

Branch/Unit _____ Date _____ CIF Number (For Bank's Use Only) _____

Business Name Main / Head Office Branch / Regional Office Sole Proprietorship Partnership Corporation Trade Name _____

Registration No. _____ Date of Registration/Incorporation (mm/dd/yyyy) _____ TIN / SSS No. / GSIS No.

Email Address _____ Website _____ Fax No. _____

Principal Office Address _____ Zip Code _____ Office Phone No. _____
(Unit / Floor No., Building Name, Building/House No., Street, Subdivision/Village, Barangay, City/Municipality, Province)

Branch/Regional Office Address (if applicable) _____ Zip Code _____ Office Phone No. _____
(Unit / Floor No., Building Name, Building/House No., Street, Subdivision/Village, Barangay, City/Municipality, Province)

Principal Place of Operation <input type="checkbox"/> Principal Office Address <input type="checkbox"/> Branch / Regional Office Address <input type="checkbox"/> _____	FOR COOPERATIVE ONLY	
	Cooperative Identification No.	Date of Registration
Source(s) of Funds <input type="checkbox"/> Business <input type="checkbox"/> Interest <input type="checkbox"/> Commission <input type="checkbox"/> Gifts/Donations <input type="checkbox"/> Dividend <input type="checkbox"/> _____		

Major Industry of Business _____

Residency*
 Resident (Domestic/Foreign Entity registered in the Philippines)
Note: For foreign entities engaged in trade/business within the Philippines, the Bank shall obtain document(s) and/or information duly authenticated by the Philippine Consulate where said entities are registered
 Non-Resident (Foreign Entity not engaged in trade/business within the Philippines)
**FCBS Non-Resident Indicator: Resident = NO ; Non-Resident = YES*

Affiliations with China Banking Corporation (CBC) and its Employees
 Not Applicable
 The Entity is CBC's subsidiary/affiliate
 Director/Stockholder/Officer of the Company is/are employed with CBC (Name _____ Position/Unit _____)

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) INFORMATION

1. Was the Entity organized in the U.S., or under U.S. Laws, or a U.S. Domestic Trust, or with substantial U.S. owner(s) who own(s) more than 10% stock/interest of such entity? YES NO
If YES, kindly accomplish a separate FATCA Customer's Information for U.S. Persons form should be accomplished jointly by all authorized signatories to declare that the Partnership/Corporation is a U.S. Person. Additional FATCA for US Person form shall be accomplished by EACH substantial U.S. Owner(s) who own(s) more than 10% stock/interest of such entity.

2. If No to item no.1. Does the Entity has any of the following records in the US? YES NO

- U.S. Residence
- Mailing Address (including a U.S. Post Office Box)
- U.S. Telephone Number
- Standing Instruction to transfer funds to accounts maintained in the U.S.
- Do you have a Power of Attorney or signatory authority granted to a person with U.S. Address; or "in-care-of" or "hold mail" address?

*If YES, kindly submit: U.S. IRS Form W-8BEN-E** AND Philippine SEC Certificate of Registration or other documentation establishing non-U.S. Status*
***Kindly ask the Bank for a copy of U.S. IRS Form W-8BEN-E (Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting – Entities).*

CERTIFICATION

I/We/The Entity hereby certify and attest that all information provided herein and the Supporting Documents submitted are TRUE, CORRECT, ACCURATE, COMPLETE and UPDATED.

In the Foreign Account Tax Compliance Act (FATCA) Information section, if I/we/the Entity answered "NO" to all items, I/we/the Entity hereby certify that the Entity is not a U.S. Person and WITHOUT U.S. Indicia. If I/we/the Entity answered "NO" to item 1 and "YES" to item 2, I/we/the Entity hereby certify that the Entity is not a U.S. Person but WITH U.S. Indicia. I/We/The Entity undertake to submit the required documents to support my/our Non-US Person status (with or without US Indicia). In the event that the Bank discovers that the Entity is a U.S. Person, I/we/the Entity hereby waive my/our/the Entity's rights of confidentiality under applicable laws and the Bank and its authorized representative(s) are hereby absolutely and unconditionally authorized to report and disclose to the U.S. IRS or Philippine Regulatory Agencies (e.g., Bureau of Internal Revenue, Bangko Sentral ng Pilipinas, and the like) and/or any third party authorized to receive FATCA information, any and all information regarding my/our/the Entity's account that shall be required. In the event of any change in my/our/the Entity's circumstance which may affect my/our/the Entity's status, I/we/the Entity undertake and warrant that I/we/the Entity will inform the Bank in writing of such change within thirty (30) calendar days from occurrence of such change.

I/We/The Entity understand that providing any false or invalid statement(s), information or document(s) to China Banking Corporation may be a ground for disapproval or immediate closure by the Bank of my/our/the Entity's account(s) or investment(s). I/We/The Entity have been properly informed of the Terms and Conditions governing my/our/the Entity's account(s) or investment(s) as set forth by the Bank, including the current fees and charges being imposed, and I/we/the Entity have read, understood, agreed to and accepted them. Relative to the establishment and operation of my/our/the Entity's account(s) or investment(s), I/we/the Entity further agree to have my/our/the Entity's account(s) or investment(s) with the Bank governed by the rules and regulations of BSP, AMLC, SEC, PDIC, PSE, other government regulatory agencies and central monitoring bodies or entities, and applicable laws relative to the establishment and operation of my/our/the Entity's account(s) or investment(s). I/We/The Entity undertake to advise the Bank in writing of any change in the information I/we/the Entity have provided.

I/We/The Entity shall indemnify and hereby hold the Bank, its directors, stockholders, officers, employees, representatives, agents or other units of the Bank, including its subsidiaries and affiliates, free and harmless from and against any and all liabilities, actions, damages, proceedings, losses and/or any and all claims of whatever nature which may be suffered or incurred by the Bank as a result of or in any way arising from or connected with any false, inaccurate, incomplete or invalid information/documents provided to the Bank.

Name of Sole Proprietorship / Partnership / Corporation / Organization / Other Entity
By:

(1) Authorized Signature Over Printed Name/Designation/Date
CIF No.: _____

(2) Authorized Signature Over Printed Name/Designation/Date
CIF No.: _____

(3) Authorized Signature Over Printed Name/Designation/Date
CIF No.: _____

(4) Authorized Signature Over Printed Name/Designation/Date
CIF No.: _____

Note: Each Owner and Authorized Signatory must accomplish a separate Customer Information File (CIF) for Authorized Signatory.

FOR BANK'S USE ONLY			Scanned By/Date (EDCIS)
Referred By	Signature Verified By/Date	Approved By/Date	