Maybank

CUSTOMER INFORMATION FILE
(INDIVIDUAL ACCOUNT)

CIF Number *(For Branch Use only)*

BASIC DATA

Customer's Full Name *(Last Name, First Name, Middle Name)*		**Gender**	
Date of Birth *(mm/dd/yyyy)*		**Place of Birth**	
Civil Status		**Nationality**	
Spouse's Full Name (if any) *(Last Name, First Name, Middle Name)*			
Profession/Occupation		**Employment Status**	☐ Contractual ☐ Probationary ☐ Owned (Self-employed) ☐ Permanent
Monthly Income		**Employment Type**	☐ Private ☐ NGO ☐ Government ☐ Self-employed ☐ OFW ☐ Unemployed
Industry/Nature of Business		**Employer/Business Name**	☐ N/A
Primary Purpose of Account Opening	☐ Savings ☐ Payroll ☐ Loans ☐ Investment or Insurance ☐ Time Deposit ☐ Remittance ☐ Allowance ☐ Automatic Debit Arrangement (ADA)		
Source of Income or Funds	☐ Savings ☐ Allotment ☐ Income from Business ☐ Employment ☐ Remittances ☐ Others: _____	**Country of Funds**	
Email Address			
Mobile Number *(1)*		**Mobile Number** *(2)*	
Home Phone Number		**Business or Office Number**	

ADDRESSES *(House/unit no., Bldg. name, Street, Barangay, City, Province)*

PH Residence Address	
Foreign Address	☐ N/A
Alternate PH Address	☐ Same as PH Address
Business or Office Address	☐ N/A ☐ Same as PH Address
Send Mail to	☐ PH Residence Address ☐ Email ☐ Alternate PH Address ☐ Business or Office

OTHER PERSONAL INFORMATION *(Use the back portion of the CIF form for the details, if needed)*

In-Trust-For (ITF) Account? If YES, provide details.	☐ Yes ☐ No	CIF#: _____ Account #: _____ Complete Name: _____
Do you have existing accounts/loans with Other Maybank Entities (local or overseas)?	☐ Yes ☐ No	If YES, please provide the following details: Maybank Entity, Branch, Type of Account, and Account Number.
Do you hold a public/government position in the Philippines, foreign state, or international organization?	☐ Yes ☐ No	If YES, please provide details (Position & Office).
Do you have family members who hold a public/government position in the Philippines, foreign state, or international organization?	☐ Yes ☐ No	If YES, please provide details (Complete Name, Position, & Office).
Are you a Close Associate of a person who hold a public/government position in the Philippines, foreign state, or international organization?	☐ Yes ☐ No	If YES, please provide details (Complete Name, Position, & Office).

ACCOUNT SERVICES

Bank Notification	☐ Yes ☐ No	Notification via call, SMS, or email includes, but, not limited to economic updates and other information on Maybank services and promotions.	
ATM/Debit Card	☐ Yes ☐ No	**Name to appear on the card** *(20 character limit)*	
		Account Number	

I declare that the above information provided by me is correct. I agree to abide by the Bank's terms and conditions governing accounts set forth in the Deposit Contract and the relevant rules and regulations governing the respective services linked to my account which have been furnished to me. I further unconditionally allow Maybank Philippines, Inc., to verify said information and/or secure other information as may be required by the Bank and to provide appropriate regulatory and administrative agencies and/or authorities and/or Malayan Banking Berhad, its affiliates or branches, any information pertinent to my account(s) and/or as may be stipulated under the applicable laws, regulations, guidelines, directives, or agreement. I allow Maybank Philippines, Inc. to provide to the appropriate regulatory agencies and/or authorities, and/or to Malayan Banking Berhad, its affiliates or branches, and/or any of Maybank Philippines, Inc.'s authorized agents any information pertinent to my account(s) and/or as may be stipulated under the applicable laws, regulations, guidelines, directives or agreement. For M2U Internet and mobile Banking Services, I further agree that by clicking the accept button on the online registration page, I am bound the Internet Mobile Banking Service Terms and Conditions which I fully read and understood, and acknowledged the obligations arising therefrom. Also, I understand that the M2U Internet Mobile Banking Terms and Conditions may be revised from time to time and that I can discontinue the use of service if I disagree with the M2U Internet Mobile Banking Service Terms and Conditions.

By acceding to the Bank's Terms and Conditions for account opening and accommodation for other financial products, I agree that Maybank may collect, hold, use, and share my Personal Information pursuant to the Data Privacy Act of 2012 (Republic Act 10173) for so long as I remain to be client and for as long my Records and Personal Information are required and/or allowed by law to be retained and processed, whether for my protection of for the protection and pursuit of legitimate interests and/or business purposes of Maybank.

_____

Printed Name and Signature of Customer / Date Accomplished *(mm/dd/yyyy)*

ACCOUNT OPENING

SPECIMEN SIGNATURE OF CUSTOMER

I/we agree that my signatures appearing in this Card are my/our official signatures in the operation of the account/s and the Bank shall recognize these signatures in the payment of funds or in the transactions of other business of my/our account/s.

Date:		**Account Type:**	**Signing Condition:**	**Product Type:**
Branch Code:		☐ Single	☐ Any One	☐ Peso CASA
CIF Number:		☐ Joint	☐ Any Two	☐ USD Savings
Account Number:		☐ ITF (In-trust-for)	☐ All	☐ Others:
			☐ Others: _____	

_____ **Printed Name**	_____ **Printed Name**	_____ **Printed Name**
1. _____	1. _____	1. _____
2. _____	2. _____	2. _____
3. _____	3. _____	3. _____

Referred/Solicited by	**Witnessed/Authenticated by**	**Posted by**	**Approved by**
_____	_____	_____	_____
Signature over printed name Name & Designation	**Signature over printed name Service Officer/Service Head**	**Signature over printed name Sales Associate**	**Signature over printed name Service Officer/Service Head**

INSIDERS CODE - FOR BANK'S USE ONLY

☐ Director ☐ Stockholder ☐ Officer ☐ Staff ☐ Bank Subsidiary ☐ Not an Insider
☐ Related to Director ☐ Related to Stockholder ☐ Related to Officer ☐ Related to Staff ☐ Other Related Interest

AVAILMENT OF SERVICES - FOR BANK'S USE ONLY

Signature Authenticated and Verified by	**Processsed by**	**Approved by**
_____	_____	_____
Name & Designation	**Sales Associate**	**Service Officer/Service Head**

DEBIT CARD			**ACKNOWLEDGEMENT RECEIPT**
Debit Card Number	**PIN Mailer Release by/Date**	**Debit Card Released and Activated By/Date**	**I hereby acknowledge receipt of the Debit card and PIN Mailer.**
_____	_____	_____	_____
	Name & Designation/Date	**Name & Designation/Date**	**Name & Signature of Customer**

CUSTOMER VALIDATION RECORDS - FOR BANK'S USE ONLY

	VALIDATION	**ACTION TAKEN**			**REMARKS**
1	**Identification Document Validation**	**ID Presented**	**ID Number**	**Validated With**	
	Important Note: *Indicate ACR type and number for* ***"Non-resident"****.*				
2	**Confirm Date of Birth**	**Verified Vs.** ☐ Birth Certificate ☐ Passport ☐ Driver's License ☐ Others _____			
3	**Verify Address**	**Verified Through:** ☐ Utility Bills - Name of Utility Company: _____ ☐ Bank Statement - Bank/Branch: _____ ☐ Credit Card Statement - Bank/Institution _____ ☐ Onsite Visitation - Date Visited: _____ ☐ Barangay Certification: _____ ☐ Proof of Delivery (POD): _____			
5	**Contact the Customer**	Contacted by ☐ Telephone/Mobile Number: _____ ☐ Email: _____ ☐ Thank you letter/SMS (Centralized at head office)			Date Contacted
6	**Other validation**				

Prepared and Validated by	**Verified by**
_____	_____
Name & Signature - Sales Associate	**Name & Signature - Service Officer/Service Head**