



BENEFICIAL OWNER INFORMATION FORM

Date

D	D		
M	M		
Y	Y	Y	Y

Account Number

1) Title of Account

In English (Block Letter) :

বাংলায় :

2) Name of the Beneficial Owner

In English (Block Letter) :

বাংলায় :

3) Date of Birth :

D	D		
M	M		
Y	Y	Y	Y

 4) Gender: Male Female Others :

1 copy of
recent coloured
passport size
photograph

5) Father's Name :

6) Mother's Name :

7) Spouse's Name :

8) Nationality : Resident Non-Resident

9) Occupation : 10) Monthly Income : 11) Sources of Income :

12) Tax ID Number (TIN), if available :

13) a) Present Address

House Name : Flat No. : Road No./Name :

Village/House/Holding No./Area : Block/Sector/Section : Police Station :

Post Office : Post Code : District : Country :

Phone/Mobile Number : e-mail ID :

b) Permanent Address (If different from Present Address)

House Name : Flat No. : Road No./Name :

Village/House/Holding No./Area : Block/Sector/Section : Police Station :

Post Office : Post Code : District : Country :

14) ID Document : NID Passport Birth Registration Certificate

ID Number :

Signature of Applicant.....

Date :

Initial of Assigned Officer

Initial of BOM/BRM