

Account Opening Application Form for Business Entities

I / We hereby submit a request to open an account for our organization at Bank Muscat as per the details given below

Please specify the reasons for opening the account?

*Organization Details

Organization Name in English or Arabic (As per the official document maximum 35 characters)

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Commercial Registration (CR) Number		Date of Registration/ Establishment	
CR Issue Date		CR Expiry Date	
Authorized Capital		Projected Annual Turnover	
Issued Capital		Paid up Capital	
Total Number of Employees		Source of Funds	
Legal Entity Type	<input type="checkbox"/> Home Business	<input type="checkbox"/> One Person Company	<input type="checkbox"/> General Partnership
	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Public Joint Stock Company (SAOG)	<input type="checkbox"/> Closed Joint Stock Company (SAOC)
Company Nationality	<input type="checkbox"/> Local Company	<input type="checkbox"/> Foreign Company / Branch of an International Company	

Value Added Tax (VAT) Registration Number (12 Character example OM110000XXXX) Provide VAT Registration Certificate (if applicable)

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VAT Registration date:		VAT Expiry date:	
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*Location / Physical Address

Governorate		Province	
City / Village		Building Number	
Landmark			

Postal Address and Contact Information

Postal Box		Postal Code	
Postal City		Email Address**	
Landline Number		Mobile Number**	

**Note: The email address and mobile number provided will be the default. *For any communication, including the receipt of electronic bank statements. (Please write the email address in a clear hand writing as mentioned in the letter head) For products specific notifications, please fill up the specified forms. (Communication Form/Indemnity for Government & Corporate Customer)

*Select Type Of Industry

Please select the type of products / services that your organization offers from the specified list below

<input type="checkbox"/> Agriculture / Allied Services	<input type="checkbox"/> Construction Contractors	<input type="checkbox"/> Travel & Ticketing
<input type="checkbox"/> IT Services Companies	<input type="checkbox"/> Manufacturing Process	<input type="checkbox"/> Real Estate Agents
<input type="checkbox"/> Retail Trader	<input type="checkbox"/> Services	<input type="checkbox"/> Financial Institutions/Banks
<input type="checkbox"/> Wholesale Import Export	<input type="checkbox"/> Mining	<input type="checkbox"/> Money Exchange
<input type="checkbox"/> Government Companies	<input type="checkbox"/> Hypermarkets / Supermarkets	<input type="checkbox"/> Heavy Machinery & Equipment
<input type="checkbox"/> Oil / Gas Petroleum	<input type="checkbox"/> Commodity / Metal Trading	<input type="checkbox"/> Building Materials
<input type="checkbox"/> Offshore Companies	<input type="checkbox"/> Export / Import	<input type="checkbox"/> Other (Please Specify)
<input type="checkbox"/> Hospitals / Educational	<input type="checkbox"/> Hotels Restaurants Recreation	
<input type="checkbox"/> Investment / Brokerage House	<input type="checkbox"/> Professional Services	

*Account Details

Please select the account type suitable to your operations (An explanation given below for reference and more information available at the branch)

<input type="checkbox"/> Corporate Account (Small Medium Enterprise/ Large Corporate)	Account Currency (few currencies may have negative interest)
Whether you are a SME, a large corporate or any business registered in Oman, you can open a Bank Muscat corporate account, which is your gateway to a wide range of financial solutions that includes convenience digital services, customized business lending , global trade services and the convenience of a dedicated account relationship manager	<input type="checkbox"/> OMR <input type="checkbox"/> AED <input type="checkbox"/> EUR <input type="checkbox"/> GBP <input type="checkbox"/> USD
<input type="checkbox"/> Najahi Account	Account Currency
Especially designed current account along with branded cheque and debit card to provide 24/7 access to your account with a daily withdrawal limit of OMR 1000/- avail these benefits by maintaining an monthly average balance of RO 500/-	<input type="checkbox"/> (Available in OMR only)
Would you like to request a Debit Card for Najahi Account? If you selected (Yes), please complete the table below.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Details of authorized signatory whose name will appear on the card on behalf of the business entity (1 Card Maximum)	
Name on Debit Card:	
Position :	
Nationality:	
National/ Resident ID:	

Disclaimer: We have read and understood the Terms and Conditions governing Bank Muscat Najahi debit card usage, which forms an integral part of this documentation and hereby irrevocably agree to abide by them

Additional Requirements

Would you like to request a cheque book for this account?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of cheque leaves required (please select)	<input type="checkbox"/> 100	<input type="checkbox"/> 50 <input type="checkbox"/> 25 <input type="checkbox"/> 10
What is the preferred language of communication?	<input type="checkbox"/> English	<input type="checkbox"/> Arabic

***Owner(s) Shareholder(s) Details & Politically Exposed Person (PEP)**

Please fill in the details of the shareholders of the company. If any of the shareholders is a PEP, please tick the box.

N.	Name of Shareholder	Nationality	Resident ID / Passport No.	Date of Birth	% of Shareholding	PEP (Politically Exposed Person)
1						<input type="checkbox"/> Yes <input type="checkbox"/> No
2						<input type="checkbox"/> Yes <input type="checkbox"/> No
3						<input type="checkbox"/> Yes <input type="checkbox"/> No
4						<input type="checkbox"/> Yes <input type="checkbox"/> No
5						<input type="checkbox"/> Yes <input type="checkbox"/> No
6						<input type="checkbox"/> Yes <input type="checkbox"/> No
7						<input type="checkbox"/> Yes <input type="checkbox"/> No
8						<input type="checkbox"/> Yes <input type="checkbox"/> No
9						<input type="checkbox"/> Yes <input type="checkbox"/> No
10						<input type="checkbox"/> Yes <input type="checkbox"/> No
11						<input type="checkbox"/> Yes <input type="checkbox"/> No
12						<input type="checkbox"/> Yes <input type="checkbox"/> No
13						<input type="checkbox"/> Yes <input type="checkbox"/> No
14						<input type="checkbox"/> Yes <input type="checkbox"/> No
15						<input type="checkbox"/> Yes <input type="checkbox"/> No

Refer to notes in page 12 for documentation requirements

*** Politically Exposed Person (PEP) / Prominent Position**

PEP means currently or was formerly entrusted with a prominent public function in any country. This includes currently or formally serving, direct relative or "Family Members" includes parent, child, spouse, sibling, in law and in case of step parent- spouse, adopted child, step-child, adopted sibling, step- sibling and in laws. "Close Associates" means a colleague, personal advisor, business partner, or any individual that has a close business relationship with a PEP.

- Head of Government, President, Prime Minister, Minister and their deputies or any other equivalent position
- Advisors/Consultants of the Head of State, Prime Ministers, Minister and other equivalent position or bodies affiliated to Head of Government
- Head and assistant of religious groups
- Important political party officials (Head, Secretary General)
- Any appointment based on Royal Decree
- Member of the Royal Family
- Rank of Colonel and above (Army, Navy, Air force, Royal Oman Police, intelligence, investigation or law enforcement agency)
- Board members, President, Senior executive upwards (i.e. Vice President) of Central Banks
- Board members, Directors (CEO), Deputy Directors of Government owned company
- Ambassador, Counselor, First Secretary, Charges d' affairs or Embassy Attache'
- Member of parliament, Shura Council, Oman Council, State council; or any equivalent body
- Judges of all Court level
- Board members, Directors (CEO), Deputy Director of an international organization (such as United Nations (UN), World Health Organization (WHO), The United Nations Educational, Scientific and Cultural Organization (UNESCO) etc.

Political Exposed Person (PEP) Declaration

PEP Family Member and Close Associates should at least have answer for the following questions (for illustrative purpose only):

1	Are any of the company's shareholders a current or former politically exposed person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, a: <input type="checkbox"/> Omani PEP <input type="checkbox"/> Foreign PEP <input type="checkbox"/> International Organization PEP <input type="checkbox"/> NGO	
2	Are any of the company's shareholders a Family Member of a current or former PEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Are any of the company's shareholders a Close Associate of a current or former PEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, Please describe relation with the PEP:	

Politically Exposed Person (PEP) Details

If you have specified any of the shareholders as PEP based on the defined criteria then please provide name and position of the Close Associate / Family Members as per below:

No.	Name	Position	Period
1			
2			
3			
4			
5			

Authorized Signatories

Please list the individuals who are authorized to open and operate the account on behalf of the Organization, whose authorities shall be in accordance with the resolution provided by the Organization to the Bank

No.	Name	Nationality	ID/Residence Card/Passport number	Date of Birth	Specimen Signature	Singly/ Jointly
1						
2						
3						
4						
5						

Sample authorizations that may be included in resolutions:

- To purchase and/or sell bills of exchange whether inland, foreign, telegraphic, usance, at sight, to order, etc., and/or otherwise and to accept or refuse bills drawn on the Company.
- To accept, endorse and discount instruments, promissory notes, inland bills, foreign bills, and/or other commercial instruments.
- To open and amend letters of credit and accept or refuse discrepancies in respect thereof, to borrow money against security and/or without security, to hypothecate and mortgage property, whether movable or immovable.
- To open and operate current/deposit accounts in local and/or foreign currency, to issue cheques, to endorse cheques and to collect the amounts thereof.
- To draw cheques on the Company's account(s) even if such drawing or drawings create overdrafts in the said account(s), but \ without prejudice to the Bank's right to refuse to allow any overdraft.
- To sign letters, and issue receipts and indemnities.
- To issue guarantees and undertakings to request the Bank to issue guarantees and undertakings.
- To take delivery of documents, bonds, instruments, invoices and bills of lading in respect of goods consigned to the Company.
- To enter into contracts with the Bank for forward sale and/or purchase of currencies.
- To issue instructions for transfer of funds.
- To confirm the correctness of account balances.

The above authorizations are suggestive, the Organization shall have the discretion to add or remove any of the authorizations, where appropriate, in order to accommodate the Organization's requirements. Furthermore, the Organization is required to present a valid resolution to the Bank which must be submitted along with the Account Opening Application Form. Notwithstanding the foregoing, the authorizations stipulated in the Resolution shall take precedence over the authorizations selected in the Account Opening Application Form.

Appendix (A) *FATCA Entity Self Certification Form

For Foreign Account Tax Compliance Act (FATCA) purposes, all entities (i.e. corporates and financial institutions) must be classified into specific categories. Please indicate which category applies to your entity by ticking only one "Yes" of the following.

Note: This section is only applicable for corporates which are not one person company.

US Corporates & US Financial Institutions (Tick the appropriate box please)

1. Are you a US National / Citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you a US Resident who is not a US National / Citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Non-US Financial Institutions

3. Are you a Financial Institution in an Inter-Governmental Agreement (IGA) Country	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Are you a Participating Non-US Financial Institution?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Are you a Deemed Complaint Non-US Financial Institution?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
A. Registered Deemed Compliant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Certified Deemed Compliance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Are you a Non-Participating Non-US Financial Institution?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Exempt Entities

7. Are you an Exempt Beneficial Owner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If you have responded to any of the above questions (1 to 7) as YES, then please provide a W8BENE form on behalf of the corporate.

Other Entities

Please tick box if your entity does not fall under any of the above

Please provide in full the details requested in the table below of any US Controlling Persons, i.e. any individuals who are either a US citizen or a resident in the US for tax purposes, who hold more than 10% stake in the Non-Financial Non-US Entity by vote or value:

US Controlling Person's Name (1)													
Apartment / Suite Number					Building Name / Number								
Street Name					City								
State					Postal / Zip Code								
US Tax Identification Number (TIN) of the individual US Controlling Person													

US Controlling Person's Name (2)																				
Apartment / Suite Number				Building Name / Number																
Street Name				City																
State				Postal / Zip Code																
US Tax Identification Number (TIN) of the individual US Controlling Person																				

US Controlling Person's Name (3)																				
Apartment / Suite Number				Building Name / Number																
Street Name				City																
State				Postal / Zip Code																
US Tax Identification Number (TIN) of the individual US Controlling Person																				

If you have specified any US controlling person, then please provide a W8BENE form on behalf of the corporate.

Appendix (B) Common Reporting Standard (CRS)

Please complete this self-certification form carefully. All information requested on the form is mandatory and need to be completed in full. You may wish to consult your tax /legal advisor to complete this Form. Please fill part (1),(2), (3 only if applicable).

Part 1 – CRS Entity Type

(A) One person company

Are you a tax resident outside Oman? (If you answer Yes, skip to Part 2)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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(B) Other Entity Types/LLCs/SAOC/SAOGs/Govt. Entities/International Bodies/FI/Bank(s)

Select one of the entity type and sub-entity type from the list provided below:	
1)	<input type="checkbox"/> Financial Institution (A) Investment Entity (If you ticked this, select the Investment Entity type below) (I) An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution If you selected this, please provide Global Intermediary Identification Number (GIIN) if held and fill part 2 & 3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (II) Other Investment Entity If you selected this, please provide Global Intermediary Identification number (GIIN) if held: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (B) Depository Institution, an institution engaged in the safekeeping of securities (If you selected this, please provide Global Intermediary Identification number (GIIN) if held):
2)	<input type="checkbox"/> Active NFE (Non-Financial Entity) (A) Corporation (If you ticked this, select the type of corporation below) <input type="checkbox"/> Stock regularly traded on an established securities market. (Provide the name of the established securities market on which the corporation is regularly traded) <input type="checkbox"/> Related entity of such a regularly traded corporation. (Please provide the name of the regularly traded corporation that the Entity is a Related Entity of)

2)	(B) Government Entity or Central Bank (If you have selected this then skip to Part 2 - TIN Details)
	(C) International Organization (If you have selected this then skip to Part 2 - TIN Details)
	(D) Start-up NFE or a nonprofit NFE (If you have selected this then skip to Part 2 - TIN Details)
3)	<input type="checkbox"/> Passive NFE (Non-Financial Entity) (Note: A NFE will be deemed a Passive NFE if more than 50% of the NFE's gross income for the preceding calendar year or appropriate reporting period is passive income or the assets held by the NFE during the same period are assets) that produce or are held for the production of passive income. If held please fill Part 2 & 3

Part 2 - Taxpayer Identification Number or equivalent number* (TIN) Details

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's TIN for each country/jurisdiction indicated.

If the Account Holder is tax resident in more than three countries/jurisdictions, please use a separate sheet.

If a TIN is unavailable please provide the appropriate reason A, B or C where indicated below:

- Reason A - The country/jurisdiction where the controlling person is resident does not issue TINs to its residents.
- Reason B - The controlling person 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 domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).

Country/Jurisdiction of tax residence <small>(to be filled if country/jurisdiction of tax residence is other than Oman)</small>	TIN	If no TIN available, select reason A, B or C as explained above
1.		<input type="checkbox"/> Reason A, <input type="checkbox"/> Reason B , <input type="checkbox"/> Reason C
2.		<input type="checkbox"/> Reason A, <input type="checkbox"/> Reason B , <input type="checkbox"/> Reason C
3.		<input type="checkbox"/> Reason A, <input type="checkbox"/> Reason B , <input type="checkbox"/> Reason C

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

1.	
2.	
3.	

Part 3- Identification of Controlling Person (as in the Passport / Resident ID)

A) Name of Controlling person (as in the Passport/Resident ID)

Title		First Name	
Middle Name(s)		Family Name	
Date of Birth		Wilayah	
Country of Birth			

B) Current Residence Address

Building Number		Street	
City / Village		Province/County/State	
Country		ZIP Code	

C- Mailing Address:(Please complete if different from the Current Residence Address shown above)

P.O Box		Postal Code	
Post Office Location			

Please complete the following table indicating (i) where the Controlling person is tax resident and (ii) the Controlling person's TIN for each country/jurisdiction indicated. If the Controlling person is tax resident in more than three countries/jurisdictions please use a separate sheet If a TIN is unavailable please provide the appropriate reason A, B or C where indicated below:

- Reason A - The country/jurisdiction where the Controlling person is resident does not issue TINs to its residents.
- Reason B - The Controlling person 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 domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

Country/Jurisdiction of tax residence (to be filled if country/jurisdiction of tax residence is other than Oman)	TIN	If no TIN available, select reason A, B or C as explained above
1.		<input type="checkbox"/> Reason A, <input type="checkbox"/> Reason B , <input type="checkbox"/> Reason C
2.		<input type="checkbox"/> Reason A, <input type="checkbox"/> Reason B , <input type="checkbox"/> Reason C
3.		<input type="checkbox"/> Reason A, <input type="checkbox"/> Reason B , <input type="checkbox"/> Reason C

No.	Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B above
1.	
2.	
3.	

No.	Please enter the legal name of the relevant entity Controlling person(s) of which you are a controlling person.
1	Legal Name of Entity 1
2	Legal Name of Entity 2
3	Legal Name of Entity 3

No.	Please provide the controlling person's status by ticking the appropriate box	Entity 1	Entity 2	Entity 3
1	controlling person of a legal person – control by ownership.			
2	controlling person of a legal person – control by other means.			
3	controlling person of a legal person – senior managing official.			
4	controlling person of a trust – settlor.			
5	controlling person of a trust – trustee.			
6	controlling person of a trust – protector.			
7	controlling person of a trust – beneficiary.			
8	controlling person of a trust – other.			
9	controlling person of a legal arrangement (non-trust) – settlor-equivalent.			
10	controlling person of a legal arrangement (non-trust) – trustee-equivalent.			
11	controlling person of a legal arrangement (non-trust) – protector-equivalent.			
12	controlling person of a legal arrangement (non-trust) – beneficiary-equivalent.			
13	controlling person of a legal arrangement (non-trust) – other-equivalent.			

Appendix (C) *Customer Due Diligence (CDD)

Please provide answers to the following questions to enable a better understanding of the customer

1. Nature of Customers business – Customer needs to give detailed description of the underlying business / business activity.

2. Type of underling goods (food, medicines, construction / building materials, Apparels, Gift store etc.)

3. Whether customer's business will have any direct / indirect connections with high risk countries as per Bank Muscat Policy (Yes / No)

4. Whether the business will have underlying import / export? (Yes / No)

5. Name of exporting countries (in case the company importing from)

6. Name of importing countries (in case the company exporting to)

7. If business is local then name of local entities

8. Provide copy of contracts with local entities

9. Name of suppliers

10. Provide copy of suppliers' contract agreements, if requested by the Bank.

11. Name of Buyers

12. Provide copy of buyers contract agreements, if requested by the Bank.

Appendix (C) *Customer Due Diligence (CDD)

13. Whether there will be foreign currency payments from the account? (AED, USD, EUR, INR etc. – Please specify)

14. Whether any intermediaries will be involved?

15. IF reply to 14 is yes, then provide name of intermediaries with copy of CR giving shareholding details.

16. Full address in Oman, Provide copy of rental agreement of the shop / establishment / manufacturing unit.

17. Number of employees.

18. Source of Funds (Name of the Bank from where capital is going to come in.)*

- * a. No third party funds will be accepted;
- b. Funds should come from reputed banks;
- c. Funds from Money Exchange companies will not be accepted.

19. Total value of approximate monthly credits in the account

20. Total value of approximate monthly debits in the account

21. Total value of monthly salaries from the account

22. Name of supplier's banks (in case a payment sent to supplier)

23. Name of buyer's banks

24. Whether company has any associated / related companies in high risk countries as per Bank Muscat Policy

25. Whether company shareholders / signatories are having any shareholdings in high risk countries as per Bank Muscat Policy

26. Please provide name of company web site in high risk countries as per Bank Muscat Policy

27. Whether company shareholders has any related companies in the UAE

28. If reply to point no.27 is yes then please provide:

- Name of Company in UAE
- Commercial Registration Number:
- Name of shareholders:
- Name of website
- Name of bank account in UAE
- Whether account in UAE is active or closed
- Date of closure of the UAE account

Jurisdiction Name:

Name of Company in jurisdiction provided above:

Commercial Registration Number:

Name of Shareholders:

Name of Website:

Name of Bank Account:

Whether Account is active or closed.

If closed, Date of Closure of the Account:

We confirm that the above information / details provided is true and correct. We shall indemnify Bank Muscat against any loss, damage or claim, whether judicial or otherwise, incurred due to any false / incorrect / misrepresented facts / details provided as above.

Appendix (D) Declaration & Signature

- I/We hereby certify the information I/We have provided in this form is true, correct and complete, I/We confirm that under no circumstances shall the Bank, its employees or its contractors be liable for any direct, indirect, incidental, special, punitive or consequential damages that may result in any way from their reliance on the information I/We have provided.
- I/We shall indemnify Bank Muscat against any loss, damage or claim whether judicial or otherwise, incurred due to any false / incorrect / misrepresented facts / details provided as part of the form the Company or change in ownership or name of signatories.
- I/We have provided this FATCA Self Certification willingly without advice or help from the Bank. I/We understand that providing false information, withholding relevant information or responding in a misleading way, may result in rejection of my/our application or other appropriate action taken against me/us.
- I/We confirm that the information of beneficial owners given is true and complete. I/We have read and obtained a copy of Terms and Conditions, which is also available in https://www.bankmuscat.com/en/about/Documents/bmforms/Corp_TC_EN.pdf, governing this application including delivery channels, and consent to receive marketing promotion and surveys from Bank Muscat or affiliates/ partners, and agree to be bound by the same and any amendment thereto as may be made by the Bank from time to time. If the account remains without operation over a reasonable period of time, the bank has the right to close the account without notice from me/us. I/ We hereby confirm that the shareholders is the ultimate beneficial owner of the accounts.
- I/We understand that the information supplied by me is covered by the full provisions of the Terms and Conditions governing the account holder's relationship with Bank Muscat setting out how Bank Muscat may use and share the information supplied by me.
- I/We acknowledge that the information contained in this form and information regarding the account holder and any reportable account(s) may be reported to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.
- I undertake to advise Bank Muscat within 30 days of any change in circumstances which affects the tax residency status of the account holder identified in Part 1 of this form or causes the information contained herein to become incorrect or incomplete (including any changes to the information on controlling persons identified in Part 2 question 2a), and to provide Bank Muscat with a suitably updated self-certification and Declaration within 90 days of such change in circumstances.
- I/We consent to sharing my contact details with the Bank's third party affiliates for the purposes specified in the Terms and Conditions governing Conducts of Accounts and the Data Privacy Waiver Clause therein.
- I/ We confirm to have read and duly understood the Key Facts related to the product/service provided in the following QR code:



Important:

- The proprietor must sign the application for opening of account in case of proprietorship form. In the case of limited liability company, all the shareholders must sign the application for opening of account.
- The form shall not be accepted unless duly completed and accompanied by copies of the following documents as appropriate together with original documents for verification and return to the Company. The attached "Conditions Governing Conduct of Accounts" shall form integral part of this account opening documentation and we hereby irrevocably agree to abide by them.
- We undertake that the undersigned have the necessary power and the authority to sign on behalf of the Company this application form (and any other terms and conditions, whether in an account opening form or otherwise) and that all other formalities have been observed for the valid execution of such documentation.
- We certify that the information contained herein is true and accurate and undertake to notify you immediately in writing of any future changes including change in legal status of the Company or change in ownership or name of signatories.

Name	Signature
Date	Legal Capacity/Status
Name	Signature
Date	Legal Capacity / Status

Checklist for Resident Companies

Kindly confirm the documents that are attached with this application from the list below:

- Request letter printed on the company's letterhead signed by the company's authorized signatories and stamped
- Recent commercial registration certificate (CR) (Dated a maximum of one week before the submission of the Account Opening Form)
- Oman Chamber of Commerce and Industry Membership Certificate
- Copies of ID/Passports for shareholders, directors, authorized signatories (ID for Omanis/passport & resident card for non-Omanis)
- Memorandum and Articles of Association for Joint Stock Companies (SAOG and SAOC companies)
- Constitutive contract for Limited Liability Companies and One Person Company
- LLC - Written shareholders' resolution / full meeting minutes
- SAOG - Circular (written) board resolution, extract of meeting minutes, full meeting minutes
- SAOC - Circular (written) board resolution, extract of meeting minutes, full meeting minutes
- One person company - resolution signed by the sole shareholder + request letter signed by the authorized signatory
- A Proof of company's physical address (By presenting one of the following documents: Rental agreement, Municipality authority certificate, copy of utility bills or copy of deed/ Mulkiya)

Checklist for Non Resident Companies

All external documents received by any Non-Resident Companies must be duly apostilled or attested

- Corporate documents such as certificate of incorporation.
- Memorandum and Articles of Association
- Shareholders Resolution / Board Resolution / Minutes of the Board Meeting, as per the Articles of Association.
- Request letter printed on the company's letterhead signed by the company's authorized signatories and stamped.
- Valid passport copy of all of the shareholders.
- Embassy's original seen stamp maintained.
- A Proof of company's physical address (By presenting any official document that shows the company name and address).

Notes

The Bank may request additional resolutions and/or corporate documents (commercial registration certificate/commercial license/articles/memorandum of association) from the Organization and/or its shareholders, as required by the Bank.

- If shareholder is a company, then commercial registration, board/shareholders resolution and name of shareholder of that company must be provided.
- If shareholder is a listed company, then name of the stock exchange where the company is listed must be provided. Passport can be provided only if shareholder is non-resident.
- If shareholder is United States citizen /Tax Resident / Green Card Holder, holding 10% or more shares then W8BENE form is to be provided for such shareholder.
- If shareholder is United States citizen /Tax Resident / Green Card Holder, holding 100% shares then W9 form is to be provided for such shareholder.

For Official use (Recommended by / Approved by)

Branch Number		Branch Name																	
Currency		Recommended by																	
Name of Group (if applicable)		Account Officer																	
Industry code		Postal City																	
Approved by																			
Officer		Date																	
Entity Full Registered Name																			
Account Number																			