

CLIENT SERVICES QUESTIONNAIRE

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CLIENT SERVICES QUESTIONNAIRE

Please complete this questionnaire in **BLACK INK** and **BLOCK CAPITALS**.

Name	
Private Banker	

The Kleinwort Hambros Group of Companies

Throughout this Client Services Questionnaire, all references to Kleinwort Hambros shall be construed as references to the Kleinwort Hambros entity that will provide you with the particular client service you have selected.

UK

SG Kleinwort Hambros Bank Limited
5th Floor, 8 St James's Square
London SW1Y 4JU

Jersey

SG Kleinwort Hambros Bank (CI) Limited
PO Box 78, SG Hambros House
18 Esplanade, St Helier
Jersey JE4 8PR

Guernsey

SG Kleinwort Hambros Bank (CI) Limited – Guernsey Branch
PO Box 6, Hambro House
St Julian's Avenue, St Peter Port
Guernsey GY1 3AE

Gibraltar

SG Kleinwort Hambros Bank (Gibraltar) Limited
PO Box 375, Hambro House
32 Line Wall Road, Gibraltar

PART 1 ABOUT YOU

N.B. For additional joint account holders, please use an additional form.

	Account Holder	Joint Account Holder (if applicable)
Surname		
Forename(s)		
Former name: e.g. maiden name/former married name/any previous name(s)		
Title (Mr/Mrs/Ms/Miss/Dr/Other)		
Date of birth	DD / MM / YYYY	DD / MM / YYYY
Town and country of birth		
Marital status		
Nationality		
Passport/identity card number		
Issuing authority of the passport		

Contact details	Account Holder	Joint Account Holder (if applicable)
Telephone (home)		
Telephone (business)		
Telephone (mobile)		
Facsimile		
Email address		

Address	Account Holder	Joint Account Holder (if applicable)
Permanent residential address		
	Postcode	Postcode
Owned/rented/(other _____)		
Length of time at this address		

PART 1 ABOUT YOU

Address continued	Account Holder	Joint Account Holder (if applicable)
If less than two years, state previous address	Postcode	Postcode
Correspondence address (if different)	Postcode	Postcode
Reason for separate mailing address		
Do you have a residential address in the US?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Dependants	Account Holder	Joint Account Holder (if applicable)
Do you have any dependants?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name/date of birth/relationship		

Details of your principal bankers	Account Holder	Joint Account Holder (if applicable)
Name of account holder		
Name and address of bank	Postcode	Postcode

PART 1 ABOUT YOU

Employment Details	Account Holder	Joint Account Holder (if applicable)
Employment details (please tick)	Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Other <input type="checkbox"/>	Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Other <input type="checkbox"/>
Please provide details including occupation (current or previously held if retired), employer and sector		
Managerial responsibilities within an entity whose securities are admitted to trading on a regulated market. (You will be discharging managerial responsibilities within an issuer if you are: (i) a member of the administrative, management or supervisory body of that entity; or (ii) a senior executive who is not a member of the bodies in (i), but who has regular access to inside information relating directly or indirectly to that entity and who has the power to take managerial decisions affecting the future developments and business prospects of that entity.)		
Directorships held or significant shareholdings		

PART 1 ABOUT YOU

Income and Expenditure	Account Holder	Joint Account Holder (if applicable)
Gross annual income from employment (please state currency) If self-employed, state business profits		
Basic salary/drawings per annum		
Amount and source of other annual income (e.g. dividends, pensions, rental income)		
Estimated annual expenditure		

Estimated Net Worth (please state currency)

Assets	Account Holder	Joint Account Holder (if applicable)
Main residential property		
Cash (e.g. current a/c etc.)		
Savings (e.g. long term deposits etc.)		
Discretionary managed portfolios		
Advisory managed portfolios		
Directly held equities (no management)		
Alternative investments incl. hedge funds		
Insurance company bonds		
Investment property incl. buy to let, holiday homes, commercial property		
Other assets		
Total assets		

PART 1 ABOUT YOU

Liabilities	Account Holder	Joint Account Holder (if applicable)
Mortgage(s)		
Tax		
Other (e.g. guarantees)		
Total liabilities		

