Foreign Tax Liability Self Certification Declaration - Individual

Instructions

- This form is only to be completed by individuals. If the account holder is not an individual please complete the Foreign Tax Liability Self Certification Declaration - Entities form.
- One self certification declaration per individual customer
- For frequently asked questions regarding Foreign Tax certification, please visit the Foreign Tax Liability website or contact Suncorp Bank on 13 11 75
- Return completed forms to:
 - Mail: Suncorp Bank (Norfina Limited), IPC 4BK230 Reply Paid 2432, Brisbane QLD 4001 (note: no postage stamp is required);
 - Your local Suncorp Bank Branch. Branch staff: Please forward completed form to IPC 4BK230; or
 - Scan and email: fatca@suncorpbank.com.au

— Scan and email: latca@suncorpbank.com		_	
Full Name of Individual		Date of Birth	
			DD/MM/YYYY
Residential address			
		State	Postcode
		- Ctate	
Are you a US citizen or US resident for tax purpos	ses?		
NoYesIf Yes, please provide your US Taxp	payer Identification Number (TIN) below		
Tres, piease provide your oo raxp	sayer identification realists (Tity) below		
And the second and of any other according for the second			
Are you a resident of any other country for tax pur		1	
Country/Jurisdiction of Tax Residence	Taxpayer Identification Number (TIN) or Equivalent	If no TIN availab	ole enter Reason A, B or C
If a TIN is not available, please provide the approp	oriate reason A , B or C where indicated above:		
Reason A - The country/jurisdiction where the Ad	ccount Holder is resident for tax purposes does no	t issue TINs to its	residents.
Reason B - The Account Holder is otherwise unal	·	-1:	
Reason C - No TIN is required. (<i>Note: Only select</i> I declare:	this reason if the domestic law of the relevant juris	aiction does not red	quire the TIN to be disclosed.)
 that the information provided in this form is co 	rrect and reflects my tax status for FATCA and/or	the Common Rep	orting Standard
 that I will update Suncorp Bank promptly if my the future. 			
I acknowledge that the information contained in t			
provided to the tax authorities of the country/juris		-	
country/jurisdiction or countries/jurisdictions in vexchange financial account information.	which the Account Holder may be tax resident pur	suant to intergove	rnmental agreements to
Signature			
Date DD/MM/YY	/ Y		
Suncorp Bank will only collect and share your pe	rsonal information in accordance with our Privacy	Policy. Our Privacy	Policy can be accessed via our
website or contacting us on 13 11 75.			
Internal Use Only			
Please forward completed forms to IPC 4BK230			
Branch Name			Date Received
			D D / M M / Y Y Y Y
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