

Account Opening Form

for Non UK Residents

For office use:
Customer identifier 1
Customer identifier 2
Scheme code

Please fill in the form using BLOCK CAPITALS and black ink. Tick any boxes which apply.

To be completed by the customer:

Account to be opened at Branch:	Product / Account type: (eg. Current Account)	Currency: (GBP/Dollar/Euro)	Purpose of the account:
City of London <input type="checkbox"/> Hounslow <input type="checkbox"/>	1) Savings Account <input type="checkbox"/>	GBP <input type="checkbox"/>	Savings <input type="checkbox"/>
Birmingham <input type="checkbox"/> Ilford <input type="checkbox"/>	2) Fixed Deposit <input type="checkbox"/>	USD <input type="checkbox"/>	Other <input type="checkbox"/>
Coventry <input type="checkbox"/> Leicester <input type="checkbox"/>		EURO <input type="checkbox"/>	<input type="text" value="(Please specify)"/>
East Ham <input type="checkbox"/> Manchester <input type="checkbox"/>			
Golders Green <input type="checkbox"/> Southall <input type="checkbox"/>			
Harrow <input type="checkbox"/> Wolverhampton <input type="checkbox"/>			

Do you already have an account with SBI UK?

Yes No

If yes, please provide your Account number:

Your Details (First customer)

Title: Mr Mrs Ms Miss Other

First name:

Middle name:

Surname:

Date of birth: / /

*Proof of identity:
Passport

Passport number:

Date of issue: / /

Date of expiry: / /

If Visa held, date of expiry: / /

Place of birth: (City and Country)

Country of nationality:

Your Details (Second customer)

This only applies if you want to open a joint account

Title: Mr Mrs Ms Miss Other

First name:

Middle name:

Surname:

Date of birth: / /

*Proof of identity:
Passport

Passport number:

Date of issue: / /

Date of expiry: / /

If Visa held, date of expiry: / /

Place of birth: (City and Country)

Country of nationality:

Your Details *(Continued)*

Mother's maiden name: *(required for security purposes, not more than 15 characters)*

Marital status: *(Please tick the appropriate box)*

Single	<input type="checkbox"/>	Separated	<input type="checkbox"/>
Living with a partner	<input type="checkbox"/>	Widowed	<input type="checkbox"/>
Divorced / dissolution of a civil partnership	<input type="checkbox"/>	Married / in a civil partnership	<input type="checkbox"/>

How many children or other people depend on you financially?

Home phone number: *(including country and area code)*

Mobile phone number:

(By giving us your mobile number, you have agreed to register for MasterCard Secure Code for using your debit card for Internet based online payments and to receive mobile alerts for account updates.)

E-mail address:

(By giving us your e-mail address, you agree we may send you emails to service your account.)

Current address:

Line 1	<input type="text"/>		
Line 2	<input type="text"/>		
Town	<input type="text"/>		
Country	<input type="text"/>	Post code	<input type="text"/>

Residential status:

Home owner	<input type="checkbox"/>
Living with family / friends	<input type="checkbox"/>
Tenant	<input type="checkbox"/>

How long have you lived at this address? Y Y / M M

If you have been at your current address for less than 3 years, please provide us with all the addresses you have lived at in the past 3 years.

Previous address:

Line 1	<input type="text"/>		
Line 2	<input type="text"/>		
Town	<input type="text"/>		
Country	<input type="text"/>	Post code	<input type="text"/>

How long have you lived at this address? Y Y / M M

Permanent Address: *(if different from current address)*

Line 1	<input type="text"/>		
Line 2	<input type="text"/>		
Town	<input type="text"/>		
Country	<input type="text"/>	Post code	<input type="text"/>

Your Details *(Continued)*

Mother's maiden name: *(required for security purposes, not more than 15 characters)*

Marital status: *(Please tick the appropriate box)*

Single	<input type="checkbox"/>	Separated	<input type="checkbox"/>
Living with a partner	<input type="checkbox"/>	Widowed	<input type="checkbox"/>
Divorced / dissolution of a civil partnership	<input type="checkbox"/>	Married / in a civil partnership	<input type="checkbox"/>

How many children or other people depend on you financially?

