## Self-certification Form – Individual (Sample form for reference and to be adopted by financial institutions)

		(Затріс	iorm for reference	and to be a	idopted by illiancial his	titutions)	
1	Identification	on of Individual Accou	nt Holder (for joint or	multiple acco	ount holders, please complete	a separate form for each account holder)	
Mr.							
Ms.	/ Mrs.	Surname			Given Name	Middle Name	
Date	e of Birth	(dd / mm / y	Place of Birth		City	Country	
2	Information	on Address of Individ	ual Account Holder	ı			
2.1	Current Res	ent Residence Address					
Line 1: (Street, Number, Building, Floor, Room)							
Line	e2: (City)						
Line3: (Province, State)							
Cou	intry				Postal / Zi	p Code	
2.2	Mailing Add	dress ( please only com	plete if mailing addre	ess is differe	nt to the current residence	e address )	
	. (6						
Line 1: (Street, Number, Building, Floor, Room)							
Line	e2: (City)						
Line3: (Province, State)							
Cou	ıntry			17	Postal / Zi	p Code	
2 Jurisdiction of Residence and Taxpayer Identification Number or functional equivalent number (hereinafter referred as "TIN")							
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		ne following table, indicate each jurisdiction indicat		n of residen	ce (including Macao SAR) (	of the Account Holder and (b) the Account	
If the Account Holder has more than three jurisdictions of residence, please use a separate sheet.							
If th	e Account Ho	lder has tax obligation i	n the Macao SAR, the	TIN is the ta	expayer number or the Maca	no SAR resident identity card number.	
If a TIN is unavailable, please provide the appropriate reason:							
	Reason A - 7	The jurisdiction of resid	ence of the Account Ho	older does no	ot issue TINs to its residents		
<b>Reason B</b> – The Account Holder is otherwise unable to obtain a TIN. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)							
	Reason C -	No TIN is required. (The	e authorities of the juri	sdiction of r	esidence do not require the	TIN to be disclosed)	
Jurisdicti			TIN		If no TIN available,	If Reason B is selected, please explain	
		on of residence			enter Reason A, B or C	why you are unable to obtain a TIN	
(1)							
(2)							
(3)							

4 Declarations and Signature						
I understand that the information supplied by me is covered by the full p relationship with(Financial Inst						
I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be reported to the Macao SAR Financial Services Bureau and exchanged with tax authorities of such jurisdictions of residence of the Account Holder, pursuant to agreements for exchange financial account information.						
I certify that I am the Account Holder / I am authorized to sign for the Account Holder of all the account(s) to which this form relates#1.						
I undertake to advise						
	Note:					
	If you are not the Account Holder, please indicate the capacity in which you are signing the form.					
	Name					
Signature	Capacity					
Date	If signing under a power of attorney please also attach a certified copy of the power of attorney.					

## Note:

• With regard to the interpretation of the terms used in this form, please refer to Article 8 of the "The Common Reporting Standard and the Due Diligence Procedures for Financial Account Information".

<sup>#1</sup> Delete where not applicable.

<sup>&</sup>lt;sup>#2</sup> Financial Institutions may determine the time-limits (for example "30 days") pursuant to "The Common Reporting Standard and the Due Diligence Procedures for Financial Account Information" and their own procedures.