Wealth Summary	Account Holder	Joint Account Holder (if applicable)
A. Total Net Worth (Assets – Liabilities)		
B. Main residential property		
Net Investment Wealth (A-B)		

Of the funds to be held with SG Kleinwort Hambros, how much do you require initially to be held for immediate access?

a) 0-10% b) 11-20% c) 21-40% d) 41-70% e) over 70%

Source of Wealth	Account Holder	Joint Account Holder (if applicable)
Please provide a full description, e.g. sale of business, trading profits, retained income, inheritance, country etc.		
Are there any anticipated changes in your circumstances?		

Other Information	Account Holder	Joint Account Holder (if applicable)
Pension protection products, insurance policies, health issues/concerns etc.		

PART 1 SANCTIONS AND EMBARGOS QUESTIONNAIRE

FOR INDIVIDUALS

Please complete this due diligence questionnaire and return to your contact at Kleinwort Hambros. Alternatively, you may respond to these questions via email or by post.

Please also note that this questionnaire may be shared with any other entity of Societe Generale Group, for the exclusive purpose of fighting money laundering and terrorist financing. By signing this questionnaire, you expressly agree to this sharing. Kleinwort Hambros took all necessary security measures to ensure the confidentiality of the information transmitted through this questionnaire.

Questionnaire

1. Are you the target of any economic or financial sanctions administered by the UN, the EU, HMT, OFAC, or pursuant to jurisdiction-specific sanctions regimes applicable where you reside? Yes No

a) If yes, please provide details.

2. Are you located within or operating from any of the following countries:

a) Cuba, Iran, North Korea, Sudan, South Sudan, Syria and the Crimea and Sevastopol Region, Yes No

b) Afghanistan, Belarus, Burma/Myanmar, Burundi, Central African Republic, DRC, Egypt, Eritrea, Iraq, Lebanon, Libya, Republic of Guinea, Republic of Guinea-Bissau, Somalia, Tunisia, Venezuela, Yemen or Zimbabwe ("Sanctioned Countries")? Yes No

3. Are you engaged in transactions, investments, business or other dealings that directly or indirectly involve or benefit any Sanctioned Countries or any person or entity which is the target of any sanctions ("Sanctioned Persons")? Yes No

4. If the answer to Question 2 or 3 is yes:

a) Please explain and detail your relationship(s) with the Sanctioned Country or Sanctioned Person.

b) Please explain if there is an intention to expand the scope of the relationship(s).

c) Please confirm that the transactions or new account under consideration with Kleinwort Hambros do not involve any Sanctioned Countries or Sanctioned Person directly or indirectly.

PART 2 BANKING SERVICES

YOUR BANK ACCOUNT DETAILS

Type of account required	Individual <input type="checkbox"/> Joint <input type="checkbox"/>
Which entity do you wish to provide the service?	Gibraltar <input type="checkbox"/> Guernsey <input type="checkbox"/> Jersey <input type="checkbox"/> UK <input type="checkbox"/>
Title of account (e.g. household a/c, bill a/c etc.)	
Currency of account (multiple possible)	GBP <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/> CHF <input type="checkbox"/> Other <input type="checkbox"/> _____
Do you require segregated income and capital accounts?	Yes <input type="checkbox"/> No <input type="checkbox"/>

BANK ACCOUNT ACTIVITY

Purpose of the account	
Estimated frequency of transactions	
Estimated value range of transactions	
Source of account opening funds	

PAYMENTS/DEPOSITS

<p>If you are likely to require Kleinwort Hambros to make or receive any regular payments, please provide details of the estimated frequency, source and destination countries, and of the expected beneficiary or remitter. (Please do not include Direct Debits or Standing Orders)</p>	<p>Incoming</p>	<p>Outgoing</p>
--	------------------------	------------------------

PART 2 BANKING SERVICES (ADDITIONAL BANK ACCOUNT IF REQUIRED)

