

# INDIVIDUAL CUSTOMER APPLICATION FORM (ICAF)

Please select your new account location/s

NCBCM JA:   
 NCBCM KY:   
 NCBCM BDS:   
 NCB KY:   
 NCBMB TT:



New Account     Updating Account Information    Branch:   
 Opening/ Updating Date:     Wealth Manager:

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="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Individual <input type="checkbox"/> Joint &/or <input type="checkbox"/> Joint & <input type="checkbox"/> Trust Account (Trust Deed must be received)
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	

## SECTION 1: CLIENT INFORMATION (Primary)

Title:  Mr.  Miss  Mrs.  Other     Date of Birth: DD/MM/YY   
 First Name:     Middle Name:     Last Name:   
 Maiden Name (if Applicable):     Alias:     Occupation:   
 Gender:  Male  Female    Marital Status:  Single  Married  Widowed  Divorced  
 Country of Birth:     Place of Birth:     Nationality:

## SECTION 2: CONTACT & IDENTIFICATION (Primary)

### Telephone Contact Numbers

Mobile:     Home:     Work:     Other:

Email Address:

Tax Identification Number (TIN, TRN, SSN, etc.):     Country of Issue:

ID Type:  Driver's Licence\*\*     Passport\*     Voter's ID     National ID Card     Other

\*Mandatory for Cayman and Barbados Clients

\*\* Driver's Licenses must be accompanied by another form of ID for NCBMBTT

ID Number:     ID Issue Date:     ID Expiry Date:

Country of Issued (ID):

Tax Exemption Letter:  Yes  No

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## SECTION 3: RESIDENCY AND EMPLOYMENT (Primary)

Current Home Address:		Years in residence:	
Previous Home Address:		Years in residence:	

### CURRENT EMPLOYMENT INFORMATION

Employer/Business Name:		Telephone No.:	
Employer's Address:		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:		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\$6,500 – 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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<input type="checkbox"/>	NCBMB TT:	

## SECTION 1A: CLIENT INFORMATION (Joint 1)

Title:  Mr.  Mrs.  Miss  Other  Date of Birth: DD/MM/YY

First Name:  Middle Name:  Last Name:

Maiden Name (if Applicable):  Alias:  Occupation:

Gender:  Male  Female Marital Status:  Single  Married  Widowed  Divorced

Country of Birth:  Place of Birth:  Nationality:

Are you a citizen/permanent resident of any other country?  Yes  No Passport #:

## SECTION 2A: CONTACT & IDENTIFICATION (Joint 1)

### Telephone Contact Numbers

Mobile:  Home:  Work:  Other:

Email Address:

Tax Identification Number (TIN, TRN, SSN, etc.):  Country of Issue:

ID Type:  Driver's Licence\*\*  Passport\*  Voter's ID  National ID Card  Other

*\*Mandatory for Cayman and Barbados Clients*

*\*\* Driver's Licenses must be accompanied by another form of ID for NCBMBTT*

ID Number:  ID Issue Date:  ID Expiry Date:

Country of Issued (ID):

Tax Exemption Letter:  Yes  No

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

## SECTION 3A: RESIDENCY & EMPLOYMENT (Joint 1)

Current Home Address: \_\_\_\_\_

\_\_\_\_\_ Years in residence: \_\_\_\_\_

Previous Home Address: \_\_\_\_\_

\_\_\_\_\_ Years in residence: \_\_\_\_\_

### CURRENT EMPLOYMENT INFORMATION

Employer/Business Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_ Years Employed/Retired: \_\_\_\_\_

Industry of Employment: \_\_\_\_\_

If Self Employed State Nature of Business/ Principal Activity: \_\_\_\_\_

\_\_\_\_\_

### PREVIOUS EMPLOYMENT INFORMATION

Employer/Business Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_ Years Employed/Retired: \_\_\_\_\_

Industry of Employment: \_\_\_\_\_

Purpose of Opening Account: \_\_\_\_\_

Reason for opening account (Non-Resident Client): \_\_\_\_\_

### ANNUAL INCOME – USD EQUIVALENT

Less than US \$6,500     US\$6,500 – 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 \_\_\_\_\_ and RELATION \_\_\_\_\_

\*According to FATF's International Standards on Combating Money Laundering and the Financing of Terrorism & Proliferation (2012), PEPs: Individuals who are or have been entrusted with prominent public functions (e.g., heads of state or of government; senior politicians; senior government, judicial or military officials; senior executives of state-owned corporations and important political party officials).

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## SECTION 4: GENERAL ACCOUNT GOVERNANCE

Mailing Address:

Same as Home Address of Primary Holder

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

### 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*

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

Salary/Wages/Savings  Investment/Capital Gains  Family/Inheritance  Other (Describe)

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: #  Amount: \$   
Withdrawals: #  Amount: \$

## SPECIFIC INVESTMENT OBJECTIVES

Home Ownership  Pension/Retirement  Growth  Income  Capital Preservation  Other:

INVESTMENT EXPERIENCE  None  Limited  Good  Extensive

## AFFILIATES

Are you or any of the joint account holders 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.)

## DIRECTORS

Are you or any of the joint account holders a director, 10% and more shareholder or policy-making officer of a publicly held company?  Yes  No

Name:

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

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## 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:	<input type="text"/>	Telephone No.	<input type="text"/>
Mailing Address:	<input type="text"/>		
	<input type="text"/>	Occupation:	<input type="text"/>

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

Full Name:	<input type="text"/>	Telephone No.	<input type="text"/>
Mailing Address:	<input type="text"/>		
	<input type="text"/>	Occupation:	<input type="text"/>

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

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## GAYMAN ACCOUNT CURRENCY

ACCOUNT CURRENCY  CAD  EUR  GBP  USD  KYD  OTHER (Specify) \_\_\_\_\_

## 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 >= \$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 HAVE ALL ACCOUNT HOLDERS SIGN IN THE SPACES PROVIDED BELOW

I/We hereby certify that  NCB Capital Markets Limited,  NCBCM (Cayman) Limited,  NCBCM (Barbados) Limited,  NCB Merchant Bank Trinidad collectively or individually referred to as "NCB" is authorized to deal with each authorized signer to accept all orders for purchases and sales and all instructions given verbally or in writing by him or her without further inquiry as to his or her authority; to receive any funds, securities or other property for the account; 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. In order to assist NCB in providing me with accurate and up to date services, I agree to the sharing of the information set out in this Application within NCB, and I waive my rights of confidentiality in that regard. I agree that NCB may use this information in this Application in order to augment and update information currently held by each entity. By signing below I further signify that I have read and fully understand and agree to each of the terms and conditions contained in the respective Client Account Opening Agreements and I hereby acknowledge receipt of a copy of same.

PRIMARY'S NAME:		PRIMARY'S SIGNATURE:	
DATE:			

JOINT 1'S NAME:		JOINT 1'S SIGNATURE:	
RELATIONSHIP:		DATE:	

JOINT 2'S NAME:		JOINT 2'S SIGNATURE:	
RELATIONSHIP:		DATE:	

JOINT 3'S NAME:		JOINT 3'S SIGNATURE:	
RELATIONSHIP:		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 for controlling persons

### 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