



APPLICANT 1: PERSOI	NAL DETAILS		
Title		Town/City	
Surname		Country	
Carrame		Country	
First Name		Length of Time at A	ddress (years/months)
		Years:	Months:
Middle Name(s)		0	a Adduce of the continue land
			e Address (if applicable)
Data of Pirth (dd/mm/\\\\\\\\\)		Please state your pr if it differs from your	referred correspondence address r residential address
Date of Birth (dd/mm/yyyy)			
D D M N			
Town of Birth			
Country of Birth		Post Code/Zip Code	
Addraga			
Address		Country	
		Reason for Correspo	ondence Address
Post Code/Zip Code			
1 ost oode/21p oode			
Town/City		Connection to A	Application 2
Country			
		Contact Details	
Longth of Time at Address //	voors/months)		
Length of Time at Address (y		E-mail Address	
Years:	Months:		
If you have spent less than 3		Home Phone (count	ry code/area code/number)
please state previous addres	S		
Address		Mobile/Cell Phone	country code/area code/number)
			, compared to a spring mostly
		Work Phone (country	y code/area code/number)
Doct Code/7in Code			
Post Code/Zip Code			
		T	



Identification Details:	APPLICANT 1: EMPLOYMENT DETAILS
ID/Passport Number	Employment Status
	Employed Self-employed Retired
Date of Issue (dd/mm/yyyy)	Employed (if applicable)
	Employed (if applicable)  Occupation
Date of Expiry (dd/mm/yyyy)	Occupation
	Job Title
National Insurance Number (if applicable)	Job Title
	Employer's Name
Taxpayer Identification Number (if applicable)	Employers Name
	Employer's Address
Gender	Employer's Address
Male Female	
Marital Status  Married/Civil Partner Single	Doct Code /7 in Code
	Post Code/Zip Code
Other (please state if applicable)	Town/City
	Town/City
Residence	Country
UK Resident Non-UK Resident	Country
Residential Status	Number of Years Employed
Owned - Outright Owned - Mortgage	Trainibor of Tears Employed
Living with parents Shared/Part-owned Renting	Salary (Gross)
Other (please state if applicable)	£
	Bonus/Commission
Further Information	£
Are you an existing Account Holder with Jordan International	Other Income
Bank Plc?  Yes No	£
	How is your salary paid?
If yes, please provide the account number(s)	Direct to bank Cheque Cash
	Frequency
	Weekly Monthly
	Solf-omployed (if applicable)
Please list any accounts you currently hold with other financial institutions, including the the names of the banks.	Self-employed (if applicable)  Business Name
	Sastron Name
	Self-employed section continues on next page
	es, simply sa sestion continues on next page



Business Address	APPLICANT 2: PERSONAL DETAILS
	Title
	Surname
Post Code/Zip Code	
Tost Sode/Zip Code	First Name
Taura (City)	
Town/City	Middle Name(s)
	made Hame, of
Country	Date of Birth (dd/mm/yyyy)
	D D M M Y Y Y
Number of Years in Business	Town of Birth
	TOWN OF BIRTH
Net Profit (last 3 completed years)	Country of Pinth
Year 1	Country of Birth
£	
Year 2	Address
£	
Year 3	
£	
	Post Code/Zip Code
Name and Address of Accountant	
Business Name	Town/City
Business Address	Country
	Length of Time at Address (years/months)
	Years: Months:
Post Code/Zip Code	If you have spent less than 3 years at the above address,
	please state previous address
Town/City	Address
Country	
	Post Code/Zip Code
	Town/City



Country		National Insurance Number (if applicable)
Length of Time at Ad		Taxpayer Identification Number (if applicable)
Years:	Months:	
Correspondence	Address (if applicable)	Gender
Please state your pre if it differs from your	ferred correspondence address	Male Female
If it differs from your	esideriliai address	Marital Status
		Married/Civil Partner Single
		Other (please state if applicable)
Post Code/Zip Code		
O		Residence
Country		UK Resident Non-UK Resident
December Correction	ndanaa Addraaa	Residential Status
Reason for Correspo	ndence Address	Owned - Outright Owned - Mortgage
		Living with parents Shared/Part-owned Renting
		Other (please state if applicable)
Connection to A	oplication 1	Further Information
		Are you an existing Account Holder with Jordan International Bank Plc?
		Yes No
Contact details		If yes, please provide the account number(s)
E-mail Address		7.77
Llama Dhana (aquatra	v and a force and a form har l	
Home Phone (country	/ code/area code/number)	
Mobile/Cell Phone (c	ountry code/area code/number)	Please list any accounts you currently hold with other
Mobile/Cell Filone (C	ountry code/area code/number/	financial institutions, including the the names of the banks.
Work Phone (country	code/area code/number)	
Work Frioric (country)	code/area code/namber/	
Identification De	tails:	
ID/Passport Number		APPLICANT 2: EMPLOYMENT DETAILS
Data of the Control		Employment Status
Date of Issue (dd/mm		Employed Self-employed Retired
		Employment details section continues on next page
Date of Expiry (dd/mr		, , , , , , , , , , , , , , , , , , , ,
DDDN	A M Y Y Y	



