

# Personal Account Opening Form

Branch: \_\_\_\_\_

Date: \_\_\_\_\_

**Your Personal Details**

Title	Account Holder (1)	Account Holder (2)
	Mr/Mrs/Ms/Others: _____	Mr/Mrs/Ms/Others: _____
First Name*		
Middle Name*		
Family Name*		
Passport / ID Number		
Country of Issue		
Issue Date	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Expiry Date	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of Birth (dd/mm/yy)*	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Country of Birth*		
Do you have Multiple Nationalities If Yes (Please provide multiple Nationalities) If No (Please provide only Nationality 1)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Nationality 1 _____	Nationality 1 _____
	Nationality 2 _____	Nationality 2 _____
	Nationality 3 _____	Nationality 3 _____
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female

\* As per passport / ID

**Your Employment Details**

Company Name		
Address	P O Box: _____ P C: _____ Country: _____	P O Box: _____ P C: _____ Country: _____
Office Location	Office Number: _____ Way Number: _____ Building Name / Number: _____ Street / Landmark: _____ Area / City: _____	Office Number: _____ Way Number: _____ Building Name / Number: _____ Street / Landmark: _____ Area / City: _____
Job Title		
Department		
Employee ID		
Years with Employer		
Monthly Salary (OMR)		
Other Income (OMR)		
If any (source of other Income)		
Household Income (OMR)		

**Your Contact Details**

Residence type in Oman	Own <input type="checkbox"/> Company provided <input type="checkbox"/> Rented <input type="checkbox"/> Living with parents <input type="checkbox"/> Others <input type="checkbox"/>	Own <input type="checkbox"/> Company provided <input type="checkbox"/> Rented <input type="checkbox"/> Living with parents <input type="checkbox"/> Others <input type="checkbox"/>
Residence address in Oman	House / Flat Number: _____ Way Number: _____ Building Name / Number: _____ Street / Landmark: _____ Area / City: _____ P O Box: _____ P C: _____	House / Flat Number: _____ Way Number: _____ Building Name / Number: _____ Street / Landmark: _____ Area / City: _____ P O Box: _____ P C: _____
Residing at this address since date	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
If residing at the stated address for less than 3 years, please provide your previous residence address details		
Do you have multiple residential addresses	Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please provide multiple addresses		
1-		
2-		
3-		
Home Telephone Number		
Personal Email		
Mobile Number		
Work Telephone Number		
Work Fax Number		
Work Email		
Permanent Address (Home Country)		
Telephone Number (Home Country)		
Personal Email		
Preferred Correspondence Address	<input type="checkbox"/> Work <input type="checkbox"/> Email <input type="checkbox"/> Residence	<input type="checkbox"/> Work <input type="checkbox"/> Email <input type="checkbox"/> Residence

**1. Main purpose of the account with HSBC Oman:**

- Receipt of monthly salary/income
- Deposits/Savings
- Mortgage/Home Loan payment
- Receipt of Student Contribution
- Others, please specify \_\_\_\_\_

**2. If visa is under process or you have moved to Oman in the last 6 months, what was the reason for moving into Oman:**

- Employment
- Setting up a company
- Education
- Others, please specify \_\_\_\_\_

**3. a. Any account(s) with HSBC outside Oman?**

- Yes
- No

**b. If yes, what are all the other countries where you hold an account with HSBC?**

Name of Country(ies)

**4. Sources(s) of funds: Source of Funds (SoF) refers to the source of the amount to be transferred to the HSBC account initially and on an on-going basis:**

**a. Non-cash transfers:**

	Source of Funds	Amount Details (OMR)	Monthly volume of transactions	Name of Remitter / Employer/ Financial Institution	City / Country
<input type="checkbox"/>	Salary transfer from employer Bonus / Commission				
<input type="checkbox"/>	Transfer from my account(s) with another bank(s)				
<input type="checkbox"/>	Transfer from third party/parties (eg.: spouse/relatives) from another bank				
<input type="checkbox"/>	Cheque from my account with another bank				
<input type="checkbox"/>	Cheque from third party/parties from another bank				
<input type="checkbox"/>	Others, please specify: .....				

