

## Know Your Customer – Update Your Information

Customer's Branch:  Serving Branch:  KYC Form Filling Date: ...../...../.....

New customer  Current customer-update/edit information in KYC form- Individuals

For current customer, employee use only:

Customer Profile Number (s)			

### Personal information:

Customer's Title:

\* Arabic Name as mentioned in the Identity Card

\* English Name as mentioned in the Identity Card

National Identification Number for Jordanians  Personal Number for Non- Jordanian

Gender:  Nationality  Date of birth  Country / city of birth

Do you have any other nationalities?  Yes,  No, If yes, please mention them

Mother's name:  Educational level:  Health status:  Healthy  Disabled, Identify type of disability

### Identity Card Information

Identity Card Type:  Civil Status Card  Birth Certificate  Military Certificate  Residence Card for People of The Gaza Strip  Children of Jordanian Women Identification Card  Family Book  Regular Passport  Jordanian Passport Without a National Number  Diplomatic Passport

Identity Card Number:  Issuance Date ...../...../..... Expiry Date ..../...../..... Issuance Place

Additional Documents for Non-Citizens:

Syrian Community Card  Work Permit  Jordanian Investor Card  Residence Permit  Diplomatic ID card Issued by Ministry of Foreign Affairs

1- Identity Card Type  Identity Card Number  Issuance Date: .../...../..... Expiry Date: .../...../.....

2- Identity Card Type  Identity Card Number  Issuance Date: .../...../..... Expiry Date: .../...../.....

Customer's Social Information:

Marital Status:  If married, please fill the information below.

Husband/Wife(s) Name(s):  Number of Children:

Children name(s):

Are you a United States citizen?  Yes  No

Are you a Green Card holder?  Yes  No

Do you have a residential or postal address at the United States?  Yes  No

Do you pay tax for the United States government?  Yes  No

## Residence Information

Resident  Non-Resident in Jordanian Hashemite Kingdom

### Address in Home Country:

Country:  City/Governorate:  region:  Street:  Building Number:

Apartment Number:  Home Type:  Owned  Rented

### Current Address:

Country:  City/Governorate:  region:  Street:  Building Number:

Apartment Number:  Home Type:  Owned  Rented

Customer  
Signature

### Contact Information:

Phone number:  Home number:  Town:  Post Office Box:

Postal Code:  Country:  Email:  Fax Number:

Entered contact information – mobile number – will be used for SMS Service

## Nature of Work Income Sources:

### Work situation:

Employee	Business owner	Vocational Workers and Freelancers	Other
<input type="checkbox"/> General sector	<input type="checkbox"/> Private property, fill Appendix 2	<input type="checkbox"/> Identify Please	<input type="checkbox"/> Civil / military retiree
<input type="checkbox"/> Private sector	<input type="checkbox"/> Partnership		<input type="checkbox"/> Housewife
<input type="checkbox"/> Governmental sector	<input type="checkbox"/> Contribution		<input type="checkbox"/> Student
<input type="checkbox"/> Military/ police/ Justice sector			<input type="checkbox"/> Unemployed

### Economic sector:

Employer name:  Job title:

Monthly income (JOD):  brief description of the nature of the job:

### Work Address:

Country:  City/Governorate:  region:  Building Number:

Apartment Number:  Office Number:  Work phone Number:

Fax Number:  Mobile Number:

Details of additional sources of income (JOD)

Do you have additional sources of income?  Yes,  No If yes, please identify the nature of additional source

of income:  Additional monthly income amount:  Net worth Source:

Net worth amount:  Cash assets owned amount :  Tangible Assets owned :

Tangible assets value:

Have you or any of your first degree relatives ever worked in a high political, governmental, diplomatic, judicial, military or executive position in a governmental company?  Yes,  No, If yes, please fill Appendix (3)

**The purpose of Dealing with JIB:**

New account type:  Personal  Joint  State – Guardianship

In case of personal joint account:

Partner Name	Relationship Connection Type	Partner's Personality	The Purpose of Joint Account	Partner's File Number (For Bank Use)

In case of State – Under Guardianship Account:

Guardian's Name	Guardian's Nationality	Relationship Between Guardian and Account Owner	Custody Type (Guardianship)	Guardian's File Number

Please specify the purpose of opening new account:  Salary  Saving  Financial Services  Finance

Good Loan  Investment  Proxy Account  Safe Deposit Boxes Service  Others , Please Identify:

What is the nature of expected transactions of the new account(s) you would like to open in JIB?

