Controlling Person Self-certification Form



Section 1: Identification of Controlling Person

(Please complete Sections 1-5 in BLOCK CAPITALS)

Details of Legal Entity
Legal name of entity
Business registration no.
Details of Controlling Person
□ Dr □ Mr □ Miss □ Mrs □ Mdm
Name
NRIC/Passport no.
Nationality
Date of birth D D M M Y Y Y Y
Gender Male Female
Residential/Registered/Permanent Address
Country
Coefficial Co Double of Control Position and Atlantia (LC)
Section 2: Declaration of Tax Residency (other than U.S.) Please tick one option and complete as appropriate:
I confirm that I am a tax resident in Singapore and do not have any foreign tax residency and/or foreign indicia.
☐ I confirm that I am a tax resident of the following countries:
Please provide the tax residency information in the following table. If exceed three countries, please use a separate sheet
Country of tax residency
Taxpayer ID No. (TIN)
If no TIN, tick one of the reasons
☐ A The Country/Jurisdiction where the Account Holder is a resident does not issue TINs to its residents
☐ B The Account Holder is otherwise unable to obtain a TIN or equivalent number
(Please explain why you are unable to obtain a TIN if you have selected this reason)
□ C No TIN is required (Note: Please select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).

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Country	Country of tax residency					
Taxpayer ID No. (TIN)						
If no TIN, tick one of the reasons						
\Box A	A The Country/Jurisdiction where the Account Holder is a resident does not issue TINs to its residents					
□В	$oxedsymbol{\square}$ B The Account Holder is otherwise unable to obtain a TIN or equivalent number					
	(Please explain why you are un	able to obt	ain a TIN if you have selected this reason)			
□с	•		reason if the domestic law of the relevant of the TIN issued by such jurisdiction).			
Country of tax residency						
Taxpaye	er ID No. (TIN)					
□А	•		nt Holder is a resident does not issue TINs to its residents obtain a TIN or equivalent number			
B			·			
□ c	(Please explain why you are unable to obtain a TIN if you have selected this reason) No TIN is required (Note: Please select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).					
Section 3: I	Declaration of U.S. Citizenship o	r U.S. Resid	lence for Tax purposes			
	one option and complete as appr		• •			
	n that I am a U.S. citizen or reside t under the substantial presence t		.S. for tax purposes (i.e. green card holder or			
U.S. Federal TIN			Туре			
		SSN	Social Security Number: U.S. individuals			
		☐ ITIN	Individual Taxpayer Identification Number: Resident Alien and do not have/not eligible to get an SSN			
		☐ EIN	Employer Identification Number			
surrend		by the atta	ory) but am no longer a U.S. citizen as I have voluntarily ched documents acceptable by RHB. ne U.S. for tax purposes.			

RHB Bank Berhad (Co. Reg. No. S99FC5710J) Controllin

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Section 4: Type of Controlling Person

Please tick ONLY one type of Controlling Person:

If you are a controlling person of a legal person:	If you are a controlling person of a Trust:	If you are a controlling person of a legal arrangement (non-Trust):
Control by ownership	Settlor	☐ Settlor-equivalent
☐ Control by other means	☐ Trustee	☐ Trustee-equivalent
☐ Senior managing official	☐ Protector	☐ Protector-equivalent
	☐ Beneficiary	☐ Beneficiary-equivalent
	Other	Other-equivalent

Section 5: Declaration and Undertaking

I understand that the information supplied by me is subject to the RHB Bank Berhad Singapore's Terms and Conditions Governing Accounts, which has been made available to me and via rhbgroup.com.sg

I acknowledge that the information contained in this form and information regarding the Controlling Person and all accounts held by the Entity Account Holder with you, to which this form relates may be provided to the local tax authority, IRAS and they may exchange this information with tax authorities of other countries pursuant to intergovernmental agreements to exchange financial account information.

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

I undertake to advise you within 30 days of any change in circumstances which affects the tax residency status of the Controlling Person named in Section 1 of this form or causes the information contained herein to become incorrect or incomplete, and to provide you with a suitably updated self-certification and declaration within 90 days of such change in circumstances.

Signature
Name
NRIC/Passport Number
Date D D M M 2 0 Y Y