

(Please complete the following information in BLOCK CAPITALS)

A. Name of the Account Holder* _____

B. Gender (Male/Female/Others)* _____

C. Nationality* _____

D. Occupation Type:*

i. Business

ii. Service

iii. Others

Declarations and Signature*

1. I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

2. I acknowledge that the information provided on this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this/these account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be a tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

3. I certify that I am the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates.

4. I understand that the information supplied by me is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with Citi setting out how they may use and share the information supplied.

Signature: * _____

Print name: * _____

Date:* _____

Note: If you are not the Account Holder please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.

Capacity: * _____