

TAX COMPLIANCE - INTERNATIONAL EXCHANGE OF INFORMATION AGREEMENT INDIVIDUAL SELF-CERTIFICATION FORM

Tax regulationsⁱ require the collection of certain information about each account holder's tax residency and citizenship status.

This form is designed to capture the citizenship and residency for tax purposes of the person entitled to the income and assets associated with an account (the beneficial owner). Should you be completing this form on behalf of the beneficial owner, you should complete the form using information relating to their citizenship and residence for tax purposes rather than your own.

Please complete, where applicable, the relevant sections below in relation to all relevant accounts and provide any additional information as may be required. Please be advised that in certain circumstances we may be required to share this information with relevant tax authorities.

If you are a US citizen or resident of the US for tax purposes under US Internal Revenue Service ("IRS") regulations you should also provide a completed, signed and dated IRS Form W-9.

Do not use this form if you are an entity, nominee or other intermediary. Instead you should complete and provide the appropriate Self-Certification form.

If you have any questions about how to complete this form, please contact your tax advisor.

Part 1 –Customer Identification Name of Account Holder: Family Name Surname (s): Title: Middle Name(s): First or Given Name: **Permanent Residence Address:** Street: Province, State or Town: Postal Code: City: Country: Place (City/Town) and Country of Birth: Date of Birth DD/MM/YYYY:

Identification of Beneficial Owner Only complete if different from the account holder and complete a separate form for each Beneficial Owner

Family Name or Surname (s):			
Title:			
First or Given Name:		Middle Name(s):	
Permanent Residence Address: Street:			
Province, State or Town:	-	Postal Code:	
City:			
Country:			
Place (City/Town) and Country of Birth: Date of Birth DD/MM/YYYY:			
Part 2 – Tax Residency/Citi	zenship Information (con	ntinue on a separate sheet if necessary)	
		e following countries and my TIN/functional equivalent in N/functional equivalent is unavailable:	ո each
Account Holder:			
Country:		TIN or tick the box if TIN is unavailable:	
			_
_			
And Beneficial Owner, if appl	icable:		
Country:		TIN or tick the box if TIN is unavailable:	

Part 3 – Authorisations and Undertakings

1. I authorise the Recipient to provide, directly or indirectly, to any relevant tax authorities or any party authorised to audit or conduct a similar control of the Recipient for tax purposes, a copy of this form and to disclose to such tax authorities or such party any additional information that the Recipient may have in its possession that is relevant to my qualification for any benefits claimed on the basis of this Declaration. I acknowledge and agree that information contained in this form and information regarding income paid or credited to or for the benefit of the account(s) set out above may be reported to the tax authorities of the country in which such income arises and that those tax authorities may provide the information to the country or countries in which I am a resident for tax purposes.

- 2. I authorise the Recipient to provide, directly or indirectly, a copy of this form and information regarding income paid or credited to or for the benefit of the account(s) set out above to: (i) any person that has control, receipt, or custody of income to which this form relates; (ii) any person that can disburse or make payments of income to which this form relates; or (iii) any party authorised to audit or conduct a similar control of aforementioned persons for tax purposes.
- 3. I certify that I am the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner of an account held at the Recipient financial institution

I declare tha	at all statements made in this declaration are, to the	best of my knowledge and belief, correct and complete.
I agree that	t I will submit a new form within 30 days if any certific	ation on this form becomes incorrect.
Sign		Print
Here:		Name:
Date:		
	(DD-MM-YYYY)	_
If you hav	ve signed this on hehalf of the account hold	er please indicate the capacity in which you have

acted here:

¹ The term "tax regulations" refers to regulations created to enable automatic exchange of information and include Foreign Account Tax Compliance Act, various Agreements to Improve International Tax Compliance entered into between the UK, the Crown Dependencies and the Overseas Territories, and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information[, as implemented in the relevant jurisdictions].