

New York Branch

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DEAR CUSTOMER,

THE OPENING OF CERTIFICATE OF DEPOSIT ACCOUNT IS SUBJECT TO NORMS AND REGULATIONS TO BE COMPLIED WITH UNDER BANK SECRECY ACT AND CUSTOMER IDENTIFICATION PROGRAM RULES. WE NEED TO OBTAIN AND VERIFY DIFFERENT INFORMATION OBTAINED FROM YOU WHILE OPENING A CERTIFICATE OF DEPOSIT ACCOUNT LIKE ADDRESS, DATE OF BIRTH, CERTIFICATE OF INCORPORATION, TAX-ID, SOCIAL SECURITY NUMBER, EMPLOYER IDENTIFICATION NUMBER, TELEPHONE NUMBER ETC.

AS A REGULATORY REQUIREMENT WE WISH TO INFORM YOU THAT WE ARE REQUESTING VARIOUS DETAILS/INFORMATION FROM YOU TO VERIFY AND ESTABLISH YOUR IDENTITY.

KINDLY SIGN AND RETURN A COPY OF THIS LETTER IN TOKEN OF HAVING NOTED THE ABOVE PROVISION AND AGREED TO ALLOW THE BANK TO VERIFY THE INFORMATION FROM DIFFERENT SOURCES.

THANKS AND REGARDS.

I HAVE NOTED THE CONTENTS OF ABOVE LETTER.

DATE:

NAME:

ADDRESS:

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