YOUR ADDITIONAL BANK ACCOUNT DETAILS

Type of account required	Individual <input type="checkbox"/>	Joint <input type="checkbox"/>			
Which entity do you wish to provide the service?	Gibraltar <input type="checkbox"/>	Guernsey <input type="checkbox"/>	Jersey <input type="checkbox"/>	UK <input type="checkbox"/>	
Title of account (e.g. household a/c, bill a/c etc.)					
Currency of account (multiple possible)	GBP <input type="checkbox"/>	USD <input type="checkbox"/>	EUR <input type="checkbox"/>	CHF <input type="checkbox"/>	Other <input type="checkbox"/> _____
Do you require segregated income and capital accounts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

ADDITIONAL BANK ACCOUNT ACTIVITY

Purpose of the account	
Estimated frequency of transactions	
Estimated value range of transactions	
Source of account opening funds	

PAYMENTS/DEPOSITS

<p>If you are likely to require Kleinwort Hambros to make or receive any regular payments, please provide details of the estimated frequency, source and destination countries, and of the expected beneficiary or remitter. (Please do not include Direct Debits or Standing Orders)</p>	Incoming	Outgoing

PART 3 KLEINWORT HAMBROS VISA DEBIT CARD

To be completed by each account holder who requires a Kleinwort Hambros Visa Debit card. Please complete in **BLOCK CAPITALS**.

Cardholder's Details	
Surname	Title (Mr/Mrs/Ms/Miss/Dr/Other)
Forename(s)	Other initials
Name as you wish it to appear on the card (26 letter maximum per line, including spaces)	
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <div style="border: 1px solid #ccc; height: 15px; margin-bottom: 2px;"></div> <div style="border: 1px solid #ccc; height: 15px; margin-bottom: 2px;"></div> </div> <div style="width: 48%;"> <div style="border: 1px solid #ccc; height: 15px; margin-bottom: 2px;"></div> <div style="border: 1px solid #ccc; height: 15px; margin-bottom: 2px;"></div> </div> </div>	
Name of account	
Account number	
Card currency	Sterling <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/>
Date of birth	DD / MM / YYYY
Telephone (business)	Telephone (home)
Telephone (mobile)	Email address
Visa Debit card Security Questionnaire	By post <input type="checkbox"/> By email <input type="checkbox"/>
Residential address	Correspondence address (if different)
Postcode	Postcode

Declaration	
I wish to apply for a Kleinwort Hambros Visa Debit card	<input type="checkbox"/>
I agree to be bound by the Terms of Business as may be varied by Kleinwort Hambros from time to time	<input type="checkbox"/>
Cardholder's signature	
Date	DD / MM / YYYY

INTERNAL USE ONLY	
Limit <input style="width: 100px;" type="text"/>	Email indemnity held <input type="checkbox"/>
Authorised by CRM <input style="width: 150px;" type="text"/>	Email address on Olympic <input type="checkbox"/>
Print name <input style="width: 650px;" type="text"/>	

PART 3 KLEINWORT HAMBROS VISA DEBIT CARD

To be completed by each account holder who requires a Kleinwort Hambros Visa Debit card. Please complete in **BLOCK CAPITALS**.

Cardholder's Details	
Surname	Title (Mr/Mrs/Ms/Miss/Dr/Other)
Forename(s)	Other initials
Name as you wish it to appear on the card (26 letter maximum per line, including spaces)	
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> </div> <div style="width: 48%;"> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> </div> </div>	
Name of account	
Account number	
Card currency	Sterling <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/>
Date of birth	DD / MM / YYYY
Telephone (business)	Telephone (home)
Telephone (mobile)	Email address
Visa Debit card Security Questionnaire	By post <input type="checkbox"/> By email <input type="checkbox"/>
Residential address	Correspondence address (if different)
Postcode	Postcode

Declaration	
I wish to apply for a Kleinwort Hambros Visa Debit card	<input type="checkbox"/>
I agree to be bound by the Terms of Business as may be varied by Kleinwort Hambros from time to time	<input type="checkbox"/>
Cardholder's signature	
Date	DD / MM / YYYY

INTERNAL USE ONLY	
Limit <input style="width: 50px;" type="text"/>	Email indemnity held <input type="checkbox"/>
Authorised by CRM <input style="width: 100px;" type="text"/>	Email address on Olympic <input style="width: 50px;" type="text"/>
Print name <input style="width: 600px;" type="text"/>	

PART 4 DECLARATION

TERMS AND CONDITIONS

Kleinwort Hambros would like to draw your attention to the following in relation to the products and services that will be provided to you through opening accounts with Kleinwort Hambros.