Employed (if applicable)	Town/City
Occupation	
	Country
Job Title	
	Number of Years in Business
Employer's Name	
	Not Profit (last 2 completed years)
Employer's Address	Net Profit (last 3 completed years)
	Year 1
	£
	Year 2
	£
Post Code/Zip Code	Year 3
	£
Town/City	
	Name and Address of Accountant
	Business Name
Country	
Number of Years Employed	Business Address
Salary (Gross)	
£	
	Pack Code /7in Code
Bonus/Commision	Post Code/Zip Code
£	
Other Income	Town/City
£	
How is your salary paid?	Country
Direct to Bank Cheque Cash	
Frequency	
Weekly Monthly	ACCOUNTS REQUIRED
Self-Employed (if applicable)	Select which accounts you want to apply for:
Business Name	CURRENT ACCOUNT
Dusiness Indine	
	GBP USD EUR JOD
Business Address	CHEQUE BOOK (GBP only)
	Yes No
	PAYING IN BOOK (GBP only)
	Yes No
Post Code/Zip Code	Current accounts will receive monthly statements produced on the last day of the month.
Post Code/Zip Code	produced on the last day of the month.

Memorable City

Name of First School

04

Select which services	s you want to apply for:
DEBIT CARD (only available	le with a GBP current account)
Yes No	
If yes, select the method y	you wish to receive your debit card:
Your correspondence a	address Collect from our office
Please note: Joint account	ebit Card Terms & Conditions. holders who do not have an 'either account(s) cannot have a debit card
INTERNET BANKING ACC	CESS
Yes No	
	olders who do not have an 'either to sign s) will have an Internet Banking "display"
If yes, select the method y	you wish to receive your username:
Your correspondence a	address Collect from our office
We urge you to read our In	ternet Banking Terms & Conditions.
During a calendar month, you balance across your Current, S	ency equivalent in USD/EUR/JOD)  I will need to hold this average aggregate Savings or Fixed Deposit accounts with us.
threshold, you will be advised b In such instances, you may be until you once again meet t	ate balance for that month fall below this by e-mail/letter. e charged a fee at the end of each month the monthly average aggregate balance ir current Schedule of Charges leaflet.
threshold, you will be advised to the such instances, you may be until you once again meet to requirement. Please refer to out the second of t	by e-mail/letter. e charged a fee at the end of each month the monthly average aggregate balance ır current Schedule of Charges leaflet.
threshold, you will be advised to such instances, you may be until you once again meet to requirement. Please refer to out the same of the	by e-mail/letter.  e charged a fee at the end of each month the monthly average aggregate balance ir current Schedule of Charges leaflet.   DNS  on requirements, we must identify you ny information to you. To enable us to
threshold, you will be advised to the such instances, you may be until you once again meet to requirement. Please refer to out the second of t	by e-mail/letter.  e charged a fee at the end of each month the monthly average aggregate balance ir current Schedule of Charges leaflet.   DNS  on requirements, we must identify you ny information to you. To enable us to
threshold, you will be advised to the such instances, you may be until you once again meet to requirement. Please refer to out the second of t	by e-mail/letter.  e charged a fee at the end of each month the monthly average aggregate balance ir current Schedule of Charges leaflet.   DNS  on requirements, we must identify you ny information to you. To enable us to

Applicant 2
Mother's Maiden Name
Memorable Word/Phrase
Memorable City
Name of First School
ACCESSIBILITY QUESTION

At Jordan International Bank, we strive to provide excellent service to all our customers. Please let us know if you have any specific accessibility needs so we can assist you better. Your information will be kept confidential. Examples include large print documents, documents translated, Braille documents or assistance with digital services.

Specifiy any accessibility needs you require	

### **IDEMNITY TO OPERATE YOUR ACCOUNT** BY PHONE AND/OR EMAIL

The operation of accounts by instructions communicated via phone/email offers you, the account holder, the practical option of providing instructions to the Bank swiftly. These means of communication carry greater risks than the provision of instructions by post or in person. The Bank is prepared to accept your instructions by telephone or email, and to implement these instructions for our order. However, to protect the Bank from exposure to the greater risk of transaction failure or other loss to your account, the Bank requires you to provide it with this indemnity.

