

# ANNEX B1 SECONDARY ACCOUNT HOLDER CLIENT INFORMATION

## IMPORTANT NOTES & INSTRUCTIONS:

The accomplished **Annex B1 - Secondary Account Holder Client Information** must be submitted via email to your SLIMTC Relationship Manager or to your Certified UITF Sales Personnel, along with the required documents. All signed documents shall be treated as original copies. Kindly accomplish one (1) Annex B1 for each Secondary Account Holder of the Account.

Please write legibly using **CAPITAL LETTERS**. Write **N/A** if the question is not applicable. Mark the box(es) with a [✓] to indicate your choice(s). Fields with asterisk (\*) are **ALL MANDATORY**.

FOR SLIMTC USE ONLY		FOR CUSP / RM USE ONLY
<b>Client Code</b>	<b>Account Number</b>	<b>RM Code / CUSP Code</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

## A SECONDARY ACCOUNT HOLDER CLIENT INFORMATION

### 1. Secondary Account Holder Order\*

1st  2nd  3rd  4th

### 2. Date Accomplished (mm-dd-yyyy)

### 3. Secondary Account Holder Full Name\*

First Name

Middle Name

Last Name

Suffix (e.g., SR., JR., III)

### 4. Sex at birth\*

Male  Female

### 5. Date of birth\* (mm-dd-yyyy)

### 6. Place of birth\* (City/Province, Country)

### 7. Citizenship/Nationality

### 8. Civil Status

Single  Married  Divorced  Legally separated  Annulled  Common Law  
 Widowed

### 9. Spouse's Full Name

First Name

Middle Name

Last Name

Suffix (e.g., SR., JR., III)

### 10. Government ID Presented\*

### 11. Government ID Number\*

### 12. Government ID Expiry Date\* (mm-dd-yyyy)

### 13. PH Tax Identification Number (TIN)\*

(xxx-xxx-xxxx)

### 14. SSS Number or GSIS Number\*

### 15. Expected mode of funding\* (select all that applies)

Bank transfers from within the Philippines  Bank transfers from outside of the Philippines  Bank transfers from 3rd party account (i.e. not from your own account)

Others (please specify)

### 16. Source/s of Wealth\* (select all that applies)

Business Ownership (Private Equity, Venture Capital etc.)  Income from Business Operations  Income from Employment  Inheritance / Family Wealth

Investment Activities  Legal Settlement  Personal Wealth / Sale of Personal Assets (Real Estate, Properties etc.)

Others (please specify)

## CONTACT INFORMATION

### 17. Permanent Address\* (please completely fill out the fields below)

Unit / Floor No., Building Name, Building No., Street, Subdivision/Village, Barangay

City/Municipality

Province/State

Country

Zip Code

### 18. Present Address\* (please completely fill out the fields below if not same with permanent address)

Same as permanent address

Unit / Floor No., Building Name, Building No., Street, Subdivision/Village, Barangay

City/Municipality

Province/State

Country

Zip Code

**19. Preferred Mailing Address**

Permanent address  Present address

**20. Home Phone Number**  
(e.g. +632XXXXXXX)

**21. Mobile Phone Number\***  
(e.g. 9XXXXXXX)

**22. Email Address\***

**BUSINESS/EMPLOYMENT INFORMATION\***

**23. Employment Type\***

Self-employed  Public Employee  Private Employee  Retired  Other (Please specify)

**24. Business/Employer Name\***

**25. Position/Occupation\***

**26. Business/Employer Address\* (please completely fill out the fields below)**

Unit / Floor No., Building Name, Building No., Street, Subdivision/Village, Barangay

City/Municipality

Province/State

Country

Zip Code

**27. Nature of Business / Employment\***

- |   |  |   |   |  |
|---|--|---|---|--|
| <input type="checkbox"/> Academe / Education        | <input type="checkbox"/> Accounting / Accountant       | <input type="checkbox"/> Agriculture / Forestry / Fishing                                   | <b>Financial Services (please choose one)</b> |  |
| <input type="checkbox"/> Arts / Entertainment       | <input type="checkbox"/> Charity/Social Work           | <input type="checkbox"/> Consultancy  |   | <input type="checkbox"/> Bank  |
| <input type="checkbox"/> Gaming - Gambling          | <input type="checkbox"/> Government                    | <input type="checkbox"/> Health   |   | <input type="checkbox"/> Virtual / Digital Currency Provider                   |
| <input type="checkbox"/> Hospitality Industry       | <input type="checkbox"/> Information and Communication | <input type="checkbox"/> Legal / Lawyer   |   | <input type="checkbox"/> Money Service Bureaus / Remittance / Foreign Exchange |
| <input type="checkbox"/> Manufacturing              | <input type="checkbox"/> Mining                        | <input type="checkbox"/> Military Defense / Security/ Energy / Utilities Science / Research |   | <input type="checkbox"/> Wealth Management / Asset Management                  |
| <input type="checkbox"/> Real Estate                | <input type="checkbox"/> Retail Trade                  |   |   | <input type="checkbox"/> Insurance   |
| <input type="checkbox"/> Transportation and Storage | <input type="checkbox"/> Wholesale Trade               |   |   | <input type="checkbox"/> Non-Bank Financial Services                           |

Others (please specify)

**28. Estimated Regular Annual Income (in Philippine Peso)**

Under 10 M  10 M to 50M  51M to 100M  Over 100 M

**29. I am an Officer or Director of a listed company.\***

Yes (Please indicate the company name)  No

**30. I am a relative or associated to a person currently / formerly holding a position in any branch of the Philippine or foreign government or an international organization.\***

Yes (Please indicate relationship with the personnel)  No

**31. Foreign Account Tax Compliance Act (FATCA) Information\***

**31a. Are you a US Person?**

Yes, with U.S. Taxpayer Identification Number (TIN)  No

A U.S. person is any individual who falls under the following categories: a natural born U.S. citizen, a naturalized citizen of the United States of America, a non-U.S. Citizen who resides in the United States of America for income tax purposes, or a permanent resident of the United States of America with a valid permanent Resident Card (Green Card)

Your U.S. TIN may be any of the following: U.S. Social Security Number (SSN), Employer Identification Number (EIN), or Individual Taxpayer Number (ITIN). If you are a U.S. Person, but do not have a U.S. TIN, you undertake to **provide one within thirty (30) calendar days from submitting this update.**

**31b. Foreign TIN (Other than US and PHL)**

**31c. Country of tax residence (other than US and PHL)**