

## Legal Entities KYC -Know Your Customer

### Entity Identification

Entity Name ( As on the Certificate of Register): .....

### Entity Type

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Partnership Entity | <input type="checkbox"/> Public /Limited Liability Entity |
| <input type="checkbox"/> Stock Partnership   | <input type="checkbox"/> Free Zone Entity   | <input type="checkbox"/> Ministry/Public/Government       |
| <input type="checkbox"/> Diplomatic Mission  | <input type="checkbox"/> Charity            | <input type="checkbox"/> Sports Club                      |

Establishment Date: .....

Place: .....

Nationality: .....

Entity Identification No.  
(Reg. No./Foreign): .....

Residency Type: ☐ Resident ☐ Non Resident

### Entity Address

City: ..... Street : ..... Building : ..... Apartment: .....

Land Line: ..... Hot Line: ..... P.O. Box: ..... Postal Code: .....

Website: ..... Fax No.: .....

### Activity

- |                                     |                                      |  |
|-------------------------------------|--------------------------------------|--|
| Nature of Activity:                 | <input type="checkbox"/> Service     | <input type="checkbox"/> Professional  |
| <input type="checkbox"/> Wholesale  | <input type="checkbox"/> Retail      | <input type="checkbox"/> Import/Export |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Contracting | <input type="checkbox"/> Others .....  |

### Account

Account Type: ..... Currency: ..... Purpose: .....

Source of Funds: .....

Other Source of Income: .....

Source of Wealth: .....

Monthly Expected Transactions on Account: ..... Extent (JOD): .....

### Expected Bank's Products and Services that will be used whence Type, Number and Volume:

- |          |             |                     |
|----------|-------------|---------------------|
| 1- ..... | Type: ..... | Volume (JOD): ..... |
| 2- ..... | Type: ..... | Volume (JOD): ..... |
| 3- ..... | Type: ..... | Volume (JOD): ..... |

# Arab Jordan Investment Bank

## Expected other amounts and transfers deposits in account from other activities

Regular: .....  
Amount: ..... Reason: .....  
Source: ..... Beneficiary: .....

### Owners/ Authorized Signatories:

Major owners who own 5% or more (substantial shareholders)\* and authorized signatories on account:

1- .....	Percentage: .....	Address: .....
2- .....	Percentage: .....	Address: .....
3- .....	Percentage: .....	Address: .....
4- .....	Percentage: .....	Address: .....
5- .....	Percentage: .....	Address: .....

\*Kindly fill Individuals Know Your Customer form for the substantial shareholders

Real account beneficiary owner name (if other than the entity itself): .....

Address: ..... Nature of Activity: ..... Source of Funds: .....

Date: .....

Signature: .....