SECTION B: STARTING YOUR ANZ SIGNATURE PRIORITY BANKING RELATIONSHIP

Main Account Hold	er
Account Holder	2





Account Type Individual Joint US Person Declaration Ye A. Personal Information	Account Holder	Relationship to Main Account Holder US Person Declaration Yes ¹ No ² A. Personal Information
	nformation provided in this application shall be taken as o update your existing particulars in the Bank's records)	New Client Existing Client (Any new information provided in this application shall be taken as a request to update your existing particulars in the Bank's records) Salutation and Full Name (As in NRIC/Passport)
salutation and Full Name (AST	n Inkic/Passport)	Suitation and Fair Valle (As in Nine rassport)
NRIC/Passport Number	Singapore PR	NRIC/Passport Number Singapore PR Yes No
Permanent Residential Addre	2SS (Must not be a PO Box address)	Permanent Residential Address (Must not be a PO Box address)
Country	Postal Code	Country Postal Code
Mailing Address (If different from I	residential address)	Mailing Address (If different from residential address)
Country	Postal Code	Country Postal Code
Marital Status Single	Married Others	Marital Status Single Married Others
Mother's Maiden Name	Munica Circis	Mother's Maiden Name
Highest Education Received		Highest Education Received
Primary Secondary	A Level/Pre-University	Primary Secondary A Level/Pre-University
Diploma Degree	Others, please specify	☐ Diploma ☐ Degree ☐ Others, please specify
Contact Details (Please provide m	obile number & 1 alternative number)	Contact Details (Please provide mobile number & 1 alternative number)
Home	Mobile	Home Mobile
Office	Fax	Office Fax
Email		Email
Self-employed Yes	No	Self-Employed Yes No
Name of Employer/Name of	Business (For self-employed)	Name of Employer/Name of Business (For self-employed)
Occupation	Annual Income	Occupation Annual Income
Government	etail/F&B Travel/Hospitality lanufacturing Building/Construction thers, please specify	Nature of Business/Industry Banking/Finance Retail/F&B Travel/Hospitality Government Manufacturing Building/Construction IT/Communications Others, please specify
Source of Wealth	_	Source of Wealth
Business Income Inheritance/Gift	☐ Investment Returns☐ Salary	Business Income Investment Returns Inheritance/Gift Salary
Savings derived from	Others, please specify	Savings derived from Others, please specify
Planned transaction amount	(Per month)	Planned transaction amount (Per month)
SGD10,000 & below SGD50,001 to 100,000	SGD10,001 to 50,000 SGD100,001 to 200,000	SGD10,000 & below SGD10,001 to 50,000 SGD50,001 to 100,000 SGD100,001 to 200,000

² I acknowledge that I am aware that I need to notify the bank within 30 days of any change to my status.