You should be aware that your relationship with Kleinwort Hambros will be governed by and is subject to this Client Services Questionnaire and our Terms of Business. The Terms of Business should be read in conjunction with this Client Services Questionnaire.

JOINT ACCOUNTS

This section **MUST** be completed for all joint accounts

Where an account is in joint names or valuable items have been deposited with Kleinwort Hambros for safe keeping, Kleinwort Hambros will act on all instructions relating to such account(s) or valuable items given by:

- Any account holder acting alone; or
- All account holders acting together; or
- The following specified number of account holders acting together,

until Kleinwort Hambros receives notice in writing to the contrary signed in accordance with the above instructions.

CONSUMER CREDIT

In accordance with consumer credit regulations (where applicable), signature of this declaration by you will be treated as a notice authorising us to send only one copy of any periodic account statement to the person named first in Part 2 of the Client Services Questionnaire at the address given to us from time to time.

MONITORING OF TELEPHONE CALLS

As further explained in the Terms of Business, all telephone conversations with us (and any help desk established in connection with the 'Private eBanking Service') may be monitored and/or recorded without use of a warning tone with a view to improving our service to you and to protect both you and us and to help establish facts.

PART 4 DECLARATION

COPY CORRESPONDENCE

Please provide details of where copy correspondence should be sent. Please also state the capacity in which the recipient will be receiving the copy correspondence (e.g. as your lawyer/accountant) and tick the type of documentation to be provided.

Addressee 1		Copy Correspondence
Name		Bank Account <input type="checkbox"/>
Capacity		Statements <input type="checkbox"/>
Address		Deposit advices <input type="checkbox"/>
	Postcode	Investment Account <input type="checkbox"/>
		Contract notes <input type="checkbox"/>
		Statements <input type="checkbox"/>
		Valuations <input type="checkbox"/>
		CGT packages <input type="checkbox"/>

REQUESTS FOR INFORMATION

You agree that Kleinwort Hambros may give the following people any information requested in writing by them in relation to your account(s) (tick where appropriate):

Accountant	Contact Details
Bank account(s) only <input type="checkbox"/>	
Investment account(s) only <input type="checkbox"/>	
Both <input type="checkbox"/>	

Solicitor	Contact Details
Bank account(s) only <input type="checkbox"/>	
Investment account(s) only <input type="checkbox"/>	
Both <input type="checkbox"/>	

Tax Adviser	Contact Details
Bank account(s) only <input type="checkbox"/>	
Investment account(s) only <input type="checkbox"/>	
Both <input type="checkbox"/>	

Other <input type="text"/>	Contact Details
Bank account(s) only <input type="checkbox"/>	
Investment account(s) only <input type="checkbox"/>	
Both <input type="checkbox"/>	

PART 4 DECLARATION

PRIVACY, CONFIDENTIALITY, DATA PROTECTION AND MARKETING

Kleinwort Hambros is a data controller in respect of your personal data. The collection of information (including personal data) in this document is necessary to enable us to provide our services to you, to comply with our legal obligations and to pursue our legitimate interests. Further information on how we gather, store and process your personal data and your rights in respect of such personal data can be found in our Privacy Notice which is available on our website at: www.kleinworthambros.com/en/important-information.

