**Ceybank** 

Resident

Non-Resident

Managers of Ceybank Funds

No 85, York Street, Colombo 01, Sri Lanka, Tel: 9411 760 2000 Email: info@ceybank.com, Web: www.ceybank.com **KNOW YOUR CLIENT (KYC) FORM - INDIVIDUAL** If joint account, all joint holders need to complete separate KYC form Individual Applicant Joint Applicant Guardian If minor account, the guardian needs to complete this form & input guardian's details 1. Full Name of Applicant/Guardian (Mr/Mrs/Miss/Dr/Rev/ Other.....) 2. National Identity Date of Issue (NIC) Card /Passport No Date of Expiry (For Passport Only) 4. Birth Certificate No 3. Date of Birth (For minor accounts only) 5. Citizenship Details/ Sri Lankan Dual Citizen **Foreign National** Nationality Country of Residence Reason for opening the account in **If Non Residents** Sri Lanka Do you Invest & Repatriate money Yes No through Inward Investment Account (IIA) Country 01 Country 02 If Dual Citizen or **Foreign National** Name of the country Passport No VISA/Passport Expiry date **RESIDENCE DETAILS** 6. Permanent Address Country District (If Non Resident) 7. Correspondence Address Same as permanent Country District Address (if Non Resident) 8. Status of Resident Owner With Parents/Family Lease/Rent Address Friends/ Relatives Board/Lodging Official **CONTACT DETAILS & EMPLOYMENT DETAILS** 9. Mobile Number Land Phone Number **Email Address** (Correspondence will be sent to this email in the future) 10. Employment status **Business/Self Employed** Other (Please specify) Employed Retired Unemployed If Employed Name of Employer Address of Employer Position Held Self Employed/Owner Name of the Business Nature of Business

Office Email Address

Office	Telephone
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INCOME DETAILS					
11. Annual Income (LKR) (expected income per year)	Less than Rs 1,000,000	Less than Rs 1,000,000		Rs 1,000,000 to Rs 2,000,000	
	Rs 2,000,000 to Rs 3,000,000		Rs 3,000,000 to Rs 5,000,000		
	Rs 5,000,000 to Rs 10,000,000		More than Rs 10,000,000		
12. Sources of Funds	Investment Proceeds	Business/ Self Employment		Gift	
	Sale of Asset/Property	Professional/Employment		Pension	
	Inheritance/Family Remittance	Commission Income		Donation/Charities	
	Other (Please specify)				
member in your immediate family a Politically Exposed Person (PEP)?	mmediate family a Pefinition of a PEP Politically Exposed i. An individual who is or has been entrusted domestically or by a foreign country with prominent public functions.				
I hereby confirm the information provided are true and correct according to my knowledge.					
Signature of Applicant/Gu	ardian		Date		
DOCUMENTS REQUIRED FOR KYC VERIFICATION					
1. A copy of the N	lational Identity Card /a copy of	Valid Passport			
2. A valid utility bill (within three months of issue) if the permanent address differs from the address stated in the NIC					
3. A Visa copy if the Applicant is a Foreign National					
4. Dual citizenship certificate (if applicable)					
	C	OFFICE USE ONLY			
Documents P	Documents Provided for KYC Verification				
Identification Documents					
National Identity Card       Passport (for foreign individuals)       Driving License					

<b>Proof of Residency</b>		
	National Identity Card	

Bank / Credit Card Statement

Any other (Please specify)

Telephone Bill / Electricity Bill/ Water Bill

Gramasevaka certificate certified by the Divisional Secretariat



Date

Signature of the authorized officer **Documents collected by** 

Signature of the authorized officer
Verified and system updated by

Signature of the authorized officer **Approved by** 

Date