	ATM/Phone Banking	C. t.		ATM/Phone Banking
urrent	Access Indicator ³ Primary Account	Savings	A De Principal	Access Indicator ³
ANZ SGD Signature Priority Banking Current Account ANZ SGD Current Plus Account			Multiplier Account	Primary Account
ANZ SGD Current Account	Primary Account		atement Savings Account an Dollar Savings Plus Account	Primary Account Primary Account
	Primary Account		s Saver Account	Primary Account
ANZ Foreign Currency Current Account (Select currency: AUD/CAD/CHF/EUR/GBP/USD)	Primary Account	(Select currency:		Filliary Account
Others, please specify	Primary Account	_	Currency Statement Savings ct currency: CAD/CHF/CNY/EUR/ D)	Primary Account
		Others, pleas	se specify	Primary Account
. Banking Services				
ebit Card ³ (The Current and/or Savings Account selected comes equip	pped with an ANZ Visa Debit Card)		
Name as it should appear on the ANZ Debit Card ⁴	(Up to a maximum of 19 characte	ers)	Point of sale ⁵ daily limit (Please	select one ⁶)
Main Account Holder			SGD0 SGD1,000 S	SGD2,000 SGD5,00
Account Holder 2			SGD0 SGD1,000 S	6GD2,000 ☐ SGD5,00
I/We do not wish to have the Debit Card				
Cheque Book Phone Banking ³				
Cheque Book Phone Banking ³				
	onal Data Usago			
Cheque Book Phone Banking ³ Consent to Marketing Information and Personal I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a	materials on products, s			v Zealand Banking
Consent to Marketing Information and Person I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder	materials on products, s uthorised merchants an one call		may ✓ one or both options): nd postal mail	v Zealand Banking
Consent to Marketing Information and Person I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder	materials on products, s inthorised merchants and one call SMS one call SMS	d agents, via (you r S/MMS, fax, email a S/MMS, fax, email a	may √ one or both options): nd postal mail nd postal mail	v Zealand Banking
Consent to Marketing Information and Person I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder Account Holder 2 Pho By ✓ this form, I consent to the chosen mode(s) or	materials on products, suthorised merchants an one call SMS one call SMS foommunication and again	d agents, via (you r S/MMS, fax, email a S/MMS, fax, email a gree to the Terms a	nay ✓ one or both options): nd postal mail nd postal mail nd Conditions stated below.	v Zealand Banking
Consent to Marketing Information and Personal I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder Account Holder 2 Photosen Marketing Photosen Marketing Photosen Photosen Marketing Photosen Photosen Marketing Photosen Photosen Marketing Photosen Photosen Photosen Photosen Photosen Marketing Photosen Ph	materials on products, so the products of the	nd agents, via (you r S/MMS, fax, email a S/MMS, fax, email a gree to the Terms a sonal Data Usage	nay 🗸 one or both options): nd postal mail nd postal mail nd Conditions stated below.	v Zealand Banking
Consent to Marketing Information and Person I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder Account Holder 2 Pho By ✓ this form, I consent to the chosen mode(s) or	materials on products, so the products of the products of the products on the products, so the products on the products, so the products on the products, so the products of the products, so the products of the produ	ad agents, via (you r S/MMS, fax, email a S/MMS, fax, email a gree to the Terms a sonal Data Usage all Registry, if applica nerwise) collecting,	nay \(\) one or both options): nd postal mail nd postal mail nd Conditions stated below. able. using, disclosing and process	ing my personal
Consent to Marketing Information and Pers I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder Account Holder 2 Pho By ✓ this form, I consent to the chosen mode(s) or Terms and Conditions for Consent to Marketin 1. My consent given here will override my regist 2. I consent to ANZ, its agents and service provice data, to provide me with marketing information merchants and agents. 3. My consent applies to Singapore telephone in	materials on products, so unthorised merchants and one call SMS one call SMS one call SMS of communication and again formation and Percration on the Do Not Cadders (in Singapore or other on and materials on produmbers under my name	ad agents, via (you r S/MMS, fax, email a S/MMS, fax, email a gree to the Terms a sonal Data Usage all Registry, if application ducts, services or e	nay \(\) one or both options): nd postal mail nd postal mail nd Conditions stated below. able. using, disclosing and process vents, provided by ANZ and it	ing my personal s authorised
Consent to Marketing Information and Pers I would like to receive marketing information and Group Limited, Singapore Branch ("ANZ") and its a Main Account Holder Account Holder 2 Pho By ✓ this form, I consent to the chosen mode(s) or Terms and Conditions for Consent to Marketin 1. My consent given here will override my regist 2. I consent to ANZ, its agents and service provice data, to provide me with marketing information merchants and agents.	materials on products, so unthorised merchants and one call SMS one call SMS of communication and act of the second secon	ad agents, via (you r S/MMS, fax, email a S/MMS, fax, email a gree to the Terms a sonal Data Usage Ill Registry, if applica nerwise) collecting, ducts, services or e	nay \(\) one or both options): nd postal mail nd postal mail nd Conditions stated below. able. using, disclosing and process vents, provided by ANZ and it	ing my personal s authorised

³Please specify ATM/Phone Banking access indicator for the account(s) opened under Section B.

Note: Please select only 1 account as Primary Account and the rest of the accounts will be linked as secondary.

⁴If the embossed name for the card is not indicated in this form, the Bank shall use the account holder's full name, subject to character limitation on card.

⁵Point of sale refers to purchase of goods and services at retail merchants using the ANZ Visa Debit Card.

⁶In the absence of any point of sale daily limit specified, a default limit of SGD5,000 will be applicable.

