4	68	Student	2
25.	Indenting Business	4	69	Retired person	1
26.	Outsourcing Business	4	70	Farmer/Fisherman/Worker	1
27.	Law Firm/Engineering Firm/ Consulting Firm	4	71	Others (mention specifically)	1-5
28.	Fuel & Power (Electricity) Generation Co.	4			
29.	Print & Electronic Media	4			
30.	Travel Agent /Tourism Company	4			
31.	Merchant if invested BDT 10 mio & above	4			
32.	Chain Store/ Chain shop/Shopping Mall	4			
33.	Freight/Shipping/Cargo Agent/ C & F Agent	4			
34.	Motor Car Business (New/Reconditioned)	4			
35.	Leather/Leather goods Business	4			
36.	Construction materials Business	4			
37.	Business Agent	3			
38.	Thread/Jute/Garments Stock Lot Business	3			
39.	Transport Operator	3			
40.	Pharmaceuticals & Medicine Distribution Business	3			
41.	Cold Storage Business	3			
42.	Advertisement /Add Firm Business	3			
43.	Service Provider	3			
44.	Tobacco & Cigarette Business	3			
45.	Amusement Park/Entertainment Business	3			
46.	Motor Parts Trader/Workshop Business	3			

(Customer's Risk Calculation Form)

A	Products/Services and Channel Risk	
1.	Types of Products/services	Score
	Savings Account	1
	Current Account	4
	Fixed/Term Deposit	3
	Deposit Scheme(up to BDT 12 Lac)	1
	Deposit Scheme(Above BDT 12 Lac)	3
	Foreign Currency (FC) Account	5
	Short Notice Deposit (SND)	3
	RFCD Account	5
2.	Type of On boarding/opening of Account	Score
	By Branch /Relationship Manager	2
	By Direct Sales Agent/person	3
	By Internet/ Non Face to Face	5
	Walk in Customer	3
B.	Geographical Risk/Residential status Risk	
	Non Resident Risk	
	Resident Bangladeshi Customer	1
	Non Resident Bangladeshi Customer	2
	Foreign National	3
	For Foreign National(s): Risk classification as per Birth place/Resident status	
	Customer whether citizen of FATF member countries, jurisdiction under increased monitoring and High risk jurisdiction subject to a call for action or whether the customer is listed in the UN/any other sanctioned lists.	
	If answer is Yes	5
	If answer is No	1
C.	Relation Risk	
1.	As per BFIU Circular, whether the customer is(are) belongs to PEPs/Influential Person(s)/Head of International Organization or Senior level Officer	
i.	If answer is No	0
ii.	If answer is Yes	5
2.	As per BFIU Circular, whether the customer is(are) family member(s) or Close associates of PEPs/Influential Person(s)/Head of International Organization or Senior level Officer	
i.	If answer is No	0
ii.	If answer is Yes	5
D.	Transaction Related Risk	
1.	Customer's Yearly Average Transaction (For Personal Account)	Score
i.	Up to BDT 10.00 Lac	1
ii.	Above BDT 10.00 Lac to 50.00 Lac	2
iii.	Above BDT 50.00 Lac to 5.00 Crore	3
iv.	Above BDT 5.00 Crore	5
2.	Customer's Yearly Average Transaction (For Non-Personal Account)	Score
i.	Up to BDT 10.00 Lac	0
ii.	Above BDT 10.00 Lac to 50.00 Lac	1
iii.	Above BDT 50.00 Lac to 5.00 Crore	2
iv.	Above BDT 5.00 Crore	4
E.	Transparency Risk	
	Whether customer(s) has/have supplied reliable information/documents	
i.	If answer is Yes	1
	If answer is No	5
F.	Business and Profession/Occupation Related Risk	Score
i.	If Profession is Business Related (Please mention Score as per List 2. A)	
ii.	If Profession is Service, other activities Business (please mention score as per List 2. B)	
G.	Total Risk Score (A+B+C+D1or D2+E+F i or F ii)	

(To be filled in for KYC of Beneficial Owner)

Account Number																				
Unique Customer ID Card																				
Date																				

1.	Name of Account Holder (In Bangla)				Photo of A/C Beneficial Owner
	(In English Block Letter)				
2	Beneficial Owner's Name(Bangla)				
	Beneficial Owner's Name(English Block Letter)				
3. (a)	Date of Birth	Day/Date	Month	Year	
(b)	Place of Birth	Place/District:		Country:	
4.	Name of Father				
5.	Name of Mother				
6.	Name of Husband/Spouse				
7.	Nationality				
8.	Gender(Please Tick)	Male	Female	Transgender/Third Gender	
9.	Profession (in details with Designation)				
10.	Monthly Income				
11.	Source of Fund(in details)				
12.	Tax Identification Number (if any)				
13	a. Present Address	Road/Village/ House:			Post Office:
		P.S/Upazilla:			District:
		Phone:			Mobile:
		E mail :			Post Code/PIN:
	b. Permanent Address	Road/Village/ House:			Post Office:
		P.S/Upazilla:			District:
		Phone:			Mobile:
		E mail :			Post Code/PIN:
	c. Professional Address	Name of Institution:			
		Address :			
		Phone:			Email :

(Documents as proof of address must be given, at least one in favour of address)

14.	Identity			
a.	NID/National ID Card No.			
b.	Birth Registration/Certificate No.			
c.	Passport No.			Expiry Date:
d.	Others(describe details)			

(At least one Identity must be submit as per extant guidelines of Bangladesh Bank & or Policy of SBI)