



Nature of Change : \_\_\_\_\_  
 Existing : \_\_\_\_\_  
 Revised: \_\_\_\_\_

**FATCA and CRS Confirmation (Applicable for all Amendments)**

FATCA: Is any of your previous or new information / address / contact number (Mobile / office) / source of funds based in the US?  Yes  No

*In case of FATCA confirmation is Yes , then please follow the below documentations accordingly:*

- *Complete fresh "FATCA Checklist" for the customer and follow documentation requirements.*

CRS: Is any of your previous or new information / address / contact number (Mobile / office) / source of funds based other than US and Pakistan?  Yes  No

*In case of CRS confirmation is Yes , then please follow the below documentations accordingly:*

- *Complete "Individual Tax Residency Self-Certification" Form.*

**Applicant's Confirmation: I / we hereby confirm that the information above is true, accurate and complete. I / We also agree and undertake to notify the Bank within 30 calendar days if there is a change in any information, which I / we have provided to the bank.**

Signature of Applicant(s):

Applicant 1	Applicant 2

Date: \_\_\_\_\_

**For Bank Use Only – Branch Authorization**

We confirm that the new information provided by the customer has been assessed for impact on FATCA and CRS classification of the account and a fresh FATCA Checklist and CRS relevant forms (where required) has been completed, and new documentation, if required (as established through the checklist ) has been obtained.

Request Received (Date & Time): \_\_\_\_\_

Received By (Name & Signature)	Approved By (Name & Signature)