



# ANNEX TO CLIENT INFORMATION SHEET

## FATCA Requirements

### TO BE ACCOMPLISHED BY USI ASSOCIATE

<input type="checkbox"/> New	<input type="checkbox"/> Updating	Date (mm-dd-yyyy)	Account Code
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### FOR INDIVIDUAL CLIENT

Client's Name (Last, First, Middle)	US TIN / SSS No. (If applicable)
Foreign Address, If applicable (Home Number, Street, Apartment No., City, State, Country)	

### SPOUSE INFORMATION

Name of Spouse (Last, First, Middle)					
Citizenship	TIN	US TIN / SSS No. (If applicable)	Country of Birth	Place of Birth (Town/City)	Date of Birth (mm-dd-yyyy)
Present Address (House Number, Street, Barangay, Town / City, Province)					
Permanent Address (House Number, Street, Barangay, Town / City, Province)					
Foreign Address, If applicable (House Number, Street, Apartment No., City, State, Country)					
Employment Status			Name of Employer / Company		
<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired					

### COVERED US PERSONS

#### INDIVIDUAL

1. Are you a US citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you a Green Card holder / Lawful permanent resident of the US?!	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you stayed in the US for at least 183 day for the past 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Do you have a US address (residence, correspondence or PO Box) or a US phone number?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Do you have instruction to transfer funds to US accounts or directions regularly received from a US address?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Is your address on file "in case of" or "hold mail" or a US PO Box?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Do you have a Power of Attorney or a signatory granted to persons with US address	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Does your total monthly expected volume of investment exceed US \$50,000?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### FOR JURIDICAL AND FIDUCIARY CLIENTS

Company Name (No acronym or abbreviation)
US TIN / SSS No. of Substantial Owners (If applicable)

### COVERED US ENTITIES

#### PARTNERSHIP CORPORATION

1. Is your entity a US specified entity (organized and created under US laws)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Is your entity owned by 1 or more substantial US owners (more than 10% of stock)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Is your entity owned by 1 or more substantial US owners (less than 10% of stock)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Does your total monthly expected volume of investment exceed US \$250,000?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### CERTIFICATION

By signing below, I/we hereby certify and attest to the fact that all information represented and given by me/us are true and correct. Any changes in the foregoing information shall be promptly communicated to the Bank. I/we hereby authorized the Bank to verify and investigate any and all information given by me / us, as the Bank may deem appropriate.

\_\_\_\_\_  
Signature of Client over Printed Name

### TO BE ACCOMPLISHED BY USI ASSOCIATE

US INDICIA	REQUIRED DOCUMENT	SUBMITTED		Date	Remarks
		Yes	No		
US citizenship or lawful permanent resident / Green Card holder / Partnership or Corporation organized and created under US laws	W-9 Form				
US birthplace	W-9 or W-8BEN Form				
	Non-US Passport or similar documentation establishing foreign citizenship				
	Written explanation regarding US citizenship				
US address (residence, correspondence, or PO Box) or US phone number	W-9 or W-8BEN Form				
	Non-US Passport or similar documentation establishing foreign citizenship				
Instructions to transfer funds to US accounts or direction regularly received from a US address	W-9 or W-8BEN Form				
	Document evidence establishing non-US status				
Address on file is "in care of" or "hold mail" or US PO Box	W-9 or W-8BEN Form				
	Document evidence establishing non-US status				
Power of Attorney or signatory granted to person with US address	W-9 or W-8BEN Form				
	Document evidence establishing non-US status				

### ACTIONS TAKEN

PRINTED NAME	SIGNATURE	DATE	ACTION	REMARKS
			Interview	
			Verifies	
			Approve	