

Relationship Number (FOR BANK USE ONLY)

Primary Account Holder:

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Joint Account/ Supplementary Card Holder:

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Application Form

I would like to apply for (please select where applicable):

Current Account Savings Account Fixed Deposit Home Loan Investment
 Credit Card Supplementary Card Flexi Fixed Deposit Payroll Account
 Priority Banking Personal Loan Credit Card Balance Transfer Balance Transfer with existing Credit Card

Purpose and Reason for Account Opening

Business Savings Payroll General/Personal Transactions
 Investment Purchase / Sale Instalment / Regular Payments International Payment / Transfer

1 Personal Details

Identity Document No. _____

The Information in Box A is as per my Identity Document Yes No

Please do NOT fill in Box A if 'Yes' is checked

Full Name _____ Box A

Place of Birth _____

Date of Birth

D	D

 /

M	M

 /

Y	Y	Y	Y

Box B is mandatory to fill

Current Residential Address _____ Box B

Kampong _____ Mukim _____

City/District _____ Postal Code _____

Country _____

Ethnic Type Chinese Malay Indian Other

Marital Status Single Married Other

Gender Male Female

Highest Education Primary Secondary Diploma Degree Master PhD Others

I do not wish to sign up for these services: Online Banking Banking Alerts

Surname as per Identity Document _____

Surname not applicable

The Information in Box C is as per my Current Residential Address Yes No

Please do NOT fill in Box C if 'Yes' is checked

Mailing Address _____ Box C

City/District _____ Postal Code _____

Country _____

Box D is mandatory for foreign nationals

Foreign Residential Address _____ Box D

City/District _____ Postal Code _____

Country _____

Foreign Mobile Number + _____

Contact Information

Please provide contact numbers by Country Code, Area Code, Number

Mobile* + _____

Residential + _____

Office + _____

Email Address* _____ @ _____

* mandatory fields

2 US Status

Citizenship _____ Country of residence _____ Domicile Country _____

In case of multiple nationalities, please list ALL Nationalities/Citizenships held

Are you a U.S Resident? Yes No

Are you a U.S Citizen? Yes No

Do you hold a U.S Permanent Resident Card (Green Card)? Yes No

If "Yes" is answered for any of these boxes, please submit a Form W-9.

3 Tax Residence Information

Please complete the following table indicating (i) the country/jurisdiction where you are a resident for tax purposes and (ii) your Taxpayer Identification Number or functional equivalent (hereafter referred as TIN) for each country/jurisdiction indicated.

If you are a resident for tax purposes in more than three countries/jurisdictions, please use a separate sheet.

If a TIN is unavailable, please provide reason A, B or C where appropriate:

- Reason A: The country/jurisdiction where you are resident does not issue TINs to its residents.
- Reason B: You are unable to obtain a TIN (please explain why you are unable or not required to obtain a TIN in the table below if you have selected this reason).
- Reason C: No TIN is required (note: only select this reason if the authorities of the country/jurisdiction of residence for tax purposes entered below do not require the TIN to be disclosed).

No.	Country or Jurisdiction of Tax Residence	TIN	If no TIN or functional equivalent is available enter Reason A, B or C
1			
2			
3			

If Reason B is selected above, explain why you are unable or not required to obtain a TIN in the corresponding row below

1	
2	
3	

4 Employment Details

Job Status Salaried Self-employed Unemployed

Organisation Name/ School Name

Job Title _____

Length of Employment _____ **Contract Expiry Date** (if applicable)

Years Months _____
(DD/MM/YYYY)

Employment Address _____
(if applicable)

Work Type

- Salaried (Controller/Owner/Director) Salaried (General)
 Self-Employed/Business Owner Homemaker
 Student Un-employed Retired

Profession

- Labourer Clerical Professional
 Technician Uniform
 Sales/Commission Earner Other

Nature of Business (for self-employed)

- Import Export Retailer Manufacturing
 Wholesaler Commission Other _____

5 Debit Card

Name to be embossed on Debit Card (5 to 19 characters including spaces)

If this information is not provided, the Bank shall have the discretion to decide on the name to appear on your card.

