



APPLICATION FORM (INDIVIDUAL)

Date _____

Type of Customer : ☐ New ☐ Existing

Type of Account : ☐ Savings ☐ Current ☐ Fixed Deposit

Purpose of Account : ☐ Savings ☐ Salary ☐ Investment ☐ Loan Repayment ☐ Credit Card
☐ Transactional ☐ Others (please specify) _____

Additional Facility : ☐ ATM ☐ Cheque book (only for Current Account)

Do you have any other account with Maybank? If yes, please indicate the type of account and branch / location account was opened.

CUSTOMER PARTICULAR

Name	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Other _____	
Identification No.	Place of Birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth:	Nationality	
Email Address	Contact No. Home: Office: Mobile:	Race <input type="checkbox"/> Malay <input type="checkbox"/> Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Other _____
Residential Address	Mailing Address (if different from the residential address)	
Postal Code Country	Postal Code Country	

SOURCE OF FUND

Source / origin of incoming fund. You may tick (✓) more than 1 box.

☐ Personal Savings ☐ Salary ☐ Dividend ☐ Rental ☐ Investment ☐ Inheritance/Gift
☐ Business ☐ Commission ☐ Others (please specify) _____

Country of funds 'Origin': ☐ Brunei ☐ Others (please specify) _____

Estimated Net Worth:

☐ Below B\$50,000 ☐ B\$50,001-B\$100,000 ☐ B\$100,001-B\$250,000 ☐ B\$250,001-B\$500,000 ☐ B\$500,001-B\$1million
☐ Above B\$1 million

EMPLOYMENT DETAILS

Type of Employment

☐ Salaried ☐ Self-employed ☐ Retired ☐ Student ☐ Housewife ☐ Unemployed

Employment / Company details (pls advice details of the person who provide the funds for this account)

Name of Employer/Company :	Nature of Business (for self-employed) : <input type="checkbox"/> Import/Export <input type="checkbox"/> Manufacturing <input type="checkbox"/> Agriculture <input type="checkbox"/> Retailer <input type="checkbox"/> Commission <input type="checkbox"/> Construction <input type="checkbox"/> Others _____
Designation/Position :	
Work Address :	Profession : <input type="checkbox"/> Clerical <input type="checkbox"/> Technician <input type="checkbox"/> Professional <input type="checkbox"/> Labour <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Retiree <input type="checkbox"/> Uniform <input type="checkbox"/> Commission Earner <input type="checkbox"/> Other _____
Employment Status <input type="checkbox"/> Own <input type="checkbox"/> Contractual <input type="checkbox"/> Permanent <input type="checkbox"/> Probationary <input type="checkbox"/> Others _____	Monthly Income : <input type="checkbox"/> Below B\$1000 <input type="checkbox"/> B\$1001-B\$2500 <input type="checkbox"/> B\$2501-B\$5000 <input type="checkbox"/> B\$5001-B\$10,000 <input type="checkbox"/> B\$10,001 above

ANTICIPATED TRANSACTION VOLUME PER MONTHDeposit (including inward remittances)

- (i) No. of transactions per month : ☐ less than 20 ☐ 21 - 50 ☐ more than 50
- (ii) Amount per month : ☐ less than B\$1,000 ☐ B\$1,001 - B\$10,000 ☐ more than B\$10,000

Withdrawals (including outward remittances)

- (i) No. of transactions per month : ☐ less than 20 ☐ 21 - 50 ☐ more than 50
- (ii) Amount per month : ☐ less than B\$1,000 ☐ B\$1,001 - B\$10,000 ☐ more than B\$10,000

Please specify other types of transactions / services anticipated to be used by customer:-

CONDITION OF SIGNATURE☐ Any one ☐ All ☐ As per resolution ☐ Others : _____**DECLARATION**

I/We hereby :

- declare that all information provided herein is true, correct and complete.
- agree to be bound by the Terms and Conditions Governing Banking Accounts (T & C) and any amendment thereto governing the account(s) opened with the Bank and I hereby agree and acknowledge that there been referred to a copy of and have read and understood the T & C and should I require a copy of the said T & C for my records and reference, I would be able to obtain a copy from the Bank's website address : <http://www.maybank.com/en/worldwide/all-countries/brunei.page?>

Signature of main Applicant - (1)

Name:

I/C No.

Date :

Signature of Joint Applicant - (2)

Name:

I/C No.

Date :

Signature of Joint Applicant - (3)

Name:

I/C No.

Date :

Signature of Joint Applicant - (4)

Name:

I/C No.

Date :

FOR ATM CARD

Maybank ATM Card(s) is/are issued to the above/mentioned customer(s)

CARD NO. 1

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CARD NO. 2

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ACKNOWLEDGEMENT

I/We hereby acknowledge receipt of the Maybank ATM Card and have selected the PIN for the card(s).

1. Signature of holder CARD NO. 1

2. Signature of holder CARD NO. 2