



CUSTOMER INFORMATION UPDATE FORM

Please complete this form in its entirety. Where necessary, a check mark should be affixed to indicate your selection. Where it is necessary to write, please complete in BLOCK letters.

Primary Account Number: _____

PERSONAL DETAILS			
Salutation/Title:	<input type="radio"/> Mr. <input type="radio"/> Ms. <input type="radio"/> Mrs. <input type="radio"/> Dr.		
Marital status:	<input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Divorced <input type="radio"/> Separated <input type="radio"/> Widowed		
First Name:			Middle Name:
Last Name:			
Date of Birth:	(dd/mm/yyyy)	NIC #:	
Country of Birth:		Country of Citizenship:	
Nationality:			
Country of Residence:		Tax ID Number:	
Other Country of Residence:		Tax ID Number:	
ID Type:	<input type="radio"/> National ID <input type="radio"/> Driver's Licence <input type="radio"/> Passport		
ID No.:	Issued by:	Issue Date:	Expiry Date:
ADDRESS DETAILS			
Physical Address:			
City:	State:		Zip Code:
Country:			
Mailing Address <i>(If different from above):</i>			
City:	State:		Zip Code:
Country:			
CONTACT DETAILS			
Home Phone:		Work Phone:	
Mobile:		E-mail Address:	

SECURITY INFORMATION					
Family Member Name (Except Mother):					
Relationship (to family member):			Date of Birth (family member):		
Mother's Maiden Name:			Name Of Favourite Pet:		
Name Of Your Elementary School:			Dream Job as a Child:		
EMPLOYMENT/ FINANCIAL DETAILS					
Employment Status:	<input type="radio"/> Employed <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Student <input type="radio"/> Unemployed				
Job Title:			Occupation:		
Employer Name:					
Monthly Income	<input type="radio"/> <\$2,501		<input type="radio"/> \$2,501 - \$5,000		<input type="radio"/> \$5,001 - \$7,500
	<input type="radio"/> \$7,501 - \$10,000		<input type="radio"/> >\$10,000		<input type="radio"/> N/A
How do you receive your monthly income?	<input type="radio"/> Cash	<input type="radio"/> Cheque	<input type="radio"/> Direct Deposit	<input type="radio"/> Wire Transfer	<input type="radio"/> N/A
Will your salary/pension be credited into your 1 st National Bank account?				<input type="radio"/> YES	<input type="radio"/> NO
US STATUS (PLEASE CHECK YES OR NO FOR EACH QUESTION)					
Are you a US resident/ citizen?				<input type="radio"/> YES	<input type="radio"/> NO
Do you hold a US Permanent Resident Card (green card)				<input type="radio"/> YES	<input type="radio"/> NO
Do you have a US address?				<input type="radio"/> YES	<input type="radio"/> NO
Do you hold a Power of Attorney or have signatory authority for anyone residing in the US?				<input type="radio"/> YES	<input type="radio"/> NO
Do you spend more than 6 months in the US annually?				<input type="radio"/> YES	<input type="radio"/> NO
¹ a U.S. person as United States (U.S.) person is defined as one of the following: (a) An individual who is a U.S. citizen or U.S. resident alien; (b) A partnership, corporation, company or association created or organized in the United States or under the laws of the United States; (c) An estate (other than a foreign estate); or (d) domestic trust.					
PEP DECLARATION					
Do you or an immediate family member or close associate hold or have held a prominent public position?				<input type="radio"/> YES	<input type="radio"/> NO
If yes to the above:	Name:				
	Relationship:				
	Name of Position:				
A PEP is a natural person who holds or has held an important public office in any country, such as head of state, government or member of Parliament, their immediate family members (the spouse or partner who is regarded under individual national law as the equivalent of a spouse, the children and their spouses or partners, and parents) as well as other close associates.					

DECLARATION

- 1) I/We authorize 1st National Bank St. Lucia Limited (the Bank) to release any information pertaining to the operation of my/our account(s) by mail, fax, or delivery either original or copies of documents any confidential information that the Bank may have in its possession whenever it becomes necessary to do so for the following purposes:
 - a) In order to verify the existence and condition of my account for credit bureaus and like agencies;
 - b) In order to comply with directions of a regulatory body or agency, orders from a regulatory body or agency, court orders by any Court of competent jurisdiction within St. Lucia or under the provisions of any law of St. Lucia;
 - c) In order to comply with reasonable and legitimate requests from other financial institutions in circumstances where it is necessary for completing business transactions on my behalf;
 - d) In response to requests of persons providing services to the Bank as long as those persons maintain confidentiality agreements with you;
 - e) Where you have received written instruction(s)/ permission from myself, my heirs or my legal representatives; and
 - f) In accordance with any laws of St. Lucia.

- 2) I hereby acknowledge that whereas the above certification is binding on me/us and intended for the Bank to rely on, I give the Bank the authority, in addition to the certification to use independent verification of the information given.

- 3) I hereby acknowledge that all information provided (including any documents) regarding my/our application are true and correct to the best of my/our knowledge with the understanding that any misrepresentation could result in the denial of my application.

- 4) I hereby acknowledge that whereas the above certification is binding on me/us and intended for the Bank to rely on, I give the Bank the authority, in addition to the certification to use independent verification of the information given.

Customer Signature	Date (dd/mm/yyyy)
Verified by (Bank Official)	Date (dd/mm/yyyy)
Notary Royal (Please sign or affix stamp) *For non-resident clients the Notary Royal to certify.	Date (dd/mm/yyyy)
Verified by (Notary Royal Signature)	Date (dd/mm/yyyy)
Apostille (Please sign or affix stamp) *For non-resident clients the Apostille to certify.	Date (dd/mm/yyyy)
Verified by (Apostille Signature)	Date (dd/mm/yyyy)

Please provide a copy of valid government issued identification and a copy of a utility bill issued in the last three (3) months as confirmation of address.

Documents should be certified by a Bank Officer or Notary Royal.

For Bank Use Only

CIF Number:

Input by

Signature

Date (dd/mm/yyyy)

Proofed by

Signature

Date (dd/mm/yyyy)