It is important that you read and understand the Privacy Notice and the conditions in the Terms of Business headed “Confidentiality”, “Data Protection” and “Credit Reference Agencies” which explain how Kleinwort Hambros will deal with your information (including your confidential information and personal data). The Terms of Business are also available on our website at: www.kleinworthambros.com/en/important-information

Occasionally we may analyse and use the information we hold about you to send you market updates and intelligence, client satisfaction surveys and invitations to events and to give you information and marketing about products and services offered by us which we believe may be of interest to you. This is in addition to the normal dialogue you have with your Private Banker in relation to the products or services that we provide. If you do not wish to receive such information by post or email, please tick the relevant box(es) below:

	Email	Post
Market updates and intelligence	<input type="checkbox"/>	<input type="checkbox"/>
Events	<input type="checkbox"/>	<input type="checkbox"/>
Financial promotions	<input type="checkbox"/>	<input type="checkbox"/>
Client satisfaction survey	<input type="checkbox"/>	<input type="checkbox"/>

PART 4 DECLARATION

By signing this declaration:

- I/We confirm the Private Banker has taken me/us through this Client Services Questionnaire and that all the details provided by me/us in this Client Services Questionnaire are true and correct to the best of my/our knowledge and belief;
- I/We acknowledge that I/we have been provided with a copy of the Terms of Business, Privacy Notice and Scale of Charges;
- I/We confirm that I/we have been provided with the opportunity to raise any questions or clarify any matters relating to both the Terms of Business and the Client Services Questionnaire with the Private Banker prior to signing below;
- I/We agree that by signing below I/we will be bound by the Client Services Questionnaire and the Terms of Business, as amended from time to time.
- I/We hereby acknowledge and understand that Kleinwort Hambros does not provide tax, legal or accounting advice and confirm that I/we have taken my/our own advice as I/we deem appropriate before signing the below.

Account Holder/Authorised Signatory

Signature

Please print name in full

Date **DD / MM / YYYY**

Country you were in when signing this:

N.B. Identification documentation will be required for each joint account holder. In the case of joint accounts all parties must sign the declaration.

Joint Account Holder/Authorised Signatory (if applicable)

Signature

Please print name in full

Date **DD / MM / YYYY**

Country you were in when signing this:

Joint Account Holder/Authorised Signatory (if applicable)

Signature

Please print name in full

Date **DD / MM / YYYY**

Country you were in when signing this:

Joint Account Holder/Authorised Signatory (if applicable)

Signature

Please print name in full

Date **DD / MM / YYYY**

Country you were in when signing this:

TAX RESIDENT SELF-CERTIFICATION FORM

International Tax Reporting Agreements require Kleinwort Hambros to collect and report certain information on Client Tax Residency.

Any engagement is subject to satisfactory completion of the Tax Resident Self-Certification Form.

N.B. Where there are more than two parties to a joint account, each party must complete a separate Tax Resident Self-Certification Form.

UK RESIDENT NON DOMICILED

	Account Holder	Joint Account Holder (if applicable)
When did you relocate to the UK? (month and year)	MM / YYYY	MM / YYYY

Have you obtained advice from a tax adviser¹ on your residence and domicile status?

	Yes	No
Domicile status		
Resident non domicile status		
Taxation regime		

If yes, please provide the details of your professional adviser:

Name	
Firm	
Contact number	
Email address	

What is your domicile?	
Do you consider yourself a UK resident non domiciled (RND) Individual?	
Have you elected to pay the "Remittance Basis Charge"?	

What was your tax treatment?

	Remittance Basis	Arising Basis
Over the last 3 years		
Last year		
Year before last		
3 years ago		

BANKING SERVICES

Do you require an income account for the purpose of payment of the Remittance Basis Charge?

Yes

No

¹ Kleinwort Hambros does not provide tax advice and cannot confirm that the products and services offered for the RNDs service qualifies for a particular tax treatment. The level of taxation depends on individual circumstances and such levels and basis of taxation can change. You should seek professional tax advice in order to understand any applicable tax consequences. In addition, the material is not intended to provide, and should not be relied on for, accounting or legal purposes and independent advice should be sought where appropriate.

UK RESIDENT NON DOMICILED

Please select the service you require by ticking the relevant boxes below.

