



**PROFESSIONAL DATA**  Employee Employer

Profession **Contractual Relationship**  Permanent  Temporary Year of admission            Retired

**Position**  Administrator /General Manager  Senior Officer  Middle Officer /Technical Staff  Sales  Administrative  Others

Self-employed Field of Activity

Businessman/Sole traders Field of Activity

**INCOME INFORMATION** Monthly Net Income

Nature and purpose of account opening

Credit (personal loan / housing credit / credit card)  Savings and Investments  Salary Payment  Travel

Other

**ADDITIONAL INFORMATION** Type of funds  Cash  Cheque  TT/Inward Remittance

Apart from income earned from your occupation; please tell us any other source of income earned by you  Investments  Director's fees  Dividends

Extra Income Activity Branch

**PROPOSED CHECK BOX**

Prepaid Card  Not personalized debit card  Personalized debit card

Credit Card  Internet Banking  Mobile Banking  USSD

**Name of the cardholder to engrave on the card**   
*(Maximum 19 characters, including spaces)*

**Card Type**  Classic  Gold  Platinum  W  Others

**FOR INTERNAL USE ONLY** Card delivery branch

I authorize Access Bank Mozambique SA, to debit my current account, regarding the annuity and commissions of card users that I subscribe.

**FATCA Questionnaire** USA citizen?  Yes  No Tax residence in the USA?  Yes  No

If YES, please fill in U.S. TIN

Address

**SELF - CERTIFICATION AND AUTHORIZATION**

I authorize this from to be provided to any withholding agent that has control, receipt, or custody of the income of which the customer in is the beneficial owner or any withholding agent that can disburse or make payments of the income of which the entity in is the enefcial owner.

I agree that I will submit new form within 30 days if any certification on this form becomes incorrect.

CUSTOMER 'S SIGNATURE		FOR INTERNAL USE ONLY	
		Confirmed	Authorized
Date <input type="text"/>		Date <input type="text"/>	Date <input type="text"/>