



KNOW YOUR CUSTOMERS RECORDS

Complete all the applicable fields in **BLOCK CAPITALS**

Customer Number:

Surname:

Name:

Maiden Name:

Gender: Male Female

Date of birth:
(DD / MM / YYYY)

Place of birth:

Country: Town/City:

Marital Status: Single Married-Community Married-Separation
 Divorced Widowed Unmarried-Couple

Number of Dependents:

Nationality: Other Nationality:

National Identity Number:

Issue date: Expiring date:
(DD / MM / YYYY) (DD / MM / YYYY)

Documents required:

Valid Seychelles ID Card Valid Seychelles Passport Birth Certificate

Valid Passport Number:
(Mandatory for Non-Seychellois)

Issue date: Expiring date:
(DD / MM / YYYY) (DD / MM / YYYY)

Street:

Sub Discript:

District:

Country:

Type of Residence: Employer provided Living with relatives Mortgaged
 Owned Rented Other (Specify)

Documents required:

Utility Bill (Accounts statement/invoice must include PUC logo) in own name or accompanied by letter from homeowner including valid national identity card or passport of homeowner

Or

Valid tenancy Agreement

Letter from employer confirming address where residence is provided by employer

Or

Landline Telecom (C&W, Airtel, Intelevison) Entertainment Bill (c&w, intelevision, DSTV)

Mailing Address: (if Different from above)

Street:

Sub Discript:

District:

Country:

Contact Number:

Home phone number:

Office phone number:

Mobile phone number:

Email Address:

(Maximum 56 characters)

Occupation: Self-employed Private Parastatal
 Government Student Retired
 Home-maker Pensioner Others

Other details: _____

Occupation status: Self-employed Private Parastatal Government

Other details: _____

SIGNATORY/DIRECTOR/SHAREHOLDER STATUS THROUGH NON-INDIVIDUAL ENTITY INVOLVEMENTS

NAME OF NON-INDIVIDUAL ENTITY (Business / Association / NGO)	Director		Owner	
	Yes	No	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Declarations

I. Politically Exposed Persons (PEP) Declaration

Definition: The law defines a Politically Exposed Person as a Seychellois or foreign individual entrusted with a prominent public function in the last three (3) years and includes any immediate family member or close associate of such an individual.

Note a “family member” includes a spouse or a partner, children and their spouses or partners, parents and siblings. A “close associate” is any person having a partnership, trust, or business relations with a PEP.

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I.1 Having understood the above definition for Politically Exposed Person, I hereby

- confirm that I am not a Politically Exposed Person
- I am not closely associated with a Politically Exposed Person
- I am not an immediate family member of a Politically Exposed Person

4. Source of wealth declaration

I declare my source of fund as follows:

Type	Currency	Current value in SCR equivalent		
		Less than SCR 1 M	Between SCR 1 M & SCR 5 M	More than SCR 5 M
Bank Balances		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Real Estate		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial Assets (e.g. Stock / Shares)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. AUTHORISATIONS AND UNDERTAKINGS

I hereby authorize Development Bank of Seychelles (DBS) to provide, directly or indirectly, to relevant authorities any information DBS may have in its possession on me (or if I am signing this form on behalf of the Borrower and/or the Beneficial Owner; on the Borrower and/or the Beneficial Owner), as may be required pursuant to intergovernmental agreements to exchange financial account(s) information.

I hereby provide my consent to DBS to execute the lawful processing of my personal data for the purpose of this application and for subsequent transactions.

I also understand that no disclosure is to be made by DBS to third parties except as provided in certain specific circumstances whereby the Bank may still process and is required to disclose the personal data in view of its statutory obligations, under mandated Credit Reporting or under any other law or by a court order.

I declare that all the information provided on this form is correct and complete to the best of my knowledge and I undertake to indemnify the Bank and its designated Officer in the event I would have made any misstatement in this documentation.

I undertake to inform DBS within 30 days should any certification on this statement become incorrect or incomplete.

Signature:

Name:

Date: