

Questionnaire

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| N | 1. Contact information | |
| 1.1 | Full name |  |
| 1.2. | Personal N |  |
| 1.3. | ID Card N and issuing country |  |
| 1.4. | Legal address |  |
| 1.5 | Real address |  |
| 1.6. | Phone number |  |
| 1.7. | e-mail account |  |
| 1.8. | Date of birth |  |
| 1.9. | Place of birth (specify the country) |  |
| 1.10 | Citizenship (in case of dual citizenship please specify all countries) |  |
| 1.11. | Whether you have taxpayers status | Yes  No |
| 1.12 | 1.11 In case of affirmative answer please specify all the country where you are registered as taxpayers and taxpayers codes |  |
| 1.13 | whether you are private entrepreneur | Yes  No |
| 1.14 | 1.13 In case of affirmative answer please specify country of registering as private entrepreneur and tax code |  |
| 1.15 | Are you politically exposed or family member person? | Yes  No |
| 1.16 | 1.15 In case of affirmative answer please specify political position and country of political activity |  |
| 1.17 | If you are not a resident or you are citizen of foreign country please specify how long you stay in Georgia, which is your main activity  . |  |

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| N | 1. Client’s profile | | | | | | | |
| 2.1 | Type of activity  Student (specify educational institution) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Retired  paid employee (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Public (state) owned organization employee (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  self-employed (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  private entrepreneur (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Founder of the company ( specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| 2.2 | Source of income  Salary  Dividends  Inheritance  Honorarium  Rental income  Donation of relatives (parents)  Pension  Selling of real estate  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Scholarship  Selling of shares (stocks) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| 2.3 | Average monthly income in national currency or its equivalent | | | | | | | |
| < 1000 | 1000-5000 | 5000-10000 | | 10000-50000 | | 50000-100000 | >100000 |
| If there is obvious that it is one-time income please specify its source and volume (for example loan. selling of real property, selling of share , Inheritance etc.) | | | | | | | |
| 2.4. | Do you have Accounts with another Bank | | | Yes  NO | | | | |
| 2.5. | 2.4. In case of affirmative answer please specify | | | | | | | |
| Banks | | | | | Countries | | |
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|  | 1. Information on objectives of business relationhip and intentions with the Bank | | | | | | | |
| 3.1 | Purpose of Account opening with the Bank? | | |  | | | | |
| 3.2 | Banking products that you intend to use  Transfers ( GEL  Foreign Currency)  Enterings ( GEL  Foreign Currency)    Credit products (Loan, overdraft)    Conversion    Plastic (business) card (  Business card  pay-roll program  Debit card  Credit card)  Current Account  Deposits  Documentary products ( Banking Guarantee  Documentary letter of credit  Documented collection)    Other (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| 3.3 | Who has recommended you the Bank? | | | | | | | |
|  | Management of the Bank | | Employee of the Bank | | Client of the Bank | Friend | | Other \_\_\_\_\_\_\_\_\_\_\_ |
| 3.4 | How do you prefer to get service  Mostly in remote mode (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  From Service-centers of the Bank | | | | | | | |
| 3.5 | Estimated average annual turnover in the Bank in national currency or its equivalent | | | | | | | |
| < 50000 | 50000-300000 | | 300000-1000000 | | | >1000000 | |
|  | Countries from which mainly will be carried out transaction to/from Account  Georgia  Foreign country (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |

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| N | 1. When Account is opening by person acting by Power of Attorney, please fill up data for person acting by Power of Attorney | |
| 4.1 | Name/Surname |  |
| 4.2. | Personal N |  |
| 4.3. | Identity Card N and issuing country |  |
| 4.4. | Legal Address |  |
| 4.5 | Real Address |  |
| 4.6. | Phone number |  |
| 4.7. | e-mail account |  |
| 4.8. | Date of birth |  |
| 4.9. | Place of birth (specify the Country) |  |
| 4.10 | Citizenship (in case of dual citizenship please specify all countries) |  |
| 4.11 | Date of issuance of Power of Attorney and validity |  |
| 4.12 | Country issuing Power of Attorney |  |
| 4.13 | Profile of activity |  |

I realize all the responsibility for the accuracy and completeness of information filled up in the questionnaire. I certify that the information I have filled in the questionnaire is complete and true. As well I certify that Account(s) will be used only for the purpose and interest of person specified in clause 1. and will not be used to carry out interests of the third person. I am responsible for the immediate provision of the Bank of changes in the information provided in the questionnaire.

Name/Surname of authorized person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date :