Applicant 1 Signature		
Applicant 2 Signature		

#### **KYC (KNOW YOUR CUSTOMER) INFORMATION**

Please help us understand how your account(s) will be operated with Jordan International Bank Plc

Purpose of opening your account	

07

08

09



10a

Expected Values of Credit (per month)  Cheque Deposits	Sale of Property/Business (when, name of business, value, address)
Cash	
Bank Transfers	Inheritance/Gift (from whom, year received, approximate value in GBP, how did the donor create their wealth?)
Total Estimated Yearly Value of Account:	
£50,000 - £99,999 £100,000 - £249,999	
£250,000 - £499,9999 £500,000 and above	Other (please specify)
For Office Use Only (Interviewer/Officer):	Liabilities:
Name	Mortgages
	£
Position	Personal Loans
	£
Signature	Unsecured Loans
	£
Date (dd/mm/yyyy)	Others
	£
APPLICANT 1: <b>DECLARATION OF WEALTH</b>	APPLICANT 2: <b>DECLARATION OF WEALTH</b>
Provide as much relevant information required to substantiate the source of your wealth.	Provide as much relevant information required to substantiate the source of your wealth.
Assets:	Assets:
Approximate Net Worth (excluding principal residence)	Approximate Net Worth (excluding principal residence)
£	£
How was your wealth generated? (i.e. what economic activity generated your net worth?)	How was your wealth generated? (i.e. what economic activity generated your net worth?)
Investments (capital gains)	Investments (capital gains)



Sale of Property/Business (when, name of business, value, address)	Members of the administrative, management or supervisory boards of state-owned enterprises; and directors, deputy directors and members of the board or equivalent function of an international organisation.  These categories do not include middle-ranking or more
	junior officials.
Inheritance/Gift (from whom, year received, approximate value	An immediate family member of a PEP.
in GBP, how did the donor create their wealth?)	Such family members include:
	<ul> <li>A spouse or partner of that person;</li> <li>Children of that person and their spouses or partners;</li> <li>Parents of that person;</li> <li>Brothers, sisters, uncles and aunties.</li> </ul>
Other (please specify)	A known close business associate of a PEP.
	Such associates include the following:
	<ul> <li>An individual who is known to have joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with a PEP; and</li> </ul>
Liabilities:	<ul> <li>An individual who has sole beneficial ownership of a legal</li> </ul>
Mortgages	entity or legal arrangement which is known to have been set up for the benefit of a PEP.
£	I hereby declare that:
Personal Loans	I do not consider myself to be a PEP
£	
Unsecured Loans	I do consider myself to be a PEP
£	If you do consider yourself to be a PEP, please specify the position you hold or have held in the last 12 months:
Others	
£	I hereby declare that:
	I am not an immediate family member or close business
APPLICANT 1: POLITICALLY EXPOSED	associate of a PEP
PERSON(PEP) DECLARATION	I am an immediate family member or close business associate of a PEP
Please confirm whether you are a PEP in your own right or whether you are an immediate family member or close business associate of a PEP.	If you are an immediate family member or a close business associate of a PEP, please provide details of the immediate family member or close business associate who is a PEP:
A PEP is defined under the UK anti-money laundering legislation as:	Full Name
A person who holds or has held a high political profile or public office within the last 12 months.	T UII TVAITIC
Individuals with such prominent public functions include:	Position
<ul> <li>Heads of State, heads of government, ministers and deputy or assistant ministers;</li> <li>Members of parliaments or of similar legislative bodies;</li> <li>Members of supreme courts, of constitutional courts or</li> </ul>	Relationship to You

- Members of supreme courts, of constitutional courts or of other high-level judicial bodies the decisions of which are not subject to further appeal, except in exceptional circumstances;
- Members of courts of auditors or of the boards of central banks;
- Ambassadors, charges d'affaires, and high-ranking officers in the armed forces (other than in respect of relevant positions at community and international level);

I hereby further declare that the information in this section is accurate, and I will amend this declaration in case of any changes to circumstances of my PEP status without any undue delay.

11a



11b

# APPLICANT 2: POLITICALLY EXPOSED PERSON(PEP) DECLARATION

Please confirm whether you are a PEP in your own right or whether you are an immediate family member or close business associate of a PEP.

A PEP is defined under the UK anti-money laundering legislation as:

A person who holds or has held a high political profile or public office within the last 12 months.