Deposit Insurance Scheme: Singapore dollar deposits of non-bank depositors are insured by the Singapore Deposit Insurance Corporation, for up to \$\$50,000 in aggregate per depositor per Scheme member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

Account Mandate

To: Australia and New Zealand Banking Group Limited, Singapore

- I/We hereby request and authorise Australia and New Zealand Banking Group Limited, Singapore Branch (the "Bank"), to open an ANZ Bank Account which includes one or more account(s) of any kind as I/we may request the Bank in accordance with this Mandate and subsequently to open such further account(s) of any type in my/our joint names of whatever nature as I/we request (the "Account(s)") in accordance with and subject to the Bank's Terms and Conditions for ANZ Bank Account (the "Terms"), as amended from time to time by the Bank.
- The Bank is hereby authorised and instructed generally, to act on instructions given by me/us in accordance with the Terms. The Bank may, in its discretion and on such terms as the Bank may impose, allow instructions to be given by phone, fax and other form of communication and I/we shall bear the risks arising therefrom, and indemnify the Bank, as set out in the Terms.
- In the absence of contrary written instructions which the Bank may agree to, the conditions set out in the Terms (including, but not limited to, those set out in the Mandate) shall apply to each and every Account, of whatever nature, now or hereafter opened by the Bank or by me/us in our joint names
- I/We have been supplied with a copy of the Terms, the Statement of Disclosure for Joint Accounts, Risk Disclosure Statement for Investments and Schedule of Charges and agree to abide thereby.
- Where I/we have requested for Phone Banking Services and ATM Services, I/we confirm that I/we have read the Bank's Terms and Conditions for 24-hour Banking and agree to abide thereby.
- I/We agree not to access Digital Banking unless I/we have read the Bank's Terms and Conditions for Personal Internet Banking - Digital Banking, and further agree to shide thereby.
- Banking and further agree to abide thereby.

 7. In the event of any discrepancy between this Mandate and the terms and conditions indicated in points 4, 5 and 6, the express terms of this Mandate shall prevail.
- 8. I/We confirm that I/we have been given the opportunity to consult with my/our professional advisors before agreeing to the terms and conditions indicated in points 4, 5 and 6 and this Mandate.
- 9. I/We agree that the Bank, its agents and service providers (in Singapore or otherwise) may collect, use, disclose and/or process my/our personal data and any information relating to me/ous (including but not limited to my/our Accounts, financial condition and/or transactions) in accordance with the Terms and for the purposes stipulated therein. Where personal data is to be transferred out of Singapore, I/we acknowledge and agree that the Bank will comply with the Personal Data Protection Act in doing so and take appropriate steps to ensure that the recipient of the personal data is bound by legally enforceable obligations to provide to the transferred personal data a standard of protection that is at least comparable to the protection under the Act, such that the personal data is kept secure and confidential.
- 10. If I/we were referred to the Bank by any person, I/we acknowledge that the referrer may receive rewards from the Bank in respect of such referral and that the referrer may be able to infer my/our approximate account balance based on the amount of rewards awarded to the referrer, and I/we hereby consent to the Bank informing the referrer of my/our account opening and of the amount of rewards awarded to the referrer.

- 11. I/We hereby warrant that all the information and documents provided by me/us in relation to this application are true, complete and accurate in all respects.
- 12. If I/we qualify for participation in the ANZ Signature Priority Banking New Client Welcome Rewards Promotion and/or ANZ Signature Priority Banking Referral Rewards Programme, I/we agree to accept and be bound by the Terms & Conditions for ANZ Signature Priority Banking New Client Welcome Rewards Promotion and/or Terms & Conditions for ANZ Signature Priority Banking Referral Rewards Programme, both as amended and in effect from time to time ("Rewards Terms & Conditions"). A copy of the Rewards Terms & Conditions is available on the Bank's website (www.anz.com.sg) and a printed copy of the same is available upon request at any of the Bank's branches.
- 13. I/We acknowledge that it is my/our responsibility to comply with the tax obligations in the countries where I/we may have or otherwise incur such obligations (whether due to my/our nationality, tax domicile, incorporation, source of income, physical presence or otherwise) ("Jurisdictions").
- 14. I/We declare that I/we have not committed or been convicted of any tax evasion or money laundering related offences in any court of law or administrative proceedings in the Jurisdictions stated above and my/ our source of funding is not the proceeds of any serious tax crime.
- 15. In the event that my/our particulars provided in this application differ from my/our existing particulars in the Bank's records, I/we request that such existing particulars be updated and superseded accordingly.