Home phone number: *(including country and area code)*

Mobile phone number:

(By giving us your mobile number, you have agreed to register for MasterCard Secure Code for using your debit card for Internet based online payments and to receive mobile alerts for account updates.)

E-mail address:

(By giving us your e-mail address, you agree we may send you emails to service your account.)

Current address:

Line 1	<input type="text"/>		
Line 2	<input type="text"/>		
Town	<input type="text"/>		
Country	<input type="text"/>	Post code	<input type="text"/>

Residential status:

Home owner	<input type="checkbox"/>
Living with family / friends	<input type="checkbox"/>
Tenant	<input type="checkbox"/>

How long have you lived at this address? Y Y / M M

If you have been at your current address for less than 3 years, please provide us with all the addresses you have lived at in the past 3 years.

Previous address:

Line 1	<input type="text"/>		
Line 2	<input type="text"/>		
Town	<input type="text"/>		
Country	<input type="text"/>	Post code	<input type="text"/>

How long have you lived at this address? Y Y / M M

Permanent Address: *(if different from current address)*

Line 1	<input type="text"/>		
Line 2	<input type="text"/>		
Town	<input type="text"/>		
Country	<input type="text"/>	Post code	<input type="text"/>

Internet Banking *(First customer)*

Do you require Internet Banking?

Yes No

If yes,

i) You will be registered to Retail Internet Banking Service (Online SBI Global).

ii) You may obtain details of your transactions by logging in to your account at any time, however no online transaction would be permitted.

iii) We will send you an annual account statement by post.

If yes, First Applicant mother's Maiden Name

Internet Banking *(Second customer)*

Do you require Internet Banking?

Yes No

If yes,

i) You will be registered to Retail Internet Banking Service (Online SBI Global).

ii) You may obtain details of your transactions by logging in to your account at any time, however no online transaction would be permitted.

iii) We will send you an annual account statement by post.

If yes, Second Applicant mother's Maiden Name

Your Banking Details *(First customer) Optional*

Do you have a bank account with another financial institution in the UK?

Yes No

Bank / Building society name: *(in UK)*

Sort Code:

Account Number:

Your Banking Details *(Second customer) Optional*

Do you have a bank account with another financial institution in the UK?

Yes No

Bank / Building society name: *(in UK)*

Sort Code:

Account Number:

Source of Income *(First customer)*

Please tick the appropriate box:

Employment Business

Pension Investment

Other

Employment / Business details:

Employed full-time Employed part-time

Self-employed Unemployed

Retired Student

Homemaker

Do you have another source of income (e.g. state benefits, income from rent, pension or other)? If yes, please give details:

If you have selected either 'Employed full-time', 'Employed part-time' or 'Self employed', please complete the section below:

Name of Employer / Business:

Employer's address / Address of business:

Post code

What is your occupation and job title?

Period at Employment:

/

What is the nature of your employer's business / your business?

Source of Income *(Second customer)*

Please tick the appropriate box:

Employment Business

Pension Investment

Other

Employment / Business details:

Employed full-time Employed part-time

Self-employed Unemployed

Retired Student

Homemaker

Do you have another source of income (e.g. state benefits, income from rent, pension or other)? If yes, please give details:

If you have selected either 'Employed full-time', 'Employed part-time' or 'Self employed', please complete the section below:

Name of Employer / Business:

Employer's address / Address of business:

Post code

What is your occupation and job title?

Period at Employment:

/

What is the nature of your employer's business / your business?

