Foreign Tax Liability Self Certification Declaration - Individual

Instructions

- This form is only to be completed by individuals. If the account holder is not an individual please complete the Foreign Tax Liability Self Certification Declaration - Entities form.
- One self certification declaration per individual customer
- For frequently asked questions regarding Foreign Tax certification, please visit the Foreign Tax Liability website or contact Suncorp Bank on 13 11 75
- Return completed forms to:
 - Mail: Suncorp Bank (Norfina Limited), IPC 4BK230 Reply Paid 2432, Brisbane QLD 4001 (note: no postage stamp is required);
 - Your local Suncorp Bank Branch. Branch staff: Please forward completed form to IPC 4BK230; or
 - Scan and email: fatca@suncorpbank.com.au

Full Name of Individual		Date of Birth	
			DD/MM/YYYY
Residential address			
		State	Postcode
Are you a US citizen or US resident for tax purpo	ses?		
□ No			
Yes If Yes, please provide your US Tax	payer Identification Number (TIN) below		
Are you a resident of any other country for tax pu	rposes? Yes No		
Country/Jurisdiction of Tax Residence	Taxpayer Identification Number (TIN) or Equivalent	If no TIN avail	lable enter Reason A, B or C
If a TIN is not available, please provide the appropriate the second of		-+: TINI- +-:	tan markilanaan
Reason B - The Account Holder is otherwise una Reason C - No TIN is required. (<i>Note: Only select</i>	ccount Holder is resident for tax purposes does not ble to obtain a TIN or equivalent number. This reason if the domestic law of the relevant juris		
I declare:	and and reflecte months about for FATCA and /a	, tha Camanaa D	lana aukina ni Chana da ud
— that I will update Suncorp Bank promptly if m	orrect and reflects my tax status for FATCA and/o y tax status for the purposes of FATCA and/or the		
the future. Lacknowledge that the information contained in	this form and information regarding the Account I	Holder and any R	Reportable Account(s) may be
provided to the tax authorities of the country/juri	sdiction in which this account(s) is/are maintained which the Account Holder may be tax resident pu	d and exchanged	with tax authorities of another
Signature			
Date DD/MM/YY			
	ersonal information in accordance with our Privacy	Policy. Our Priva	acy Policy can be accessed via our
Internal Use Only			
Please forward completed forms to IPC 4BK230			
Branch Name			Date Received
			DD/MM/YYYY
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User Name and Number