Deposit Insurance Scheme: Singapore dollar deposits of non-bank depositors are insured by the Singapore Deposit Insurance Corporation, for up to SGD50,000 in aggregate per depositor per Scheme member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

Custody Agreement: The Bank has arrangements with various custodians to hold the assets (excluding cash) which you have delivered or transferred through the Bank for custody. A summary of the key terms of the agreements entered into with each custodian, and/or the manner in which the custody accounts are maintained and established has been made available for your easy reference. This summary can be found on the Bank's website at www.anz.com.sg (http://www.anz.com/singapore/en/signature-priority-banking/products-services/terms-conditions-products). A copy of the Summary of Custody Agreements will be made available upon request at any of the Bank's branches.

Notification on Outsourcing of our Banking Services: Australia and New Zealand Banking Group Limited, Singapore branch ("ANZ") may from time to time engage the services of our head office, its branches, subsidiaries or affiliates and third parties (collectively "service providers") for certain outsourced activities. Whether our service providers are located in Singapore or elsewhere, they are strictly required to maintain information security and customer confidentiality to the same standard as ANZ is responsible for.

The laws in Singapore and other countries may require ANZ and our service providers to disclose information relating to ANZ's customers to relevant authorities from time to time. The circumstances under which such disclosure may be required are limited and include compulsion under law, court order, police investigations or criminal prosecutions.

ANZ Signature Priority Banking Signing Conditions for Joint Accounts I/We understand that to qualify as a Signature Priority Banking (Any change to the signing condition subsequently must be notified in writing to the Bank by all Account Holders) client of ANZ Singapore (the "Bank"), a minimum requirement of SGD150,000 (or currency equivalent) in deposits, investments and/ Any one of us or insurance is required. I/We hereby agree that in the event my/ All of us our total balances with the Bank fall below SGD150,000 (or currency Others, please specify equivalent), a monthly service charge and other applicable charges as per the Bank's Schedule of charges may be levied on me/us. **Client Acknowledgement** Signature of Account Holder 2 Signature of Main Account Holder Date DID MIM YIYIYIY Date DID MIM YIYIYIY Please tick if you are a staff of ANZ Please tick if you are a staff of ANZ

D. ANZ Signature Priority Banking Visa Infinite Credit Card Application **Annual Fee** Principal SGD600 p.a. (Waived as long as you remain an ANZ Signature Priority Banking client) Supplementary: Waived (For first 2 cards) SGD300 p.a. (Third card onwards) Annual fees of \$\$600 p.a. and \$\$300 p.a. apply for ANZ Signature Priority Banking Visa Infinite Credit Card and such annual fees will be waived for as long as you remain an ANZ Signature Priority Banking client. Effective interest rate is 25% p.a. and interest is subject to compounding if the monthly interest charges are not repaid in full. This is an extract. For details and full terms and conditions, visit anz.com.sq I would like my ANZ Signature Priority Banking Visa Infinite Credit Card to be a secured card (Please complete Credit Card Memorandum of Charge) **Documents required (Mandatory)** 2. Please submit the following income documents that are applicable 1. Please submit the following identification documents that are applicable to you and tick the relevant boxes below: to you and tick the relevant boxes below: Salaried employee Singapore Citizens and Permanent Residents Latest computerised/electronic payslip OR Photocopy of your Identification Card (Front and back) Latest Income Tax Notice of Assessment OR Non-Singaporeans CPF Statement for the last 6 months OR Photocopy of your valid Employment Pass (Valid for at least 9 months) Self-employed Income Tax Notice of Assessment for the last 2 years Passport AND Commission-based earner Proof of residence CPF Statement for the last 6 months OR Income Tax Notice of Assessment for the last 2 years OR Commission Statement for the company for the last 6 month Note: A photocopy of Supplementary Cardmember's Identification Card (front and back)/Passport/Employment Pass (valid for at least 9 months) is required. The Bank reserves the right to request for additional information and supporting documents (e.g. utility bill) from time to time as required. Incomplete or unclear application will delay processing. • Home Phone Number • Email Address Nationality Education Level • Mobile Phone Number Residential Address Marital Status Employment Industry • Office Phone Number Overseas Address Number of Dependents Your credit card(s) and all future communications related to your credit card(s) will be sent to your mailing address/mobile number/email address as per the Bank's record. Please keep us informed if any of these particulars is changed by submitting the Information Update Form to your dedicated Relationship Manager. **Principal Card Applicant** ✓ I would like to apply as the Principal Card Applicant: Name to appear on credit card (Please include surname) Do you have an existing ANZ Credit Card? Yes No (Maximum 18 characters) Please select one only: I am the Main Account Holder I am the Account Holder 2 **Personal Information** Residential Status Self-owned Mortgaged Employer's Parents' Rented Others Residential Type HDB Condominium/Apartment Landed Others Length of stay at address Years Months (At permanent residential address) Billing Address Singapore Residential Office Mailing (As indicated in earlier section) **Employment Details** Job Status Employee Sales/Commission-based Self-employed Contractual Years remaining Others Address Length of employment Months Job Title Years Basic Salary (Monthly) SGD Monthly Commission/Variable Income (Monthly) SGD Bonus/Other Income and Sources (Annual) SGD Rental Dividends Others