Discretionary

Investment Advisory²

Do you allow investments in assets deemed UK Situs? Yes No

As a UK Resident Non Domiciled client, you will have two options to manage your money depending on your situation. If you no longer have available clean capital then you can choose a set up consisting of two accounts:

Dealing account: A dealing account is an account holding cash and securities

Income account: An income account is an account into which any type of income (dividends, interest) linked to your investments is transferred

If you still have clean capital³, then you can choose to open segregated accounts⁴. The aim of account segregation is to help you avoid the complications associated with the mixed fund rules.

Clean capital – A clean capital account will hold cash balances representing foreign income and gains arising before the account holder becomes UK resident. The only funds that would be added to this account after that point would be UK-sourced income (taxed as it arises) or foreign income taxed in the UK

Investment gains/losses – An investment gains/losses account is an account into which the full proceeds from the disposal of any foreign investments or assets that have produced a capital gain or a capital loss after arrival are transferred

Income – An income account is a bank account into which any other overseas income is transferred

Investment income gains – An investment income gains account is an account into which the proceeds of the disposal of a non-reporting offshore fund are transferred

Investment mixed funds – A mixed fund account is an account into which different types of income, such as bank interest, dividends and earnings, or capital would be paid

IMPORTANT NOTICE

¹ Any products and services referred to may have tax consequences. It is important to bear in mind that Kleinwort Hambros does not provide tax, legal or accounting advice. Materials and information provided by Kleinwort Hambros are not intended to provide, and should not be relied on for, tax, legal or accounting advice. Kleinwort Hambros makes no representation as to the efficacy of its products and services in achieving any particular outcome and provides no assurance that products and services made available to UK resident non-domiciled individuals qualify for a particular tax treatment. Account segregation, if any, will be operated by Kleinwort Hambros on a best efforts basis only, based on public sources and/or internally available information, if any, as the case may be. Accordingly, by signing in the place provided below you agree and acknowledge that the product and/or service you are applying for does not guarantee tax efficiency. It is your responsibility to consult your own independent tax advisers or experts on your particular circumstances.

² Where you have indicated that you wish to receive investment advisory services, your advisory account will be segregated in a separate account. We will provide investment advice based upon the information you provide in the Account Agreement or otherwise provide to us. We may provide advice orally or in writing.

³ If you have to make sure that the clean capital account meets all requirements defined by HM Revenue & Customs.

⁴ If you are not sure which accounts you need to open, please refer to your tax adviser.

Name _____

Name _____

Signature _____

Signature _____

Date **DD / MM / YYYY** _____

Date **DD / MM / YYYY** _____

THIRD PARTY MANDATE

To Kleinwort Hambros

Account Name

Account Holder Name

Joint Account Holder Name

In respect of the above named account(s), I/We hereby authorise you until such time as I/any one of us shall give you notice to the contrary in writing to consider.

Full Name of Authorised Party

Second Authorised Party (if applicable)

(whose signature(s) appears below) as fully empowered by me/us:

- a** to draw cheques on and/or make withdrawals from and/or give instructions to debit my/our said account(s).
- b** to draw, sign, accept and endorse bills and/or promissory notes and to arrange terms with you for negotiation or discount of any documents.
- c** to withdraw anything held by you by way of security and/or safe custody collection and/or any other purpose whatsoever on my/our account.
- d** to charge, pledge and deposit with you any of my/our property upon such terms as you may require to secure repayment to you on demand of all my/our liability(ies) and/or indebtedness to you whether present, future, actual and/or contingent including interest and other banking charges.
- e** to give dealing instructions in relation to any of my/our investments, foreign exchange transactions and in respect of any corporate actions.

(Any of points **a** to **e** may be deleted at the discretion of the Account Holder(s)).

I/We request you to act on the above instructions and in particular to pay and honour all such cheques, bills and/or notes as above mentioned notwithstanding that any such payment may cause my/our said account(s) to be overdrawn or may increase an existing overdraft.

Specimen Signature of the Authorised Party

Specimen Signature of the Second Authorised Party

Signature

Signature

Date **DD / MM / YYYY**

Date **DD / MM / YYYY**

Account Holder's Signature

Joint Account Holder's Signature (if applicable)

Signature

Signature

Print name

Print name

Date **DD / MM / YYYY**

Date **DD / MM / YYYY**

N.B. References and identification will be required for all authorised parties unless they are otherwise known to the bank.

