**1. Customer:**​

|  |  |
| --- | --- |
| Name |  |
| Middle name |  |
| Surname |  |
| Personal Identification Number |  |
| Birth date |  |
| Country of birth |  |
| Place of birth |  |

​**2. Identification document:​**

|  |  |
| --- | --- |
| Document type |  |
| ID document number |  |
| Issuing country |  |
| Issuing authority |  |
| Issuing date |  |
| Valid until |  |

​**3. Contact points:**​

|  |  |  |  |
| --- | --- | --- | --- |
| Legal postal address | | |  |
| Permanent postal address  (if different from above address, mandatory for Non-Resident) | | |  |
| Phone |  |  |  |
| Email |  |  |  |

**4. Employment status:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Employed |  | Farmer |
|  | Not employed |  | Leave of absence |
|  | Retired |  | Part time job |
|  | Shop owner |  | Housewife |

**5. Name of person who is/was politically exposed:**

|  |
| --- |
|  |

**6. Country where position is/was held:**

|  |
| --- |
|  |

**7. Time period the position is/was held:**

|  |
| --- |
| – |

**8. Title of Position Held:**

|  |
| --- |
|  |

**9. What is the relationship of the person named above to the Registered Owner?:**

|  |  |
| --- | --- |
|  | Self |
|  | Family member |
|  | Close associate |

**“PEP’s Close business associate”**: any natural person who has benefit from a joint ownership or from business relations or who has any other close business relations with a PEP.

**“PEP’s Close family member”**: a PEP’s spouse or extra-marital partner, the parents, the brothers and sisters, the children and their spouses or extra-marital partners.

**9. On what basis inflows to the account are expected:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Earnings |  | Funds entry to Republic of Serbia |
|  | Contract |  | Statement of origin of money |
|  | Inheritance |  | Return of Capital from Abroad |
|  | Other |  |  |

**10. Declaration:**

|  |
| --- |
| I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false, or untrue, or misleading, or misrepresenting, I am aware that I may be held liable for it. |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place, Date Organization Unit

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Customer Bank’s officer