Source of Income *(Continued)*

Total Gross Annual Income from all sources: *(This is the income you receive before deduction of any income or other tax)*

How often do you get paid? *(Your main income)*

Monthly Weekly
 Fortnightly Other

How do you get paid? *(Your main income)*

Direct into an SBI bank account By cheque
 Direct into another current account In cash
 Other

Source of Income *(Continued)*

Total Gross Annual Income from all sources: *(This is the income you receive before deduction of any income or other tax)*

How often do you get paid? *(Your main income)*

Monthly Weekly
 Fortnightly Other

How do you get paid? *(Your main income)*

Direct into an SBI bank account By cheque
 Direct into another current account In cash
 Other

Tax Status *(First customer)*

Are you eligible to receive interest gross?

Yes No

If yes, you must complete and submit to SBI UK an R105 form.

Tax Residency Details

(Tax residency is the county in which you are liable to pay Income and/ or Capital Gains Tax)

First customer:

Country of Tax Residency	National Insurance Number/ Tax Identification Number (TIN)*	Reasons for not providing TIN (enter reason A, B or C)	End Date of Tax Residency, if known (DD/MM/YYYY)

Second customer:

Country of Tax Residency	National Insurance Number/ Tax Identification Number (TIN)*	Reasons for not providing TIN (enter reason A, B or C)	End Date of Tax Residency, if known (DD/MM/YYYY)

The taxpayer identification number (TIN) is the unique identifier assigned to the Account Holder by the tax administration in the Account Holder's jurisdiction of tax residence. It is a unique combination of letters and/or numbers used to identify an individual or entity for the purposes of administering the tax laws of that jurisdiction. It includes:

- Social security number
- National insurance number
- Citizen or personal identification code or number
- Resident registration number

Reason A - The country where the Account Holder is tax resident does not issue TINs to its residents

Reason B - The Account Holder is otherwise unable to obtain a TIN or equivalent number (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. (Note: Only select this reason if the authorities of the country of tax residence entered above do not require the TIN to be disclosed)

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B.

1	
2	
3	

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B.

1	
2	
3	

Declaration *(First customer)*

Have you ever:

Been made bankrupt?

Yes No

Had a court order for debt registered against you?

Yes No

Declaration of residence:

I declare that I am permanently resident in

Terms & Conditions

As part of our application we may make identity enquiries which may involve credit reference agencies checking the details supplied against any particulars on any database (public or otherwise) to which they have access. They may also use your details in future to assist other companies for verification purposes. If I/we are affected by identity fraud (including the past cases), I/we agree to inform the bank in writing as I/we become aware.

Law enforcement agencies may access and use the given information. In order to prevent or detect fraud, the information provided in the application will be shared with fraud prevention agencies.

If you give us false or inaccurate information and we identify fraud, we will record this and pass it to fraud prevention agencies to prevent fraud and money laundering. We and other organisations may access and use from other countries the information recorded by fraud prevention agencies. Further details explaining how the information held by fraud prevention agencies may be used can be obtained in www.sbiuk.com/credit-reference or contacting us.

The State Bank of India would like to keep you informed about any special offers you may be entitled to or about products and services available from the State Bank Group that they think may interest you. If you do not want information on other products and services, please tick the following boxes: Please do NOT contact me:

by email and text by post and telephone

However, we will continue to update you on required changes regarding servicing your account with us. Unless you have said otherwise, by continuing with this application, you agree to us contacting you using any of the methods shown above. Please note that you will continue to receive mobile alerts, which will keep you advised of your regular banking transaction details.

US withholding tax declaration

For the purpose of the US Foreign Accounts Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I/we also agree to notify you if my/our situation changes:

Please note, unfortunately, at present the State Bank of India (UK) does not have the facility to accommodate applications from US Persons (US Citizen or US residents).

Applicant 1

I am not a US person or US citizen I am a US person or US citizen

(Please note, unfortunately, at present the State Bank of India (UK) does not have the facility to accommodate applications from US Persons (US Citizen or US residents))

Applicant 2

I am not a US person or US citizen I am a US person or US citizen

(Please note, unfortunately, at present the State Bank of India (UK) does not have the facility to accommodate applications from US Persons (US Citizen or US residents))

I/we understand that the information I/we have given to the bank and other information I/we give to the bank (described in the section of the Bank's Terms and Conditions relating to Data Protection) will be used for the purposes set out in that section.

Declaration *(Second customer)*

Have you ever:

Been made bankrupt?

Yes No

Had a court order for debt registered against you?

Yes No

Declaration of residence:

I declare that I am permanently resident in

I/we understand that the mobile number provided in the application form will be used to send the One-Time Passcode (OTP) while adding / registering Beneficiaries to the account for Online Banking Transactions.

I/We have read, understood and acknowledge the receipt of

- The Bank's Terms and Conditions Information about Tariff of charges
- Summary of information about the products
- Financial Services Compensation Scheme's (FSCS) Information sheet and Exclusion list

which I/we have read and I/we understand this forms part of our contract with the Bank. If there is anything in the Bank's Terms and Conditions which I/we do not understand or wish to discuss I/we will contact 0800 532 532 (Monday - Friday, 9:00 am to 6:00 pm) at the Bank before signing this form.

I/we are aware that I/we can also access the Bank's Terms and Conditions, information about Tariff of charges and Summary of information about the products on your website www.sbiuk.com.

I/we agree to provide to the Bank in writing notice of any changes to my/our personal details or my/our circumstances which are provided in this form.

By submitting this form, I/we confirm that the information I/we have provided is true to the best of my/our knowledge.

Please note that if this is a joint account, we will accept authority of any joint account holder to give instructions on behalf of all other account holders relating to the account, until it is cancelled.

First customer name:

Signature:

Date:

/ /

Second customer name:

Signature:

Date:

/ /

Documents Enclosed: (If you are visiting a branch, please bring original documents. If you are completing and sending this application form by post, please provide certified copies of documents 1 & 2 below. The documents are to be certified by a registered Solicitor, Notary, Chartered Accountant or your Bank.)

1. A copy of passport or UK driving licence showing the photograph and validity.
 2. A copy of utility bill or bank statement which is less than 3 months old. If you have been at your current address for less than 3 years then please provide a proof of previous addresses so as to cover a period of 3 years.
 3. In addition, we may ask for proof of source of wealth.
 4. Amount you wish to deposit in your account.
Amount
- by Transfer / Cheque (please circle one)

I/we heard about SBI from:

SBI Customer Television Newspaper
Financial News Websites Other (Please specify)

FOR APPLICANTS RESIDENT IN INDIA

I/We hereby declare that the transaction(s) to be routed through my / our account does not involve and is not designed for the purpose of any contravention or evasions of the provisions of the FMLA or FEMA, 1999 or of any rule regulation, notification, direction or order made thereunder. I/We also hereby agree and undertake to give such information/documents before the bank undertakes the transaction(s) and as may be required from time to time as will reasonably satisfy you about the transaction(s) interms of declaration. I/We also understand that if I/We refuse to comply with any such requirement or make unsatisfactory compliance therewith, the Bank shall refuse in writing to undertake the transaction and shall if it has reason to believe that any contravention/evasion is contemplated by me/us and report the matter to Regulator/or otherwise also, as and when demanded by them.

Signature:



25,000 STATE BANK GROUP BRANCHES IN 37 COUNTRIES • 500 MILLION CUSTOMERS • IN THE UK SINCE 1921

Authorised and regulated by Reserve Bank of India and Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority (FCA) and limited regulation by the Prudential Regulation Authority. Details about the extent of our regulation by the Prudential Regulation Authority and Financial Conduct Authority are available from us on request. State Bank of India is a member of the Financial Services Compensation Scheme established under the Financial Services and Market Act 2000. The Financial Services Compensation Scheme protects deposits held with our UK branches. Payment under this scheme are limited to £85,000 of your total deposits with us in the UK.

For more information or clarification, visit our website www.sbiuk.com, call us on 0800 532 532 or email to customerservices.sbiuk@statebank.com or visit your local branch. The contact centre is open Monday, Tuesday, Wednesday and Friday 9.00am to 6.00pm, Thursday 9.00am to 5.00pm, Saturday 9.00am to 3.00pm and Sunday closed.