

# Supplement to Account Opening Form

## 补充开户申请表

This form must be completed by any individual who wishes to open a banking account.  
本表由拟开立银行账户的个人完成。

Please complete in BLOCK LETTERS and put a "√" where applicable.  
请以正楷大写填写，并在相应选项下打“√”。

Name: \_\_\_\_\_  
姓名: \_\_\_\_\_

Country of Residence: \_\_\_\_\_  
居住国: \_\_\_\_\_

Country of Birth: \_\_\_\_\_  
出生国: \_\_\_\_\_

Please check "√" Yes or No for each of the following questions:

请回答以下所有问题并在“是”或“否”处打“√”：

Yes是 / No否

- |   |                          |                          |
|---|--------------------------|--------------------------|
| 1. Are you a U.S. Resident?<br>您是美国居民吗?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are you a U.S. Citizen?<br>您是美国公民吗?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you hold a U.S. Permanent Resident Card (Green Card)?<br>您持有美国永久居留卡（绿卡）吗? | <input type="checkbox"/> | <input type="checkbox"/> |

I hereby confirm the information provided above is true, accurate and complete.  
本人特此确认上述信息真实、准确、完整。

Subject to applicable local laws, I hereby consent for Standard Chartered PLC or any of its affiliates (including branches) (collectively "the Bank") to share my information with domestic or overseas regulators or tax authorities where necessary to establish my tax liability in any jurisdiction.

受限于当地适用法律的规定，本人特此同意Standard Chartered PLC或其任何关联机构（包括分支机构）（统称“银行”）在必要时向本国或境外监管机关或税务机关提供本人信息，以确定本人在任何司法管辖区的税务责任。

Subject to applicable local laws, where required by domestic or overseas regulators or tax authorities, I consent and agree that the Bank may withhold from my account(s) such amounts as may be required according to applicable laws, regulations and directives. 如本国或境外监管机构或税务机关要求，本人允许并同意银行可以从本人账户中代为扣缴根据适用法律、法规以及指令所要求的金额。

I undertake to notify the Bank within 30 calendar days if there is a change in any information which I have provided to the Bank.  
本人承诺，如果本人向银行提供的任何信息发生变化，本人将在30日内通知银行。

Signature: \_\_\_\_\_  
签署

Date: \_\_\_\_\_  
日期

### For Bank Use Only 银行专用

Rel. No 客户关系编号	ID and Verified by 见证人员工编号及签名
Recording Time 录音时间	Telephone Recording No 录音电话号码