Individuals with such prominent public functions include:

- Heads of State, heads of government, ministers and deputy or assistant ministers;
- Members of parliaments or of similar legislative bodies;
- Members of supreme courts, of constitutional courts or of other high-level judicial bodies the decisions of which are not subject to further appeal, except in exceptional circumstances;
- Members of courts of auditors or of the boards of central banks:
- Ambassadors, charges d'affaires, and high-ranking officers in the armed forces (other than in respect of relevant positions at community and international level);
- Members of the administrative, management or supervisory boards of state-owned enterprises; and directors, deputy directors and members of the board or equivalent function of an international organisation.

These categories do not include middle-ranking or more junior officials.

#### An immediate family member of a PEP.

Such family members include:

- A spouse or partner of that person;
- Children of that person and their spouses or partners;
- · Parents of that person;
- Brothers, sisters, uncles and aunties.

#### A known close business associate of a PEP.

Such associates include the following:

- An individual who is known to have joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with a PEP; and
- An individual who has sole beneficial ownership of a legal entity or legal arrangement which is known to have been set up for the benefit of a PEP.

#### I hereby declare that:

I do not consider myself to be a PEP
I do consider myself to be a PEP
If you do consider yourself to be a PEP, please specify the position you hold or have held in the last 12 months:

#### I hereby declare that:

associate of a PEP
I am an immediate family member or close business associate of a PEP
If you are an immediate family member or a close business associate of a PEP, please provide details of the immediate family member or close business associate who is a PEP:
Full Name
Position
Relationship to You

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I hereby further declare that the information in this section is accurate, and I will amend this declaration in case of any changes to circumstances of my PEP status without any undue delay.

# APPOINTMENT OF BANKERS AND MANDATE, AND AUTHORISED SIGNATORY

### 12.1 TERMS AND CONDITIONS:

- We hereby acknowledge receipt of and confirm that we have read, understood and agree to be bound by the Bank's Terms and Conditions (governing the operation of the account(s) and any other services/products) and Schedule of Charges, as amended from time to time.
- We understand that these materials, together with this Application Form, constitute the Bank's Agreement with us to provide its services.
- We authorise you to conduct credit reference checks, identity checks, sanction list checks and other enquiries in accordance with your normal procedures.
- We acknowledge and understand that, unless agreed with you separately, property in the joint account will be held as joint tenants and on the death of one party, that property will pass absolutely under the rule of survivorship to the remaining joint tenant(s).
- We agree that you may share our personal details with fraud prevention or credit reference agencies for use in verifying our identity, credit decisions or for fraud and money laundering prevention.

#### 12.2 COMPLETION OF THIS APPLICATION FORM:

- We declare that the information provided in this Application Form and supporting documents is true, complete and up to date.
- We confirm our understanding that the Bank in making its decision to open any account or provide any other related services will be relying on such information.
- We agree to notify the Bank immediately if we become aware of any changes to the information provided in this Application Form.

_	I have	received	and	confirm	that	I	have	read	the
	Financi	ial Service	s Cor	npensatio	on Sc	he	eme In	forma	tior
	Sheet a	and Exclus	ions	List.					



#### 12.3 BINDING AGREEMENT:

We acknowledge our obligation to provide various documents, as requested by the Bank, in accordance with its current processes in order to be able to consider our application and that the Bank's obligation to provide services under this Agreement will not commence until the Bank is fully satisfied and our application is approved.

# 12.4 SECURITY AND PROVISION OF INFORMATION:

We acknowledge our obligation to complete this Application Form accurately to enable the Bank to verify our identity. On the opening of an account with the Bank, we agree:

- 12.4.1 that the Bank will not be responsible for providing services to any person other than the account holder using the account
- 12.4.2 to keep secure & confidential each and every password we designate for use in relation to the account
- 12.4.3 if issued with a cheque book for the account, to keep it in a safe place known only to me and to immediately report to the Bank its having been lost, stolen or accidentally destroyed
- 12.4.4 to take practical steps to ensure that relevant confidential details concerning the account are shared with as few persons as possible and are not disclosed to persons with no basis for knowing them
- 12.4.5 to tell the Bank immediately if we think another person has gained access (whether or not authorised) to our password or any other security details
- 12.4.6 that the Bank can refuse to act solely on oral or emailed instructions and has the right to reverse transactions already undertaken on solely our instructions communicated orally or via email that have not been confirmed by other means
- 12.4.7 to provide the Bank with any additional information or documentation that it may reasonably require from time to time
- 12.4.8 to immediately inform the Bank in writing of any changes to our personal details

