FIMBANK

FOR BANK USE ONLY					

FIMBank p.l.c.
Mercury Tower , The Exchange Financial & Business Centre
Elia Zammit Street, St Julian's STJ 3155, Malta
Website: www.fimbank.com
Company Registration Number: C 17003

Tel: (+356) 2132 2100
SWIFT: FIMBMTM3
E-mail: info@fimbank.com

Customer Information

Date: _____

Dear Sirs,

RE: _____ (the "Customer")

By these presents, I the undersigned request and authorize FIMBANK plc ("the Bank") to open an account denominated in ☐ USD / ☐ EUR / ☐ GBP / ☐ CHF / ☐ _____ *[specify as required]* as may from time to time be requested in writing in the name of the Customer.

Residence Address: _____

Country: _____

Date and place of birth: _____

Passport Number / ID Number / Driving Licence: _____

Land/Fixed Telephone No *(include country code)*: _____

Mobile No *(include country code)*: _____

Mailing Address: _____

Nationality: _____

Date and place of issue: _____

Tax Residence (country): _____

☐ Tick this box if you are not resident in the US for tax purposes or a non US Citizen.
☐ Tick this box of you are resident in the US for tax purposes or if you are a US Citizen.

The Bank is hereby instructed and authorized to carry out all such banking transactions as the Customer may request the Bank to do in the Customer's name and this in accordance with the Bank's **General Terms and Conditions of Business** as may be amended by the Bank from time to time (enclosed herein [appendix 1]) and to which the Customer hereby expressly agrees, acknowledges receipt of, and recognizes as applicable to his business relationship with the Bank in virtue of this statement.

The Customer expressly agrees to the application of the laws of Malta to his relationship with the Bank and hereby agrees that all and any disputes between him and the Bank shall be subject to the exclusive jurisdiction of the Courts of Malta.

In pursuance of this request the Customer is herewith attaching a **certified and authenticated copy of his passport/ID card** which is currently in force. **The Customer hereby declares he does not have another passport/ID card.**

Service Request

☐ Deposits
☐ Forward Contracts
☐ _____

☐ International Fund Transfers
☐ Credit Cards
☐ _____

Instructions to the Bank

The Bank is hereby instructed and authorized to:

i) honour and comply with any instructions to withdraw/deposit any and all funds on any account or accounts in the Customer's name;
ii) accept **general assignments** for and on the Customer's behalf;
iii) generally to act in accordance with the Customer's requests in relation to his account or accounts as may from time to time be opened.

(10/2026)

Signature

The signature below operates as the Customer's specimen signature.

Signature: _____ Name in Full: _____

Provided that

A) Authorised Account Signatories*

Any such instruments, requests or instructions mentioned in (i) – (iii) above may be signed by the Authorised Account Signatory/ies as per below: * (please mark your choice with an X where appropriate)

Name of Authorised Account Signatory	Specimen Signature	
☐ Sole signatory ☐ Joint signatory	☐ Limitations:	☐ Special Instructions:

** Where signatories are different to the account holders, this needs to be supported by a notarized Power of Attorney. Bank form named Power of Attorney may be provided upon request.*

B) Correspondence Instructions

The Bank is authorised to act upon Customers' written requests or instructions received via email from the following addresses:

Main: _____

Cc1: _____

C) Bank Statements

The Bank is authorised to send advices and/or statements via e-mail on the above mentioned accepted e-mail address/es. [2]

Please Note that you can select up to two statement preferences

☐ On Movement	☐ Daily	☐ Monthly	☐ Quarterly	☐ Semi-Annual	
☐ Weekly:(*)	☐ Monday	☐ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday

☐ On Movement	☐ Daily	☐ Monthly	☐ Quarterly	☐ Semi-Annual	
☐ Weekly:(*)	☐ Monday	☐ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday

(*) Please indicate on which day you would like your weekly statement.

In case where the Bank is authorized to act upon Customer's requests or instructions received by e-mail, the Bank shall only act upon such requests or instructions, if the requests or instructions are sent or purported to have been sent from one of the e-mail addresses listed above as the "Accepted e-mail address/es".

[1] E-mail service is offered free of charge and substitutes generation of printed advices and/or statements.

D) Media

_____

E) Withholding Tax

i) For Maltese residents:
I hereby declare that I am a Maltese resident and I hereby instruct the Bank to pay any interest to me, at the discretion of the Bank:

☐ with a deduction of 15% full and final withholding tax or

☐ without any deduction of withholding taxes

ii) For Non-Residents:
I hereby declare that I am not ordinarily resident in Malta and therefore:

☐ I hereby instruct the Bank to pay any interest to me, at the discretion of the Bank, without any deduction of withholding taxes *

F) Source of Income / Wealth*

Employment Details
Current Role - _____
Salary - _____

Previous Employment
Details - _____

Other Income: _____
Derive from - _____

Intended Annual Target Savings in the account: _____
Initial deposit - _____

** Your source of income / wealth includes the flow of cash or cash equivalents received from salaries, capital (interest or profit), assets (rent or other, business proceeds or any other revenue.*

I / We declare that I / we are not identified or associated with any Politically Exposed Persons (PEP) *
If there is any PEP involvement please list them below.

_____

** A PEP is defined as a natural person who is or has been entrusted with a prominent public function and shall include their immediate family members or persons known to be close associates of such person.*

G) Terms and Conditions

☐ We confirm that we have been informed about the Terms and Conditions of the services and products offered by FIMBank plc. We have been made aware that these Terms and Conditions are available for viewing at any time on FIMBank's official website at www.fimbank.com and that we are aware of our right to request a physical copy or clarification of the terms at any time. We further confirm that we understand and agree to the Terms and Conditions as outlined.

_____ _____
Customer Signature Date

_____
Name in full