**b. Cash**

	Source of Funds	Amount Details (OMR)	Monthly volume of transactions	Source	Proof / Evidence
<input type="checkbox"/>	Cash Deposit				

**5. Considering all the sources of your account funding, what is the total estimated value of funds to be deposited into your account within the 12 months**

OMR .....

**6. What is the expected total relationship balance to be held in your account within the next 12 months?**

OMR .....

**7. Over the coming year, list details where you are currently sending or expecting to send funds to using your HSBC's Oman account, including domestic transfers in Oman:**

Country	Total Value of transactions (OMR/Foreign currency)	Method of transfer	Purpose	Frequency (Monthly/ Yearly)	Beneficiary (i.e. the person entitled to receive the transfer)	Relationship with Beneficiary	Name of the Financial Institution

**8. a. In the next 12 months, do you expect to do significant cash withdrawal(s) from your account?**

Please Select

**b. If yes, please mention the details below:**

	Amount Dtails (OMR)	Frequency (Monthly/ Yearly)	Perpose
<input type="checkbox"/>	Cash Withdrawals		

**9. If you are purchasing any banker's draft or cashier's order in the next 12 months, please mention the details below:**

Monetary instrument	Value (OMR/ Foreign currency)	Frequency (Monthly / Yearly)	Perpose	Beneficiary (i.e. the person to be paid)

**10. Countries where you are obliged to pay tax:**

Name of Country(ies)

**11. Connected Party**

Please list the connected / associated parties who have control or influence over your account:

(Please use continuation sheet if required)

- |  |   |
|--|---|
| <input type="checkbox"/> Supplementary cardholder  | <input type="checkbox"/> Transfer of Funds to a student |
| <input type="checkbox"/> Power of Attorney   | <input type="checkbox"/> Cash depositor                 |
| <input type="checkbox"/> Guardian / Parent   | <input type="checkbox"/> Financial/Investment Advisor   |
| <input type="checkbox"/> Contributor to source of wealth i.e. transfers of funds to account holder outside the normal course of business where the / contribution is 50% or above the source of wealth |   |

Full Name	
Former Name or alias, if any	
ID/Passport number	
Date of Birth	
Country of birth	
Residential Address	
Email Address	
Telephone Number	
Nationality/ Citizenship (including all nationalities held / citizenships)	
Relationship to you	

**Preferred type of Account**

Current:	<input type="checkbox"/> OMR	<input type="checkbox"/> USD	<input type="checkbox"/> EUR	<input type="checkbox"/> GBP	<input type="checkbox"/> AED
Savings:	<input type="checkbox"/> OMR	<input type="checkbox"/> USD	<input type="checkbox"/> EUR	<input type="checkbox"/> GBP	<input type="checkbox"/> AED
Mandoos:	<input type="checkbox"/> OMR				
Call Deposit:	<input type="checkbox"/> OMR	<input type="checkbox"/> USD	<input type="checkbox"/> EUR	<input type="checkbox"/> GBP	<input type="checkbox"/> AED
TMD:	<input type="checkbox"/> OMR	<input type="checkbox"/> USD		<input type="checkbox"/> GBP	<input type="checkbox"/> AED
e-wallet:	<input type="checkbox"/> OMR				

**Please provide me with the following**

HSBC Debit card links A/cs: \_\_\_\_\_  
 Name as it should appear on the card:                      
 (not to exceed 19 characters)

Additional / New Debit Card\* required  
 Name as it should appear on the card:                      
 (not to exceed 19 characters)

Cheque Book(s) (if applicable)    Quantity \_\_\_\_\_ (25 leaves each)

Personal Internet Banking/Phone Banking Service

**SMS and E-mail Alerts are mandatory; however, if you would like to opt out of any of any of these services, please sign below.**

E-mail Alerts  No                      Signature \_\_\_\_\_

SMS Alerts  No                      Signature \_\_\_\_\_

E-mail PDF Statement  Yes             No

**About You (Thank you for taking the time to give us further details about yourself. We shall use this to help us serve you better)**