revious Position	
ength of Previous Employment Years N	Months
	to four times of your monthly income, or higher multiplier if your annual NZ MoneyLine account holders who are applying for an additional card wi ocuments.
or ANZ Credit Card SGD	oneyLine SGD
Please tick here if you would like the Bank to assign a credit limit ⁹	
upplementary Card Applicant	
lease select one only)	Name to appear on credit card (Please include surname)
I am the Main Account Holder I am the Account Holder 2	
NZ Credit Card Declaration and Authorisation	(Maximum 18 characters)
ocument, nor any copy thereof may be sent to or taken into the United State ebsite at anz.com/singapore are deemed to be incorporated herein.	comparable to the protection under the Act, such that the personal data is kept secure and confidential. 7. If, for any reason whatsoever, the Card Account is closed (whether by me/us, the Bank or otherwise) within the period of nine (9) months from the date of opening of the Card Account, I/we agree that the Bank shall be entitled to claim from word. Ufull reimbursement of the cost of any welcome gift which the Bank may have give to me/us upon approval of my/our application and/or activation of my/our Card Account. I/We hereby authorise the Bank to debit the Card Account for the cost of such gift (as determined by the Bank) prior to closure of the Card Account. 8. The preferred credit limit indicated is subject to the approval of the Bank at its reasonable discretion. The Bank will assign a credit limit based on its discretion and MAS guidelines when you select the option to allow the Bank to assign such credi limit for you. 9. I/We as Supplementary Credit Card holder(s) agree to the credit limit that is assign to me/us to be the same as the Principal Card member. 10. If I/we have applied for Credit Card FlexiLoan, I/we agree to be bound by the Cred Card FlexiLoan Terms and Conditions. 11. If I/we have applied for Credit Card Balance Transfer, I/we agree to be bound by the Credit Card Balance Transfer Terms and Conditions. 12. The Bank reserves the right to terminate my/our ANZ Signature Priority Banking Visa Inf inite Credit Card(s) if I/we do not maintain the minimum Signature Priority Banking total relationship balance. In the event of such termination, I/we also hereby request and apply for an ANZ Platinum Credit Card to be issued to me/us a that point in time, subject to the Bank's approval then. I/We also agree to be bound by the Cardmember's Credit Card to be issued to me/us a that point in time, subject to the Bank's approval then. I/We also agree to be bound by the Cardmember's Agreement and such other relevant and then prevailing terms and conditions which may govern the use of the ANZ Platinum
Client Acknowledgement	
Name of Principal Applicant	Name of Supplementary Applicant
Signature of Principal Applicant	Signature of Supplementary Applicant
Date DID MIM YIYIYIY	Date DID MIM YIYIY

Credit Card Memorandum Of Charge

Please complete this Memorandum of Charge form, which is supplemental to your Secured Credit Card application form.

Name of Principal Applicant/Joint Acc	ount Holder 1			
Name of Joint Account Holder 2				
Name of Joint Account Holder 3				
Name of Joint Account Holder 4				
Name of Joint Account Holder 5				
Deposit Account Number				
Deposit Amount (SGD/USD/GBP/EUR/AUD)				

Declaration

- 1 By signing this form, I/we agree to be bound by the following provisions. These provisions and the security created herein shall also be binding on my/our personal representatives.
- 2. I/We agree to place and maintain a minimum deposit (in the amount indicated by me/us in this form) with Australia and New Zealand Banking Group Limited (the "Bank"), which I/ we warrant to be free from any encumbrance, to be used as security for all outstandings, fees and charges which the Principal applicant may be liable for in respect of the Principal and the Supplementary applicant's Card Account(s) (the "Liabilities").
- 3. I/We hereby charge for the settlement of the Liabilities all sums which have been or may from time to time hereafter be deposited by me/us with the Bank whether in Singapore Dollars or other permitted currency under the deposit indicated by me/us in this form including any renewals thereof whether by way of extension or replacement (and even if bearing a different account number/currency type/amount) together with interest accrued or to be accrued thereon and all additions thereto (the "Deposit"). I/We understand that the Credit Limit to be granted will be subject to the Bank's discretion as well as the amount deposited and will be fully secured against the Deposit.
- 4. I/We irrevocably authorise the Bank to, at any time and from time to time in its sole and absolute discretion and without notice to me/us, appropriate and apply the Deposit (whether it has matured or not) or any part thereof in or towards the satisfaction and settlement of all or any of the Liabilities whether the same is due or contingent and whether there has been a default or not. Any currency conversion that may be necessary will be effected at the Bank's prevailing exchange rate.
- 5. I/We agree that the Deposit is to be held by the Bank as a continuing security notwithstanding my/our bankruptcy, insanity or death, any intermediate payment or settlement of account or any other matter whatsoever until such time as the Liabilities may be fully paid and discharged and the Card Account closed. The Deposit is in addition to and shall not prejudice any other security created now or hereafter held by the Bank or any right or remedy the Bank might have in respect of the same. Nothing herein shall restrict the operation of any other rights or remedies whatsoever which the Bank may have under law or otherwise.

- 6. I/We hereby agree and undertake that, for so long as any part of the Liabilities remains outstanding or the Card Account is not terminated, I/we shall not close the Deposit account and shall not withdraw any sum from the Deposit, or assign, mortgage, charge, pledge, transfer, or create any security interest or encumbrance or otherwise deal with the Deposit in any manner whatsoever nor attempt or purport so to do and I/we shall not do or omit any act which may in any way delay or prejudice the Bank's right to the Deposits. I/We acknowledge that the Card Account will be terminated if the Deposit account is closed or if the value of the Deposit falls below the pledged amount for any reason whatsoever without the Bank's prior written consent. I/We understand that any balance from the Deposit will only be returned 45 business days after closure of the Card Account.
- 7. Any notice or demand for payment by you hereunder shall, without prejudice to any effective mode of making the same, be deemed to have been sufficiently made hereunder on me/us if sent by post to the Principal Applicant's address stated below and shall be assumed to have reached the Principal Applicant within 24 hours of posting, and in proving such service it shall be sufficient to prove that the notice demand was properly addressed and posted.
- 8. The Principal Applicant acknowledges that these provisions shall not prejudice but be in addition to the terms of the Cardmember's Agreement and the card application declaration.
- 9. This memorandum shall be construed in accordance with the laws of the Republic of Singapore and I/we submit to the non-exclusive jurisdiction of the Singapore Courts.

Witnessed by Bank Staff	Signed by Principal Applicant/Joint Account Holder 1
Name	Name
Address	Address
NRIC/Passport Number	NRIC/Passport Number
Occupation	Occupation
Signed by Joint Account Holder 2	Signed by Joint Account Holder 3
Name	Name
Address	Address
NRIC/Passport Number	NRIC/Passport Number
Occupation	Occupation
Signed by Joint Account Holder 4	Signed by Joint Account Holder 5
Name	Name
Address	Address
NRIC/Passport Number	NRIC/Passport Number
Occupation	Occupation

Holder.

BANK USE ONLY Bank Staff Confirmation Client signature is witnessed by/confirmed by Name of Bank Staff Signature of Bank Staff Date D D M M Y Y Y Y Y **Source of Account** 2 – Phone Banker Referral 5 – Credit Card Referral N – Mortgage Referral 0 – Self Solicitation 6 – Commercial Banking S – Staff Referral 3 – Overseas Branches Referral 1 – Client Referral (MGM) Referral Others (Please specify) CIF Number for Client Referral **Account Opening Check** Name of Checker **Documents Submitted** Account Application Form (Fully completed and signed by customer) Signature of Checker Identity Card/Passport (Original sighted and copy made for file) Proof of Address (Original sighted and copy made for file) OMLR (Duly signed by approvers) Income Document Date D D M M Y Y Y Y WC Result SG Check Result Research Report Registration Primary Officer Code Market Segment Secondary Officer Code Branch Code **Account Creation (Branch Operations) Main Account Holder Account Holder 2** Are the documents completed? No Yes Are the documents completed? No Yes Is there any hit in checks? No Yes Is there any hit in checks? No Yes If yes, please indicate If yes, please indicate CIF Number of Main Account Holder CIF Number of Account Holder 2 Debit Card Issued No Yes Debit Card Issued No Yes

				anking Access Indicator	alahan sara afahan saran saran saliliha
Current Account			linked as secondary)	nly 1 account as Primary Account an	a the rest of the accounts will be
ANZ SGD Signature Priority	y Banking Current		Account Numb	per	Primary Account
ANZ SGD Current Plus			Account Numb	per	Primary Account
ANZ SGD Current			Account Numb	per	Primary Account
ANZ Foreign Currency Cur	rent (Select currency: AUD/CAD/CHF/EU	JR/GBP/USD)	Account Numb	per	Primary Account
Others (Please specify)			Account Numb	per	Primary Account
Savings Account					
ANZ Wealth Multiplier			Account Numb	per	Primary Account
ANZ SGD Statement Saving	gs		Account Numb	per	Primary Account
ANZ Australian Dollar Savir	ngs Plus		Account Numb	per	Primary Account
ANZ Progress Saver (Select cu	urrency: SGD/AUD/USD)		Account Numb	per	Primary Account
ANZ Foreign Currency Stat	tement Savings (Select currency: CA	ND/CHF/CNY/	Account Numb	per	Primary Account
Others (Please specify)			Account Numb	per	Primary Account
Input by			Checked by		
Name			Name		
Signature			Signature		
	_ Y _ Y			M_M Y_Y_Y_Y	
Date DID MIM YIY	Y Y			M _I M Y _I Y _I Y _I Y	
Date DID MIM YIY	Y Y		Date DID	мլм Үүүүү	
Date DID MIM YIYI Signature Scanning Scanned by	Y Y			M M Y Y Y Y	
Date DID MIM YIYI Signature Scanning Scanned by	Y Y		Date DID	M _I M Y _I Y _I Y _I Y	
Date D D M M Y Y Y Signature Scanning Scanned by Name	Y Y		Date DID	M M Y Y Y Y	
Date D D M M Y Y Y Signature Scanning Scanned by Name	Y Y		Date DID Checked by Name	M M Y Y Y Y	
Signature Date D D M M Y Y Y Signature Scanning Scanned by Name Signature	Y Y		Date DID Checked by Name	M _I M Y _I Y _I Y _I Y	
Date D D M M Y Y Signature Scanning Scanned by Name Signature			Date DID Checked by Name Signature		
Date D D M M Y Y Y Signature Scanning Scanned by Name			Date DID Checked by Name Signature	M	
Date D D M M Y Y Y Signature Scanning Scanned by Name Signature			Date DID Checked by Name Signature		
Date DDMM Y Y Y Signature Scanning Scanned by Name Signature Date DDMM Y Y Y Credit Card Source Code			Date DID Checked by Name Signature		
Date DD MM Y Y Y Signature Scanning Scanned by Name Signature Credit Card Source Code 0 0 0 8 0 9 9 0 0	Y Y Y Y Y B O 3 B H		Date DID Checked by Name Signature		
Date DD MM YYY Signature Scanning Scanned by Name Date DD MM YYY Credit Card Source Code 0 0 0 0 8 0 9 9 0 0	/ B 0 3 B H		Date DID Checked by Name Signature		
Date DDMMMYYY Signature Scanning Scanned by Name Date DDMMMYYY Credit Card Source Code 0 0 0 0 8 0 9 9 0 0	/ B 0 3 B H	No	Date DID Checked by Name Signature	M _I M Y _I Y _I Y _I Y	
Date DD MM YYY Signature Scanning Scanned by Name Date DD MM YYY Credit Card Source Code 0 0 0 0 8 0 9 9 0 0	/ B O 3 B H	No VC Y/N VC Y/N	Date DID Checked by Name Signature Date DID EV	M_M	CO2
Signature Scanning Scanned by Name Date DDDMMMYYY Credit Card Source Code DDDMBDDPDMMMYYY Credit Card Source Code DDDMBDDPDMBD	Y Y Y Y Y Y Y Y Y Y	No WC Y/N	Date DID Checked by Name Signature	M_M	CO2 Checked By/Date

Form W-8BEN

(Rev. February 2014)

Department of the Treasury Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E. ▶ Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben. ► Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do N	Of use this form if:			Instead, use Form:
• You	are NOT an individual			W-8BEN-E
• You	are a U.S. citizen or other U.S. person, including a residen	t alien individual		W-9
	are a beneficial owner claiming that income is effectively cer than personal services)		trade or business	s within the U.S.
• You	are a beneficial owner who is receiving compensation for p	personal services performed in	the United State	es 8233 or W-4
• A pe	rson acting as an intermediary			W-8IMY
Par	Identification of Beneficial Owner (see	instructions)		
1	Name of individual who is the beneficial owner	instructions)	2 Country of	citizenship
3	Permanent residence address (street, apt. or suite no., or	rural route). Do not use a P.C). box or in-care	e-of address.
	City or town, state or province. Include postal code where	e appropriate.		Country
4	Mailing address (if different from above)			
	City or town, state or province. Include postal code wher	e appropriate.		Country
5	U.S. taxpayer identification number (SSN or ITIN), if requ	ired (see instructions)	6 Foreign tax	identifying number (see instructions)
7	Reference number(s) (see instructions)	8 Date of birth (MM-DD-Y	YYY) (see instruc	ctions)
Par				
9			within tr	ne meaning of the income tax treaty
	between the United States and that country.			
10	Special rates and conditions (if applicable—see instruc	-		
	of the treaty identified on line 9 above to claim a	% rate of within	olding on (specif	y type of income):
	Explain the reasons the beneficial owner meets the terms	s of the treaty article:		··································
Part	III Certification			
	penalties of perjury, I declare that I have examined the information aunder penalties of perjury that:	on this form and to the best of my k	knowledge and bel	ief it is true, correct, and complete. I further
•	I am the individual that is the beneficial owner (or am authorized am using this form to document myself as an individual that is ar			
•	The person named on line 1 of this form is not a U.S. person,			
•	The income to which this form relates is:			
	(a) not effectively connected with the conduct of a trade or busin	ess in the United States,		
	(b) effectively connected but is not subject to tax under an applic	able income tax treaty, or		
	(c) the partner's share of a partnership's effectively connected in	come,		
•	The person named on line 1 of this form is a resident of the treaty the United States and that country, and	y country listed on line 9 of the form	n (if any) within the	meaning of the income tax treaty between
•	For broker transactions or barter exchanges, the beneficial owner	r is an exempt foreign person as de	efined in the instruc	ctions.
	Furthermore, I authorize this form to be provided to any withhold any withholding agent that can disburse or make payments of the if any certification made on this form becomes incorrect.			
Sign	Here			
	Signature of beneficial owner (or individua	al authorized to sign for beneficial o	owner)	Date (MM-DD-YYYY)
	Print name of signer	Ca	apacity in which act	ting (if form is not signed by beneficial owner)
For P	aperwork Reduction Act Notice, see separate instruction	ons. Cat. No. 2	25047Z	Form W-8BEN (Rev. 2-2014)

Form W-8BEN

(Rev. February 2014)

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7	Reference number(s) (see instructions)	8 Date of birth (MM-DD-Y	 'YYY) (see instru	ctions)
Par	II Claim of Tax Treaty Benefits (for chap	ter 3 nurnoses only) (see	inetructions)	
9				ne meaning of the income tax treaty
•	between the United States and that country.			ie meaning of the meetine tax treaty
10	Special rates and conditions (if applicable—see instru-	ctions): The beneficial owner is	claiming the pro	visions of Article
	of the treaty identified on line 9 above to claim a	•		
	Explain the reasons the beneficial owner meets the term	s of the treaty article:		
Part				
	penalties of perjury, I declare that I have examined the information under penalties of perjury that:	on this form and to the best of my	knowledge and bel	ief it is true, correct, and complete. I further
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Sign	Here			
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	Print name of signer	Ca	apacity in which ac	ting (if form is not signed by beneficial owner)
For P	perwork Reduction Act Notice, see separate instruction	ons. Cat. No. :	25047Z	Form W-8BEN (Rev. 2-2014)