

# Gibraltar Savings Bank Client Information Form

GSB Use Only Client No:

GSB Use Only IDS No:

Supporting Documents

One original document to confirm your Identity: Valid Passport or valid ID. One original document to confirm your address: Current utility bill, valid ID, valid GHA Health card or rent/purchase agreement.

1. Personal Details Title																					
Forenames																					
Surname																					
Gender	Fen	nale			Male		) C	Other		Da	ate o	f Birt	th	D	D	Μ	Μ	Y	Y	Y	Y
Nationality																					
Passport / ID No.																					
Date of Issue	D	D	Μ	Μ	Y Y	Y	Y			Date	e of I	Expir	y	D	D	Μ	Μ	Y	Y	Y	Y
Place of Birth																					
Country of Birth																					
1.1 Residential Address * If your residential address is different to the address stated on your Identity Card you need to provide a recent (less than * If your residential Address Country											Po	ostco	de								
3months) utility bill. Previous Address																					
Tievious Address															[						
Country											Po	ostco	de								
1.2 Contact Details																					
Telephone Mobile	+																				
Email	+																				
2. Employment Details (I	f appli	icable	e)																		
Full Time			Par	t Tir	ne		Р	ensio	ner			Not	Emp	oloy	ed			Stu	den	t	
Occupation																					
Employer																					
Employer Address																					
Country											Po	ostco	de								
Nature of Business																					
2.1 Estimated Income Salary per annum									Pen	sion	per a	annu	m								
Other source of income																					

### 3. Resident outside Gibraltar?

Yes No												
If yes please complete S	elf-Certi	ification	form	•								
3.1 Tax Details (If ticked Yes abo	ive)											
Tax Country												
Tax ID No.												

#### 4. Additional Information If you hold an Ordinary Deposit Account.

* Please list any active Ordinary Account Name	
Deposit Account held.(previously Account No. known as post	GSB Use Only Partnership No. AML
office Savings Bank account.) Account Name	
Account No.	GSB Use Only Partnership No. AML
Account Name	
Account No.	GSB Use Only Partnership No. AML
Account Name	
Account No.	GSB Use Only Partnership No. AML

### 5. Declaration

I declare the details within this form are correct and understand that it is my responsibility and obligation to promptly notify the Gibraltar Savings Bank should there be any changes to the details supplied. I have read and understand the GSB Act and Regulations (these are available online at www.gibraltarlaws.gov.gi).

Signature	Date
(Debentures only - In the case of individuals aged under 18, this form mus	t be signed by the parent or legal guardian)

## 6. Data Protection – How we use your Information

We treat all the information you give us about you and others as private and confidential. We respect your right to privacy and understand the importance of protecting the personal information that we hold. See our privacy notice for full details – available at www.gibraltar.gov.gi under Treasury Department, Gibraltar Savings Bank or by calling us.

Documentation Requirements Declaration Form Completed Input by Date	For Office Use Only				
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