

CDD/ECDD - Individual "Due Diligence Form"
(For high risk customers, please complete ECDD section also)

KNOW YOUR CUSTOMER DETAILS									
Primary Account Holder									
Customer ID (for Existing Customer)		400904		Account Type					
Name (As Per Passport)		SUBASH AND SONS PVT LTD		Account No (for Existing Customer)					
Date of Birth		24-03-2010		Place of Birth					
Nationality				Account Opening Date					
Country of Citizenship & dual (If any)		Resident <input type="checkbox"/>	Non-Resident <input type="checkbox"/>	Country of current residency					
		Others (Please specify)							
Occupation		Salaried <input type="checkbox"/>	Business <input type="checkbox"/>	If business, please mentioned line of business activity					
Annual Income (AED)		0	Source of funds (please mentioned the document)			Purpose of Account Opening			
Tax Registration /Identification no (If Any)		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Tax ID number					
ADDRESS INFORMATION (Primary Account Holder)									
Primary Address		25							
Country Name:	NEPAL		City:	KAT		Po Box			
Mobile	402-839-2391		Telephone 1			Telephone 2			
Email Id	subash.and.sons@gmail.com								
Change of residential status after Opening account			Yes or No, if Yes, please provide the current residency information <input type="checkbox"/>						
Country:			City:			Po Box			
JOINT ACCOUNT HOLDERS 1									
Name									
Primary Address									
Country			City:			Po Box			
Mobile			Telephone 1			Telephone 2			
Email Id									
Change of residential status after Opening account			Yes or No, if Yes, please provide the current residency information <input type="checkbox"/>						
Country:			City:			Po Box			
JOINT ACCOUNT HOLDERS 2									
Name									
Primary Address									
Country			City:			Po Box			
Mobile			Telephone 1			Telephone 2			
Email Id									
Change of residential status after Opening account			Yes or No, if Yes, please provide the current residency information <input type="checkbox"/>						
Country:			City:			Po Box			
Account Holder		Primary account holder		Joint Account Holder 1			Joint Account Holder 2		
Nationality									
Passport		Yes	No	Yes	No	Yes	No		

Visa/EID	Yes	No	Yes	No	Yes	No
Valid Residence Address	Yes	No	Yes	No	Yes	No
Proof of Source of Income	Yes	No	Yes	No	Yes	No

1. LIST OF ALL OTHER LINKED ACCOUNTS / CUSTOMER ID

Account Name	Account Number	Account Type	Date Of Opening	Currency	Status

A. Branch official observations during review of existing relationship

Whether the conduct of the Account is satisfactory?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Transaction commensurate with nature/Volume of customer profile	Yes <input type="checkbox"/>	No <input type="checkbox"/>
During the last One Year If any High Value transactions are observed	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please provide the details of transactions	1. null	
				2.null	
				3. null	
				4. null	
If any suspicion is observed	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please specify- null		
Whether the branch is satisfied with transactions in the account	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Whether the branch has obtained the supporting document of transactions for the record and due diligence. (Source of Funds, Proof of transactions ec.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

B. Details of Transaction in the account

Current turnover and expected turnover in the account (AED)	Current turnover	Expected turnover
	0	0
Details regarding the anticipated expected transactions that should be debited/ credited into the account	Debit	Credit
Expected type of transactions (e.g. Cash, Cheque, TT, etc.)		
Expected volume of transactions (Annually based on last year's transactions)	Frequency	
	Volume	

Known country with customer conduct transactions.

1. null	2. null
3. null	4. null

Known or expected countries related to transactional activity (other than mentioned above)

1. null	2. null	3. null	4. null
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C. Sanctions screening & Due Diligence – Primary Account Holder

If any Positive match, please Mention the Sanctions List as below

UAE	UN	OFAC	HMT	EU	Others null
CBUAE BBL check done	Yes		No		
Google open Media search	Yes		No		
Internal Deny list name screening	Yes		No		
If any suspicion is observed	Please specify in details - Material adverse or Non Material adverse information				
Please confirm, If any suspicion is observed branch has obtained the supporting document to discount the red flag appropriately -			Yes .../ No..../NA....If no, please provide the reason for the same-null		

Sanctions screening & Due Diligence- Joint Account Holder 1, 2, 3.

If any Positive match, please Mention the Sanctions List as below

UAE	UN	OFAC	HMT	EU	Others	null
CBUAE BBL check done		Yes		No		
Google open Media search		Yes		No		
Internal Deny list name screening		Yes		No		
If any suspicion is observed		Please specify in details - Material adverse or Non Material adverse information				
Please confirm, If any suspicion is observed branch has obtained the supporting document to discount the red flag appropriately -			Yes .../ No.../NA....If no, please provide the reason for the same-null			
Whether customer is PEP			Yes	No	NA	
if yes, senior management approval is attached (Customer/UBO)			Yes	No	NA	
Customer requesting for Foreign Currency (USD/GBP/EURO. Etc)			Yes	No	NA	
if yes, senior management approval is attached			Yes	No	NA	
Customer Risk (please mention the correct risk classification derived from CRA calculator)			Yes	No	NA	
Reason for categorizing customer risk as High risk. (only for High risk customer) Analysis of underline ML/TF risk. null						
Further, Due Diligence done by the Branch for account being categorized as high risk. (provide the supporting document and information) (only for High risk customer) null						
Observations of Bank official (List any adverse features if any found post CDD/ECDD) null						
Account opening officer/ Branch official			Branch official			
Signature : null			Signature : null			
Name : null			Name : null			
Designation:null			Designation:null			