

ESTABLISHMENT OF CUSTOMER RELATIONSHIP – PRIVATE CUSTOMER

The Anti-Money Laundering Act – which all banks must follow - requires that the bank has knowledge of its customer's business volume as well as proof of identification of everyone in its clientele. On our website you can read about how the personal data which we collect from you will be used.

You are hereby asked to fill in the attached document and hand it to the bank dated and signed.

In accordance with the current regulations we need to update the following information about you. Therefore, you can expect us to procure them from you if and when necessity arises.

I am a new customer in Norðoya Sparikassi and I have filled in all fields.

I am an existing customer in Norðoya Sparikassi and I have only filled in the data which the bank lacks.

I wish to set up a child savings account and I have filled in all fields.

I have power of attorney or am a business owner and I have filled in the following fields: 1-3, 5-6 and 8-10.

1. Customer information

Name	P-tal*
Street name and house number	Postcode and town/village
Country	Email
Private telephone number	Work telephone number
Education	Occupation or work status

*Delivered by Faroese tax authorities.

Do you have a residence in any country besides the Faroe Islands?

2. Identification (At least one identification must contain a picture (passport, driver's license) and at least one must contain address and social security number)

Yes

No

Valid identification with picture:

Passport Driver's license	National ID-card	Residence permit
Other valid certificate:		
Birth- name- or baptism certificate	P-tal certificate	Proof of residence (not older than 6 months)
Health card		
TIN-no. (Tax Indentification Number)	Other authorised certifica	ate:
If this concerns a child, the identity of the child a	5	ent/guardian must be verified.

If the child does not have a passport, the identity of the child can be verified through the social security number documentation alongside the child's birth-, name- or baptism certificate.

If this concerns a person, who does not have indentification with a picture, the identity must be verified with birth-, name- or baptism certificate, P-tal certificate and proof of residence.

3. Purpose of customer relationship) (you may mark more than on	ne field)	
Every day financial affairs (loan, pension, grant, etc.)	Loan/credit	Savings	Shares
Guarantor	Third person's relationship	Digital banking proxy	Business owner
Other purpose – please explain:			

4. Scope of activity

Scope of activity connotes what enters and exits your accounts on an annual basis.

In the field below, information regarding expected annual deposits and payments should be entered as follows:

- Bank transfers
- Cash
- International bank transfers

4.1 Expected annual transfers to account

Please fill in the fields relevant to your financial situation.

Transfers to account	Total amount
Salary – after taxes	
Public funding	
Grants	
Savings	
Inheritance and gifts	
Rental income	
Investment profit	
Transfers via payment card	
Other*	
*Please specify:	

4.2 Expected annual cash-income

Below are some examples of cash-deposit purposes. Fill in the fields relevant to your financial situation.

Expected annual cash deposits (quantity)	
Largest single instalment in cash (single amount)	

Please describe these cash-deposits below:

Cash deposit	Total amount
Gifts	

Selling of private products	
Savings	
Other*	
*Please specify:	

4.3 Expected annual cash withdrawals

Below are some examples of cash withdrawals. Fill in the fields relevant to your financial situation.

Expected annual cash withdrawals (quantity)	
Largest single cash withdrawal (single amount)	

Please elaborate on these cash withdrawals below:

Cash withdrawals	Total amount
Gifts	
Purchase of private products	
Everyday expenditure	
Other*	
*Please specify:	
Will you receive transfers on a regular basis, which will be withdrawn in ca	sh? Yes No

If yes, please specify: _

4.4 Expected annual international transfers through digital banking or payment card

Will there be bank transfers to/from foreign countries through your accounts?

If yes, please specify below which international transfers will be made through your accounts and why.

Expected transfers **TO** foreign countries

To country	Number of transfers	Amount	Purpose*

No

Yes

*Transfer to family, gift, travel, purchase of private products, entertainment, investment, holiday address etc.

Expected transfers **FROM** foreign countries

From country	Number of transfers	Amount	Purpose*

*Salary from foreign employer, transfer from family, gift, travel, selling of private products, investment, holiday address etc.

5. Politically exposed person

A politically exposed person is defined here as a person who holds or has held a prominent public office, e.g., governmental position, parliamentary position, vice parliamentary position, member of government, leader of a political party, ambassador or manager of a public firm etc.

Are you a politically exposed person?
If yes, how?
5.1 Close relations and close colleagues of politically exposed persons
Those who in this context are considered close relations of a politically exposed person are:
 spouse/person who is registered as a partner or cohabitee children and the childrens' spouse/person who is registered as a partner or cohabitee parents and the parents' spouse/person who is registered as a partner or cohabitee
Those who in this context can be considered close colleagues are, briefly put, persons who co-run a business with a politically exposed person or in some other way are in close collaboration with a politically exposed person.
Are you a close relation of or a close colleague of a politically exposed person? Yes No
If yes, who is the politically exposed person and what is your relationship with him/her?

6. Nationality

Primary	Country of birth and town/village of birth
Secondary	

7. Tax liability

No

	Have you in the past 2	vears been liable to p	av tax in anv countr	y besides the Faroe Islands?
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Yes N	0
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If yes, please specify country, TIN-number* and from/to:

Country	TIN-no.	From and to
Country	TIN-no.	From and to

* A TIN-number is: Taxpayer Identification Number. In Denmark, for example, it is the CPR-number. The TIN-number must be documented, e.g., with an international passport. If you are liable to pay tax in a foreign country, the bank must notify the Faroese tax authorities of this, who in turn will notify the tax authorities of the country or countries in which you are liable to pay tax.

Are you liable to pay tax in the USA/Canada?

Yes I declare that I am an American/Canadian citizen and/or am liable to pay tax in the USA/Canada and that I have specified the USA/Canada in the above field as one of the countries in which I am liable to pay tax.

I declare that I am neither an American/Canadian citizen nor am I liable to pay tax in the USA/Canada.

The bank points out that customers who reside in or are citizens of the USA or Canada can not set up shares deposits / accounts or trade in shares or declarations of value in Norðoya Sparikassi. This is also the case for customers with dual citizenships, of which one of the countries is the USA and/or Canada.

8. Are you acting on your own behalf?

Are you acting on your own behalf?

No

Yes

If no, please specify on whose behalf you are acting:

Name/company	Social security number/V-no.
Street name and house number	Postcode and town/village
Country	Telephone/mobile phone
Please specify the reason why you are acting on behalf of a third party	

9. Consent

If you would like to receive information and advice, you must consent to letting us contact you.

In order to get the most out of your experience as a customer at Norðoya Sparikassi, we would like to inform you of services that are relevant to you, e.g.:

- Information about services offered by Norðoya Sparikassi
- Information about services offered by colleagues of Norðoya Sparikassi
- Invitation to customer events
- Information about competions etc.

I hereby consent to Norðoya Sparikassi contacting me through digital banking, email or telephone about new and/or relevant services.



You may withdraw your consent at any time. You can do this by contacting us at ns@ns.fo or by calling us at 475000.

10. Customer signature

I hereby confirm that the information I have submitted to Norðoya Sparikassi is accurate and exhaustive.

I also confirm that I have read and accepted >>Norðoya Sparikassi's general customer terms and conditions<<, which can be accessed on the website www.ns.fo.

City/town:	

Date: ____

Customer signature: ____