

# SINGER FINANCE (LANKA) PLC - PB 813 PQ

No: 498, R. A. De Mel Mawatha, Colombo 03, Sri Lanka.  
Deposits Tel : 0112 100731-4 E-mail : singerdeposit@singersl.com

## Know Your Customer (KYC) Form – Individuals

(Requirement in terms of Financial Transactions Reporting Act No 06 of 2006)

| Personal Details  |   |                        |                        |
|---|---|------------------------|------------------------|
| Full name : Mr/Mrs/Miss/Dr/Rev<br>(Please underline surname)  |   |                        |                        |
| National Identity Card No (NIC)   |   |                        |                        |
| Date of Birth   | D   | D                      | M M Y Y Y Y            |
| Nationality   | <input type="checkbox"/> Sri Lankan<br><input type="checkbox"/> Resident<br><input type="checkbox"/> Non Resident - Country of Residence .....<br><input type="checkbox"/> Sri Lankan with Dual Citizenship - Country ..... |                        |                        |
| Contact Information   |   |                        |                        |
| Permanent Address   |   |                        |                        |
| Mailing Address   |   |                        |                        |
| Contact No  | Res:  | Mobile:                | Office: Fax:           |
| E-mail  |   |                        |                        |
| Marital Status  | Married <input type="checkbox"/> Single <input type="checkbox"/> Other <input type="checkbox"/>   |                        |                        |
| Employment Information  |   |                        |                        |
| Employment Status   | Self employed   | Part-time employed     | Retired                |
|   | Full-time employed  | Not currently employed | Others (Specify) ..... |
| Occupation/ Position held   |   |                        |                        |
| Name of the Employer  |   |                        |                        |
| Address of the Employer   |   |                        |                        |
| Nature of Business  | Manufacturing   | Import/ Export         |                        |
|   | Finance/Insurance   | Wholesale              |                        |
|   | Construction  | Communications         |                        |
|   | Retail  | Business Services      |                        |
|   | Transport   | Real Estate            |                        |
|   | Restaurants   | Public Services        |                        |
|   | Hotel/ Boarding house   | Gem and Jewelry        |                        |
|   | Casino / Gambling house / Night Clubs   | Others (Specify) ..... |                        |
|   | Personal & Household Services   | .....                  |                        |
| Average Monthly Income  |   |                        |                        |
| <input type="checkbox"/> Less than 50,000 <input type="checkbox"/> 100,001 to 250,000 <input type="checkbox"/> 500,001 to 1,000,000 |   |                        |                        |
| <input type="checkbox"/> 50,001 to 100,000 <input type="checkbox"/> 250,001 to 500,000 <input type="checkbox"/> More than 1,000,000 |   |                        |                        |

**Purpose for opening, maintaining and the account usage**

☐ Savings/Investment purpose      ☐ Education Purpose      ☐ Other .....

**Source of Funds Expected Source and nature of credits into the account (As appropriate)**

☐ Salary Income      ☐ Savings/ Investments      ☐ Business Profit      ☐ Family Remittances  
☐ Donation/Charity/Gift      ☐ Sale of property/assets      ☐ Others (Please specify) .....

**Expected Mode of Transactions**

☐ Cash      ☐ Cheque      ☐ Electronic Fund Transfer      ☐ Other (Please Specify)

.....

**Other Information**

|  |  |                       |
|--|--|-----------------------|
| Source of Wealth:<br>Wealth generated from   | Business/ Ownership                                      | Inheritance           |
|  | Investments  | Other (Specify) ..... |
|  | Profession/ Employment                                   | .....                 |
| Other connected Business/<br>Professional activities and<br>Interest   |  |                       |
| Are you or any of your<br>immediate family is a<br>politically exposed person<br>(PEP)? (Refer definition<br>below)                        | Yes <input type="checkbox"/> No <input type="checkbox"/> |                       |
| If yes please specify  |  |                       |
| Are you a U.S Citizen, Resident, or Occupant through<br>overseas assets, as defined by the Foreign Account Tax<br>Compliance Act (FATCA) ? | Yes <input type="checkbox"/> No <input type="checkbox"/> |                       |

**FIU Definition**

**PEP's (Politically Exposed Persons)** - Individuals in Sri Lanka or abroad who are or have been entrusted with prominent public functions. E.g. Head of State or government, Senior politicians, Senior government, Judicial or military officials, senior executives of state owned corporations, important political party officials.

**Immediate Family Member** - Includes the spouse, children and their spouses or partners, parents, siblings and their spouses and grandchildren and their spouses.

**Declaration of the Customer**

**I confirm that the details given above are true and correct.**

.....  
Signature

.....  
Date

**Mandatory Checks (For Office use Only)**

**1. Name, Date of Birth and Nationality Verification:** To be supported by one of the following.

☐ National Identity Card      ☐ Passport (Unexpired)  
☐ Driving License      ☐ Marriage Certificate (Name Change)

**2. Address Verification:** Residential address to be supported by one of the following accepted documents  
**(N.B - Mobile phone bills are not accepted)**

☐ National Identity Card      ☐ Bank Statement      ☐ Letter from a public authority  
☐ Tenancy agreement      ☐ Utility bill (Specify) .....      ☐ Income Tax Receipt/ Assessment Notice  
☐ Driving License      ☐ Employment Contract      ☐ Other (Specify) .....

*(Photocopies of the above documents should be obtained and certified by the Company Officer as 'Original Seen')*

Authorized by..... (Name)

.....(Signature)