THIRD PARTY MANDATE

Account Holder's Witness	Joint Account Holder's Witness (if applicable)
Name	Name
Occupation	Occupation
Address	Address
Signature	Signature
Date DD / MM / YYYY	Date DD / MM / YYYY

N.B. References and identification will be required for all authorised parties unless they are otherwise known to the bank.

IDENTIFICATION DOCUMENTS

GUIDANCE REGARDING DOCUMENTATION REQUIRED TO VERIFY YOUR IDENTITY AND ADDRESS

Kleinwort Hambros is required to verify the identity and residential address of all Clients and of certain other persons. This document provides guidance as to the type of documentation that is required and acceptable; who can certify these documents; and the wording that should be used to provide the certification.

Where you have been met face to face by an employee of the Societe Generale Group, including an employee of Kleinwort Hambros, you will be required to provide one document verifying your identity and one document verifying your residential address. In all other circumstances two documents verifying your identity and two documents verifying your residential address will be required.

Verification of Your Identity

Either of the following documents can be provided to verify your identity.

1. Signed passport.
2. National Identity Card.

The copy document provided must be current (i.e. not out of date), provide a full clear photograph, and show the issuing office, document number, date of issue and expiry date; together with the nationality, date of birth, place of birth, and signature of the holder.

Certification of Documents Verifying Your Identity

The person certifying your documents must include all of the following as part of their certification:

- The certification must be signed and dated by the person handling the original documents.
- They should write: 'I hereby certify this to be a true copy of an original document and that the photograph therein is a true likeness of that person described therein'.
- The certifier must also provide adequate information so that they may be contacted in the event of a query – the name, address, title, occupation and firm of the certifier should be recorded clearly in BLOCK CAPITALS. Where appropriate a firm's official stamp should be used.

Verification of Your Residential Address

Documents verifying your residential address must be no more than 3 months old and can be either original documents (no certification required) or certified copies, which should be of good quality reproduction. Any of the following documents can be used to verify your residential address:

1. Current driving licence.
2. Statement of a Bank account or Mortgage account – a credit card statement is not acceptable.
3. Utility bill evidencing the provision of an utility service (Gas, Electricity, Water, Telephone) to your residential address – a mobile phone bill is not acceptable.
4. Property Tax bill or Income Tax Notification for the current year * see notes overleaf.

IDENTIFICATION DOCUMENTS

Notes:

- Document 4 on page 24 can be more than 3 months old, provided it relates to the current 'tax' year.
- PO Box addresses are not acceptable as a permanent residential address. In such cases, please refer to your Private Banker.
- Documentation verifying your residential address must be in English. When such documentation is in a foreign language, a full translation, or a translation of the salient points, translated by a party acceptable to Kleinwort Hambros, will be required. In such cases, refer to your Private Banker.

Certification of documents verifying your residential address and other documents

Certification of documents verifying your residential address and any other documents being certified should contain the wording 'I hereby certify this to be a true copy of an original document handed to me by the person described therein'. The other certification requirements detailed above regarding signature, date and certifier information are also required.

Who Can Certify Documents?

The following people can certify photocopies of your identity and address verification documents:

- An employee of the Societe Generale Group, including an employee of Kleinwort Hambros.
- An Official employed by a Bank or Financial Services Business regulated within the EU or within an "EU Equivalent Country" (for guidance as to EU and EU Equivalent countries, refer to your Private Banker).
- An officer of an embassy, consulate or high commission of the country of issue of the identity document.
- A Senior Civil Servant, serving Police Officer or a Customs Officer.
- A Notary, Lawyer, Solicitor, member of the Judiciary, Accountant, Actuary or Tax Adviser, who must be a member of a recognised professional body, thereby subject to professional rules providing for the integrity of his conduct.

NOTES

SG Kleinwort Hambros Bank Limited

5th Floor, 8 St James's Square
London SW1Y 4JU
T +44 20 7597 3000
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