### 12.5 AUTHORISED SIGNATORY:

We hereby authorise the Bank to act on any instructions (such as cheques and any other payment orders) which it reasonably believes have been issued by us, using the signature given below, which will be valid for all transactions between us and the Bank in relation to any of our joint accounts.

the Bank in relation to any of our joint accounts.
Either of us Both of us
Other (please specify)

Our signatures will remain valid until revoked by our written notice to the Bank. To accept our individual and joint liability of the whole amount due if any of our joint current accounts become overdrawn. In the absence of any contrary written instructions signed by us, as above, to apply this mandate to each and every account opened by you now and hereafter in our joint names.

To send statements of our account(s) to our joint names. We will notify you in writing if we wish for you to provide us with separate periodic statements at different addresses.

Applicant 1
Full Name
Signature
Date (dd/mm/yyyy)
Applicant 2
Full Name
Signature
Date (dd/mm/yyyy)
12.6 DATA PROTECTION
For the purposes of EU (GDPR) and ultimately, UK (Data Protection Act 2018) data protection legislation, Jordan International Bank Plc ("JIB", "we" or "us") of Almack House, 26-28 King Street, London SW1Y 6QW is the data controller responsible for the collection and use of your personal information as set out in our Privacy Policy. Please see link below:

#### https://www.jordanbank.co.uk/media/1128/privacy-policy.pdf

This Privacy Policy explains why and how we process and protect the personal information that you provide to us. It also tells you about your privacy rights and how the law protects you.

When you apply or enquire about a product or service and throughout our relationship with you, you will provide various categories of personal information to us. We collect this personal information to ensure we can efficiently and lawfully provide the relevant product or service to you.

We are committed to providing banking services and want you to have trust and confidence in the way we use your personal information. In order to comply with data protection law, we must manage your personal information fairly, lawfully and transparently. This will ensure that you are informed about our use of your personal information and your rights in respect of the personal information you provide.

I am happy to receive marketing communications from Jordan International Bank PIc relating to our products and services which may interest me. Preferred contact method(s):

Email	Text message (SMS)
Post	Phone call
I do no	wish to receive marketing communications

You do not need to consent to this option in order to open your account(s) with us.



If you have any questions, or want more details about how we use your personal information, or you wish to withdraw your consent at any time, free of charge, where there is no good reason for us continuing to process it (this includes cases where you wish to opt out from marketing communications that you receive from us) please contact us:

- By email at: <a href="mailto:compliance@jordanbank.co.uk">compliance@jordanbank.co.uk</a>
- By writing to us, for the attention of our Head Of Compliance: Jordan International Bank Plc, Almack House, 26-28 King Street, London SW1Y 6QW

We reserve the right to change our Privacy Notice from time to time. If we decide to change our Privacy Notice, we will notify you of these changes in writing and will also post an alert on our website.

App	licant	1

Full Name		
Signature		
Date (dd/mm/yyyy)	••••••	•••••••
D D M M Y Y	Υ	Y
Applicant 2		
Full Name		
Signature		
Date (dd/mm/yyyy)		
	Υ	Υ

#### **GDPR CONSENT**

#### Applicant 1

I hereby grant Jordan International Bank Plc and any of its thirdparty processors authority to process my personal information/ data, for the purpose of assessing my application and make decisions as to whether the Bank is able to provide me with the products/services I have requested.

I understand that this is necessary for the Bank to process my personal information/data for the purposes of assessing my application.

I understand that I can find full details of what personal information/data the Bank collects, the purpose for collection and processing, and how I can withdraw my consent from the following link on the Bank's website:

#### https://www.jordanbank.co.uk/media/1128/privacy-policy.pdf

Full Nar	ne						
Signatu	re						
Date (de	d/mm/yy	уу)			••••••	••••••	
D	D	M	M	Y	Y	Y	Υ

#### Applicant 2

Full Name

I hereby grant Jordan International Bank Plc and any of its thirdparty processors authority to process my personal information/ data, for the purpose of assessing my application and make decisions as to whether the Bank is able to provide me with the products/services I have requested.

I understand that this is necessary for the Bank to process my personal information/data for the purposes of assessing my application.

I understand that I can find full details of what personal information/data the Bank collects, the purpose for collection and processing, and how I can withdraw my consent from the following link on the Bank's website:

### https://www.jordanbank.co.uk/media/1128/privacy-policy.pdf

Signature							
••••							
Date (dd/m	nm/yyy	y)					
D	D	M	$\mathbb{N}$	Y	Y	Y	Y