Card Type Visa Debit Gold
 Visa Debit Platinum (for Priority Banking)

Account to link
(Primary)

Preferred Mode for Collection:

- Deliver to my Mailing Address Hua Ho Manggis Branch
 Gadong Branch Hua Ho Tanjung Bunut Branch
 Kuala Belait Branch

In light of the COVID-19 pandemic, we are delivering your cards to your Mailing Address. In case of unsuccessful delivery, we will send your card(s) to the branch nearest to your Mailing address. We will not deliver to overseas address or P.O. Box.

to link (Secondary)

6 Priority Banking

Household Recognition

- I would like to extend my Priority Banking's household and family benefits to the said applicant
 I would like to apply for Priority Banking's household and family benefits as my immediate family member is a Priority Banking customer

Relationship to Priority Banking Customer Spouse Father Mother Daughter Son

Name of Primary Priority Banking Customer _____

I.C. No.

Relationship No.

Priority Banking Member Signature

7 Credit Card

Qualifying criteria:

Please tick **ONLY ONE** of the following: 1, 2 or 3

1. Salary assigned to Standard Chartered Bank
 - Credited by employer
 - By Cash/Cheque
2. Salary assigned to another bank
Please indicate Bank _____
3. Fixed Deposit
 - Fixed Deposit Deal No _____

By signing this form, You hereby agree:

- (i) that your credit card shall be secured at all times with the Fixed Deposit amount pledged to Standard Chartered Bank;
- (ii) that, in addition to any other security Standard Chartered Bank requires to secure the balance owing or any amount which you may owe us in the future, the Fixed Deposit amount is subject to a banker's lien to Standard Chartered Bank;
- (iii) that, without limiting our other rights, Standard Chartered Bank may set off any of the Fixed Deposit amount against, or apply the lien as security, for any obligations you owe to us as and when the Bank sees fit;
- (iv) that Standard Chartered Bank may apply the above set off or lien after or without notifying you."

Credit Limit Amount

- Credit limit of BND _____
- Maximum credit limit entitlement as determined by Standard Chartered Bank

Card Type

- Visa Infinite Platinum Gold
 MasterCard Gold
 Co-Brand Hua Ho

Name to be embossed on Credit Card (5 to 19 characters including spaces)

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If this information is not provided, the Bank shall have the discretion to decide on the name to appear on your card.

Would you like to have your Credit Card payments deducted from your Standard Chartered Bank Current/Savings Account?

If yes, please provide account number: Follow SCB salary account

Please do NOT fill in account number if the above box is ticked.

- Full payment Minimum payment

Please request a Product Disclosure Sheet for more information

8 Supplementary Credit Card

Relationship to Primary Cardholder Spouse Son Daughter Father Mother Brother Sister

Identity Document No. _____

Surname as per Identity Document _____

Surname not applicable

Citizenship _____

The Information in Box E is as per my Identity Document Yes No

Please do NOT fill in Box E if 'Yes' is checked

Full Name	Box E

Place of Birth _____	
Date of Birth (DD/MM/YYYY) _____	

Relationship No. _____
(For Bank Use Only)

The Information in Box F is as per my Identity Document Yes No

Please do NOT fill in Box F if 'Yes' is checked

Current Residential Address	Box F

Kampong _____	Mukim _____
City/District _____	Postal Code _____
Country _____	

Name and Address of Employer

_____ Postal Code _____

Annual Income (BND) _____ Mobile + _____

Please include Country Code

Email Address _____@_____

Preferred Mode for Collection:

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 Gadong Branch Hua Ho Tanjung Bunut Branch
 Kuala Belait Branch

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9 Credit Card Balance Transfer

Standard Chartered Credit Card Number (Existing) _____

Tell us which credit card account(s)* to transfer from

Credit Card Number _____

Name of Credit Card holder _____

As per Identity Document

Credit Card issuing Bank _____

Total Outstanding Amount (BND) _____

(As per Certificate of Balance, rounded off to nearest dollar)

*BND20 is chargeable to your Credit Card the following month for the Cashier's Order

10 Personal Loan

Loan Facility

Please tick which type of loan facility you would like to apply

General Installment Loan

Loan amount

Loan tenor

 months

Interest rates

 % EIR

Monthly Installment (BND)

Home Improvement Loan

Loan amount

Loan tenor

 months

Interest rates

 % EIR

Monthly Installment (BND)

Education Loan

Loan amount

Loan tenor

 months

Interest rates

 % EIR

Monthly Installment (BND)

Consolidation Loan

Loan amount

Loan tenor

 months

Interest rates

 % EIR

Monthly Installment (BND)

Instructions (If any):

11 Home Loan

Type of Applicant

Single Applicant Joint Applicant No. of applicant(s) _____

Type of Facility

Term Overdraft Term & Overdraft

Home Ownership Scheme _____
Please specify which company

Tenor Years Months Interest Rate _____

Facility Amount (BND) _____

Monthly Installment (BND) _____

Buyer's Name as per Sale & Purchase Agreement _____

Address of Property _____

Repayment By

Borrower Joint Borrower

Current Registered Owner(s) _____

To be registered Owner(s) _____

Vendor/Developer _____

Purchase Price / Construction Cost (BND) _____

Purpose of Loan

Purchase property for own occupation

Purchase property for investment _____ number of investment

Construct on own land

Refinancing / take over from other bank

Top-up Others (please specify) _____

Nature of Land Title

Free hold Government Private Lease

Leasehold with remaining lease tenor _____

Strata title with remaining tenor _____

Type of Property

Residential Commercial (Shopping Mall / Shophouse)

Under Construction Completed

< 2 yrs old 2-4 yrs old > 5 yrs old

If COMPLETED is ticked, please select ONE of the above three options.

Type of Building

Detached Terrace - Intermediate Apartment

Semi-Detached Terrace - Corner Shophouse

No. of Floor levels

Single Storey Double Storey

_____ storeys of total _____ storeys

Condition of Building

Concrete Wooden Concrete & Wooden

Instructions (If any):

Before you sign this application form, please read our Customer Terms and other terms indicated in the Declaration section of this form, which are available on our website at www.sc.com/bn. You can request for a physical copy of these terms and conditions by calling us at 2658000.

By signing this application:

- You agree that you have applied for the (“Pack”) that comprises your application for the following: [CASA Account, Fixed Deposit, Online Banking, SMS Alert, e-Statements, Debit Card, Credit Card, Priority Banking, Personal Loan, and/or Home Loan (where applicable)]. You may contact us if you wish to remove any of the products or services in the Pack. However, if you choose to remove any of the products or services, you will not be entitled to the rewards and benefits that are given to you in connection with your original application.
- You acknowledge and confirm that you are the true owner of the account and are not acting on behalf of any other person.
- You acknowledge and confirm that all information (including any documents) you have given us in connection with this application is correct, complete and not misleading. If this is not the case, you will be personally liable.
- You understand that we may decline your application without giving you any reason for doing so. If this happens, no contractual relationship arises between you and us.
- You authorize us to verify any of the information you have given to us or your credit standing from anyone we may consider appropriate (such as an authority or credit reference agency).
- You confirm that your personal information provided in this application form and that of your joint account holder (if any) or authorised person (if any) will coincide with the account(s) you hold with us unless you expressly tell us otherwise.
- You confirm that the account operating authority instructed by you in this application form will reflect all accounts opened by you unless you notify us otherwise in writing.
- You give consent to every Standard Chartered Bank PLC and its subsidiaries and affiliates (including each branch or representative office) (“Standard Chartered Group”), its officers, employees, agents and advisers disclosing information relating to you (including details of our banking agreement, the accounts, the products or any arrangement with us), to our head office and any other member of the Standard Chartered Group in any jurisdiction (“permitted parties”) such as, professional advisers, service providers (whether located in Brunei or outside Brunei) for the purpose of providing any service to you in connection with this application (including data processing), or independent contractors to, or agents of, the permitted parties, such as debt collection agencies, data processing firms and correspondents who are under a duty of confidentiality to the permitted parties, any actual or potential participant or sub-participant in relation to any of our obligations under our banking agreement between us, or assignee, novatee or transferee (or any officer, employee, agent or adviser of any of them), any credit reference agency, rating agency, business alliance partner, insurer or insurance broker of, or direct or indirect provider of credit protection to, or any permitted parties; any court, tribunal or authority (including an authority investigating an offence) with jurisdiction over the permitted parties; a merchant or member of VISA International or MasterCard International where the disclosure is in connection with the use of a card; any authorized person or any security provider; anyone we consider necessary in order to provide you with the services in connection with an account.
- You acknowledge and agree that the information contained in this Form and information regarding the Account Holder and any Reportable Account(s) may be provided, directly or indirectly, to any relevant tax authority, including the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be resident for tax purposes pursuant to bilateral or multilateral agreements between governments to exchange financial account information. Where required by domestic or overseas regulators or tax authorities, you consent and permit that the bank may withhold from your account(s) any amount as may be required according to applicable laws, regulations and directives.
- You undertake to submit a suitably updated Form within 30 days of any change in information or change in circumstances which affects your tax residency status or where any information contained in this form becomes incorrect.
- You understand and accept we may assign or otherwise deal with our rights under our banking agreement (including any particular product or account) in any way we consider appropriate. If we do this, you may not claim against any assignee (or any other person who has interest in our banking agreement) any right of set off or other rights you have against us. If we ask, you must sign and give us or any other person we specify any document we reasonably require for this purpose.
- Where laws and regulations allow, you give us consent to periodically check your credit status with any credit bureau or credit reference agency.
- You give us consent to contact you at the address, email address and phone numbers you have provided to us, to give you information on other products and services that we, or our strategic partners, may offer.
- If you are applying for a Personal Loan, you are making an offer to borrow a loan from us for an amount and for a period stated in your application. You agree that the amount of loan which the Bank may approve may be varied from the amount applied for in this application.
- If we accept your offer, we will disburse the funds into your account. You agree to be bound by the terms contained in this application form and undertake to pay back all bank charges, fees or commission to be levied by the Bank in the event the Bank accepts this application. Acceptance of this application is at the Bank’s discretion and in the event of rejection, no reason need to be furnished by the Bank.
- If you wish to opt out from our Credit Card eStatement, CASA eStatement, Online/Mobile Banking and Banking Alert services you must notify us through formal writing.
- You acknowledge that all your statements be sent by email. Successful delivery will also depend on external factors not within our control and you must notify us immediately if you have not received your eStatement on time or if there is any change to your email address.
- If you are applying for a Credit Card, you agree that you must maintain a Fixed Deposit with us or your income is credited to an account with any bank in Brunei Darussalam as a qualifying criterion.
- You understand that we may register a legal, valid, binding and enforceable first ranking security interest over collateral pledged to us.
- You have read and understood our Customer Terms and the applicable documents referred to in Part A of our Customer Terms, forming our banking agreement. They are available on our website at www.sc.com/bn or you may call us at 2658000 for a physical copy. You agree to be bound by them when using any product or services we may provide you with. You acknowledge that you are bound by any variation we make to these documents, in accordance with our banking agreement.
- You have understood our Customer Terms and other relevant terms in English. If the terms have a Malay Version, such version shall be intended for reference only; in case of any inconsistency between the Malay version and the English version, the English version shall prevail.

Signing Authority for Joint Account

Any Joint Account Holder to sign All Joint Account Holders to sign Others (please specify) _____

Relationship with Main Applicant

Spouse Parent Son Daughter Sibling Others (please specify) _____

Strictly ONE signature per box

Signature of Main Applicant / Primary Cardholder	
Name:	Date:
IC No.	

Signature of Joint Applicant / Account Holder / Supplementary Cardholder	
Name:	Date:
IC No.	