Personal Data/Whom Relate to Juristic For Service Application

ธนาคารกสิกรไทย
开泰银行 KASIKORNBANK

☐ Individual Customer ☐ Individual Related to Juristic Person: Name of Juristic Person ....

☐ Authorized Signature (B02) Only in presence ☐ Authorized Person for Payment (B23) Letter of Power of Attorney required

Name .... Surname .... Middle Name .... (if any)

Marital Status: ☐ Single ☐ Married ☐ Widowed ☐ Divorced

Occupation: ☐ Government Official ☐ Government Employee ☐ State Enterprise Employee ☐ Temporary Employee of State Enterprise
☐ Private Company Employee ☐ Employee of International/Non-Profit Organization ☐ Temporary Employee of International/Non-Profit Organization
☐ Owner of Registered Business ☐ Owner of Unregistered Business ☐ Support Family-owned Business ☐ Freelance ☐ Daily Wager/Temporary Worker
☐ Househusband/Housewife ☐ Student ☐ Monk/Priest ☐ Retired ☐ Unemployed

Remark: For Occupation of Househusband/Housewife, Students, Monks/Priests, Retired, or Unemployed do not need to specify a Field of Occupation part

Field of Occupation: ☐ Teacher/Instructor ☐ Police/Military ☐ Judge/Attorney ☐ Lawyer ☐ Doctor ☐ Dentist ☐ Veterinarian ☐ Pharmacist
☐ Nurse ☐ Architect ☐ Engineer ☐ Pilot ☐ Flight Attendant ☐ Salesperson ☐ Accountant ☐ Online Business ☐ Production Staff
☐ Agriculture (Farming, Husbandry, Fishery) ☐ Money Transfer Service ☐ Money Exchange Service ☐ Cryptocurrency and Token Digital Trading
☐ Travel Agent ☐ Foreign Worker/Expat Recruitment Agent ☐ Trader of Gems/Jewelry/Gold ☐ Trader of Used Cars, Amulets and Antiquities
☐ Entertainment (Karaoke, Massage Parlors, Pubs, Bars) ☐ Casino or Gambling House Business ☐ Trader of Arms and Ammunition
☐ Other, (Please specify) ....

Registered Address

1. Alien Identification Card, Please specify Postal Code _ _ _ _ _ *
2. Passport, Please specify Address in Country of Nationality below:

Street Address (Number, Street and Apt. or Suite No.) * ....

City * .... Province/State/County * .... Country * .... Postal Code ....

Contact Address (in Thailand): ☐ As on Registered Address (In case of Alien Identification Card) ☐ Other, (Please specify)

Name of Place ....

No. .... Building .... Floor .... Room .... Village No. (Moo) .... Village (Moo Baan) ....

Lane/Alley (Soi) .... Road .... Sub-District (Tambon/Khwaeng) ....

City/District (Amphoe/Khet) .... Province .... Postal Code _ _ _ _ _

Contact Number (In Thailand) _ _ _ _ _ _ _ _ _ _ Ext. _ _ _ _ _ ☐ Mobile Phone ☐ Office Phone ☐ Home Phone

Email Address (Capital Letter) _ ☐ Private E-mail ☐ Office E-mail

Name and Address of Workplace: Please specify workplace details for every occupation except Househusband/Housewife, Students, Monks/Priests, Retired, or Unemployed.

Name of Workplace: ....

Workplace Address: ☐ As on Registered Address ☐ As on Contact Address (In Thailand) ☐ Other, (Please specify)

No. .... Building .... Floor .... Room .... Village No. (Moo) .... Village (Moo Baan) ....

Lane/Alley (Soi) .... Road .... Sub-District (Tambon/Khwaeng) ....

City/District (Amphoe/Khet) .... Province .... Postal Code _ _ _ _ _

Education: ☐ Elementary School ☐ Secondary School ☐ Vocational Certificate/High Vocational Certificate/Diploma ☐ Bachelor Degree ☐ Master Degree ☐ Doctorate ☐ Not Specify

Country's Source of Income: (Please select only one) ☐ Thailand ☐ Other country, (Please specify) ....

Source of Income: ☐ Savings ☐ Business Income ☐ Wages/Salary ☐ Inheritance/Gifts ☐ Proceeds Earned from Investments
(More than 1 item can be selected) ☐ Other, (Please specify) ....

Income per Month: (Baht/month)
☐ Less than – 8,000 ☐ 8,000 – 14,999 ☐ 15,000 – 19,999 ☐ 20,000 – 29,999 ☐ 30,000 – 49,999
☐ 50,000 – 69,999 ☐ 70,000 – 99,999 ☐ 100,000 – 249,999 ☐ 250,000 – 499,999 ☐ 500,000 – 999,999
☐ 1,000,000 – 1,499,999 ☐ 1,500,000 – 2,499,999 ☐ 2,500,000 – 4,999,999 ☐ 5,000,000 – 7,499,999 ☐ 7,500,000 - More

Objective of Account: (More than 1 item can be selected ☐ Savings ☐ Investment ☐ Loan Payment ☐ Payroll Account ☐ Other, (Please specify) ....

For the Individual Account/Loan Request, please specify the **Ultimate Beneficial Owner** refers to the natural person who ultimately owns or controls an account and/or the natural person on whose behalf a transaction is being conducted.
☐ As indicated in Account Name ☐ Other, (Please specify) Name – Surname .... (ID document required)

I hereby certify that the above information are true and correct as required for the opening of an account with KASIKORNBANK PCL. In case of any change in the future, the Bank shall be informed. I further agree and acknowledge that in case I give consent any other person to jointly use my account for the transfer or withdrawal, which has caused any damage to the third party, I shall be responsible for such damage and legal consequence arising therefrom

Applicant's Signature ....

(..........)

Date ....

For RM/PS: KYC Offsite process and KYC Level 3 customers must be considered and approved by AML Officer.

Signature .... ID No. _ _ _ _ _ _ Recorder No.1	Signature .... ID No. _ _ _ _ _ _ Recorder No.2	Signature .... ID No. _ _ _ _ _ _ *Recorder AML officer

*Customer KYC L3 by Recorder AML officer approve

Juristic Person Data for Service Application

ธนาคารกสิกรไทย
开泰银行 KASIKORNBANK

☐ PCL. ☐ LTD. ☐ LP. ☐ ROP. ☐ JV. ☐ Others : (Please specify) ....

Name Juristic Person (in English) ....

Name Juristic Person (in Thai) ....(If any)

Managing Director (Please specify Name – Surname - Middle Name and attach with identification document at least one person)

1. Name .... Surname .... Middle Name...(if any)

2. Name .... Surname .... Middle Name...(if any)

3. Name .... Surname .... Middle Name...(if any)

Contact Information

Contact Number ␣␣␣ ␣␣␣ ␣␣␣␣ Ext. ␣␣␣␣␣ Fax ␣␣ ␣␣␣ ␣␣␣␣

E-mail Address (Office): ␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣␣

Website (URL): ␣␣␣

Contact Address (in Thailand) : ☐ As on Certificate ☐ Others : (Please specify)

Name of Place ....

No. …………………… Building …………………………… Floor ………….. Room ………….. Village No.(Moo)……...…. Village ....

Lane/Alley(Soi) .... Road .... Sub-District (Tambon/Khwaeng) ....

City/District (Amphoe/Khet) .... Province .... Postal Code ␣␣␣␣␣

Type of Main Business : ....

Estimated Income of Business : (per year) ☐ Less than 10 MB ☐ 10 MB - less than 50 MB ☐ 50 MB - less than 400 MB

(MB : Million Baht) ☐ 400 MB - less than 800 MB ☐ 800 MB - less than 5,000 MB ☐ 5,000 MB or more

Estimated Total Asset : ☐ Less than 10 MB ☐ 10 MB - less than 50 MB ☐ 50 MB - less than 400 MB

(MB : Million Baht) ☐ 400 MB - less than 800 MB ☐ 800 MB - less than 5,000 MB ☐ 5,000 MB or more

Country's Source of Income : (Please specify only one) ☐ Thailand ☐ Others Country : (Please Specify)…………………………..…………

Further Information Regarding to the Opening Account

Correspondence (in Thailand) : ☐ As on Certificate ☐ Same as Contact Address ☐ Other (Please specify)

Name of Place ....

No. …………………… Building …………………………… Floor ………….. Room ………….. Village No.(Moo)……...…. Village ....

Lane/Alley(Soi) .... Road .... Sub-District (Tambon/Khwaeng) ....

City/District (Amphoe/Khet) .... Province .... Postal Code ␣␣␣␣␣

Objective of Account : (More than 1 item can be selected.) ☐ For Business Purposes ☐ For Investment ☐ Others : (Please specify)……………..........

Source of Income/Funds Circulation/Debt Repayment ☐ Business Income ☐ Return from Financial Instruments ☐ Remuneration from services

(More than 1 item can be selected.) ☐ Others : (Please specify)...

I/We hereby that the above details are true and accurate as required for opening the account with KASIKORNBANK PCL. In case of any change in the future, the Bank shall be informed.

Applicant's Signature …………………………………………………………………………….

(……………………………………………………………….…………………….)

Date ....

Seal (if any)

For RM/PS : KYC Offsite process and KYC Level 3 customers must be considered and approved by AML Officer.

Signature ……………………...… ID ␣␣␣␣␣␣ Recorder No.1	Signature ……………………..… ID ␣␣␣␣␣␣ Recorder No.2	Signature ………………….… ID ␣␣␣␣␣␣ *Recorder AML officer

*Customer KYC L3 by Recorder AML officer approve