- Cash withdrawal and Deposit     Cheques deposit and cashing     Cash Withdrawal /Deposit On ATM
- Personal guarantees     Money Transfer

Please specify the expected accounts transaction volume and frequency

Please specify expected amount of monthly Deposit transaction

Do you expect executing regular inward or outward transfers?  Yes,  No , if yes, please fill the following

fields, Expected outward transfers countries:  Expected inward transfers countries:

Relationship between the customer and the money transfer sender/ receiver:

\* I acknowledge that I am the real beneficiary of opened account(s)  Yes,  No, If no please fill the following fields and Appendix (4)

Is this account subjected to a valid power of attorney or you want to authorized any person on your accunts?

Yes,  No, If yes, please fill Appendix (1)

Customer  
Signature

**Declaration and Undertaking:**

I acknowledge that all the data and information stated in this form and appendices are correct, valid and updated up until the moment, and I undertake to promptly inform Jordan Islamic Bank of any changes to the data and information stated in this form and its appendices within (30) days of the change, I also undertake to provide the Jordan Islamic Bank with any information and/or data and/or documents and/or files considered necessary by Jordan Islamic Bank according to laws and regulations issued by the relevant official and supervisory authorities, and/or to enhance the validity of the data and information stated in this form and its appendices, upon request and with no delay or resistance.

Non Jordanian  
Customer  
Signature

I undertake to provide Jordan Islamic Bank with a copy of my passport in case of renewal within (30) days maximum. In case of not providing Jordan Islamic Bank with my valid (new) passport, some financial operations and services will be suspended gradually.

**Authorization**

I, the undersigned, authorize Jordan Islamic Bank to disclose and/or exchange information and/or documents and/or files and/or data related to my accounts or my personal or financial information that may be required by the nature of banking operations and services provided to me in direct / indirect participation with national/ international relevanty authorities, which is concerned in providing me with the required service/ operation.

Have the account information been updated according to an approved power of attorney?  Yes,  No  
If yes please fill the following fields and sign.

Authorized person file number :

**Declaration:**

I am (the authorized person)  On behalf of  declare that the authorizer's phone number is correct, so I sign.

Date: ...../...../.....

Full Name – Authorizer: .....

Signature:.....

For bank use		
Branch controller/ manager	Signature verification	Signed in front of me
Name:.....	Employee name:.....	Employee name:.....
Signature:.....	Signature:.....	Signature:.....
Date: / /	Procedure: .....	

**Additional information for Enhanced Due Diligence Customer**

**Account owner information:**

Account number:

Additional details about the customer activities' nature (include owned companies/ individual institute or any other activity):

Worth sources:  Salary/ work  Financial /Real estate investment  Inherit  Free businesses  Others, mention please  Expected cash source (If exist)

The nature of expected transactions of the account:  Money transfers  Cheques  Cash deposits  Others, please mention:

Expected out words transfers countries:

Expected Inwords transfers countries:

Relationship between the money transfer sender and receiver:

**Appendix (1):** In case of Power of Attorney, (this information / documents are required in case of managing the account according to a power of attorney)

Purpose of attorney:

Power of Attorney type:  General  Limited, Power of Attorney number:  Power of Attorney date:  Power of Attorney expiry date (If exist):  Power of Attorney organizer:  Power of Attorney information (Attach an original/ verified certified of the Power of Attorney)

**Authorized person information**

Authorized person full name (Arabic Name):

Authorized person full name (English Name, three syllables minimum):

National number (for Jordanian) / Passport number for ( for Non-Jordanian):

Nationality:  Permanent home address

Phone number:  Authorized person file number (for bank use):

**Appendix (2):** For individual institute owners (This information / documents required in case of owning individual institute)

Institute Name:  Owner Name:

Registration place (country):  Commercial Name (If Exist):

Institute status:  The purpose:

Capital Amount:  Institute's address:

Registration date:  Institute number:

**Appendix (3):** In case that you or any of your relatives had ever worked in a high political, governmental, diplomatic, judicial, military or executive position in a governmental company

Arabic full name:

English Name (Three syllables minimum):

Degree of kinship with the customer:  Nationality:

Job title:

**Appendix (4):** In case the customer is not the real beneficiary of the account, (This information/ documents required)

Real beneficiary Arabic full name:

Real beneficiary English Name (Three syllables minimum):

Nationality:  The reason behind real beneficiary other than the account owner existence:

Nature of relationship between the real beneficiary and the account owner:

Real beneficiary file number (for bank use):

Date: ...../...../.....

Full name / the authorized person: .....

Signature: .....