You are  Single  Married  Others \_\_\_\_\_ and have \_\_\_\_\_ dependants.  
 Your spouse name is: \_\_\_\_\_ and you have \_\_\_\_\_ children.  
 Your children's names:  
 1 \_\_\_\_\_ Date of Birth (DD/MM/YY) \_\_\_\_\_  
 2 \_\_\_\_\_ Date of Birth (DD/MM/YY) \_\_\_\_\_  
 3 \_\_\_\_\_ Date of Birth (DD/MM/YY) \_\_\_\_\_

Your Education level:  Primary     High-School     Graduate     Post-Graduate     Professional

Your Hobbies / Interests \_\_\_\_\_ Car owner  Yes     No

**Please provide me with the following insurance products**

Family Shield     Travel Protection     Term Assurance     Others \_\_\_\_\_

**Please tell us how you decided to open an account with us**

Recommended by family / friends     Convenient location of the bank     Dissatisfaction with previous bank

Response to an advertisement     Family has always banked with HSBC     Employer's bank for salary payment

Others (please specify) \_\_\_\_\_

**Your Liabilities**

	Bank / Company Name	Monthly Installment / Limit (OMR)	Balance Outstanding (OMR)
Personal Loan			
Home Loan			
Car Loan			
Overdraft			
Credit Card			
Credit Card			
Others			

\* For Joint Account Holders



## Documents required:

### A) Customer

- 1) Original valid Passport
- 2) Valid Oman residency visa or Letter from Employer stating visa under process (For non GCC nationals only)
- 3) Valid Omani ID or another government issued ID showing name, date of birth and photo
- 4) Proof of residential address: Please provide any one of the documents listed in the table below, depending on your employment and / or circumstances:

All customers	<ul style="list-style-type: none"><li>• Utility Bill dated within the last four months</li><li>• Landline phone / Internet bills dated within the last four months</li><li>• Current valid tenancy contract</li><li>• Bank statements, or credit/debit card statements dated within the last four months (or annual bank statements) if they state the full residential address</li></ul>
Salaried Individuals	<ul style="list-style-type: none"><li>• Salary transfer letter or salary certificate or employer letter dated with the last four months confirming the employer PO Box and full physical address</li></ul>
Sole Trade or Business owner	<ul style="list-style-type: none"><li>• Valid trade license of their business entity owned by the individual with the PO box &amp; full physical address</li><li>• Utility bills dated within the last four months of the business entity owned by the individual</li><li>• Current valid tenancy contract of the business entity owned by the individual</li></ul>
Student	<ul style="list-style-type: none"><li>• Letter from the university confirming their enrolment status and university address</li></ul>
Other including not employed and retired	<ul style="list-style-type: none"><li>• Letter from sponsor (Husband/ Wife/ Father/ Mother/ Brother/ Sister/ Daughter/Son) confirming residential address AND the sponsor's proof of address as per other categories listed above</li><li>• Visitation by an HSBC employee to the identified residential address.</li></ul>

- 5) Proof of source of funds: Please provide any **one** of the options listed in the table below:

Salaried	<ul style="list-style-type: none"><li>• Salary transfer letter or salary certificate or employer letter dated with the last four months or</li><li>• Last 3 months bank statements showing salary payment deposits</li></ul>
Sole Trade or Business owner	<ul style="list-style-type: none"><li>• Valid trade license of their business entity owned by the individual and</li><li>• Copy of last 3 months bank account statements of the business</li></ul>
Pensioner / Retired	<ul style="list-style-type: none"><li>• Annual pension statement, pension pay slips dated within the last four months</li></ul>
In case of cash deposit	<ul style="list-style-type: none"><li>• Proof of source of cash</li></ul>
Student	<ul style="list-style-type: none"><li>• Letter from University with the course end date</li><li>• Where the contributions are made to a student account equal or more than USD 75,000, the contributor's details (connected party) such as full name, date of birth and residential address must be obtained</li></ul>
Non employed	<ul style="list-style-type: none"><li>• Proof of source of funds from the sponsor or contributor.</li></ul>

## Documents required:

### B) Connected Parties

- 1) Original valid Passport
- 2) Valid Oman residency visa or Letter from Employer stating visa under process (For non GCC nationals only)
- 3) Valid Omani ID or another government issued ID showing name, date of birth and photo
- 4) Proof of residential address : Please provide any **one** of the documents listed in the table below, depending on your employment and / or circumstances:

All customers	<ul style="list-style-type: none"><li>• Utility Bill dated within the last four months</li><li>• Landline phone / Internet bills dated within the last four months</li><li>• Current valid tenancy contract</li><li>• Bank statements, or credit/debit card statements dated within the last four months (or annual bank statements) if they state the full residential address</li></ul>
Salaried Individuals	<ul style="list-style-type: none"><li>• Salary transfer letter or salary certificate or employer letter dated with the last four months confirming the employer PO Box and full physical address</li></ul>

Sole Trade or Business owner	<ul style="list-style-type: none"> <li>Valid trade license of their business entity owned by the individual with the PO box &amp; full physical address</li> <li>Utility bills dated within the last four months of the business entity owned by the individual</li> <li>Current valid tenancy contract of the business entity owned by the individual</li> </ul>
Student	<ul style="list-style-type: none"> <li>Letter from the university confirming their enrolment status and university address</li> </ul>
Other including not employed and retired	<ul style="list-style-type: none"> <li>Letter from sponsor (Husband/ Wife/ Father/ Mother/ Brother/ Sister/ Daughter/ Son) confirming residential address AND the sponsor's proof of address as per other categories listed above</li> <li>Visitation by an HSBC employee to the identified residential address.</li> </ul>

**Your Declaration**

I/we agree that the information given above is true and complete and that I/we have received the Bank's General Terms & Conditions which may be amended from time to time for the Operation of Accounts and Electronic Banking Services, which I/we understand and expressly agree and accept to be bound by them whether set out in English and/or Arabic. I/we understand that the Bank's General Terms and Conditions for the Operation of Accounts and Electronic Banking Services shall apply to any personal account(s), that I/we may hold with the Bank from time to time.

If my/our account falls below the minimum required balance, I/we understand that a Service Charge will be levied.

**Joint Accounts only**

We acknowledge that the provisions for the joint account mandates are set out in the Bank's General Terms and Conditions. We note, that if we elect to use Personal Internet Banking Service, we will be required to accept the relevant Personal Internet Banking Service Terms and Conditions online. We agree that where we accept the Personal Internet Banking Services Terms & Conditions online, we will be agreeing to accept and be bound by them and any subsequent amendments, whether set out in English and/or Arabic.

**Credit Card Application**

I/We hereby apply for an HSBC Card(s) and declare, that the information included in this application is true and correct and authorise HSBC to verify this information from whatever sources that HSBC may choose. I/We accept that HSBC is entitled in its absolute discretion to accept or reject this application without assigning any reason whatsoever. I/We acknowledge that the use of my HSBC Card and any supplementary HSBC Card(s) issued on the Card account will be subject to the Terms and Conditions of the HSBC Cardholder Agreement (which may be amended from time to time at HSBC's sole discretion) accompanying the HSBC Card(s) and that I/we shall be liable unconditionally for the outstanding amounts of both Primary and Supplementary Card(s).

I/we hereby authorise HSBC to issue a Supplementary Card(s) for use on my account to the person(s) named who is/are over 18 years of age and agree that you can provide information to him/her about the account. I/we acknowledge that the accounts operated in conjunction with the Card service will be subject to normal Terms and Conditions which govern the ATM facility as stated in the HSBC Cardholder Agreement (which may be amended from time to time at HSBC's sole discretion)

**Signing Instructions:**

Jointly

Singly

Jointly A/c only)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Please ensure signature is within box provided in **Black ink** only.

Please ensure signature is within box provided in **Black ink** only.



**FOR BANK USE ONLY**

Account Number: \_\_\_\_\_

Date account opened: \_\_\_\_\_

Forms Completed: \_\_\_\_\_

CSR name / Staff identity: \_\_\_\_\_

CSR Initial

Signed in my presence: \_\_\_\_\_

Workstation ID: \_\_\_\_\_

B/L Checked: \_\_\_\_\_

Others: \_\_\_\_\_

Remarks:

KYC &  
SCC Checked

\_\_\_\_\_ (Sign)

SSC Yes  No

\_\_\_\_\_  
Bank Authorisation Signature

**For Joint Accounts:**

Customer Number 1:

Customer Number 2:

Bank Authorised Signature:    Bank Stamp:

Remarks: