



## Individual Self-Certification

### Section 1: Account Holder Identification

Account Holder Name	Date of Birth (dd/mm/yyyy)	Country of Birth
---------------------	----------------------------	------------------

**Permanent Residence Address:**

Number & Street	City/Town
-----------------	-----------

State/Province/County	Post Code	Country
-----------------------	-----------	---------

**Mailing address (if different from above):**

Number & Street	City/Town
-----------------	-----------

State/Province/County	Post Code	Country
-----------------------	-----------	---------

### Section 2: Declaration of U.S. Citizenship or U.S. Residence for Tax purposes

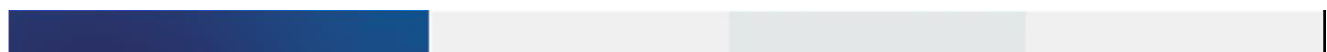
Please tick either (a) or (b) or (c) and complete as appropriate.

- (a)  I confirm that **I am a U.S. Person** (an American citizen, dual citizen, lawful permanent resident (Green Card Holder) or resident under the substantial presence test) and my **U.S. federal taxpayer identifying number (U.S. TIN)** is as follows:  
\_\_\_\_\_.
  
- (b)  I confirm that I was born in the U.S. (or a U.S. territory) but I am no longer a U.S. citizen as I have voluntarily surrendered my citizenship as evidenced by the attached documents.
  
- (c)  I confirm that **I am not a U.S. Person.**

### Section 3: Declaration of Tax Residency (other than U.S.)

**Complete this section if you have non-U.S. tax residencies.** I hereby confirm that I am, for tax purposes, resident in the following countries (indicate the tax reference number type and number applicable in each country).

Country/countries of tax residency	Tax reference number type	Tax reference number





#### Section 4: Declaration and Undertakings

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be inaccurate or incomplete.

Where legally obliged to do so, I hereby consent to the recipient sharing this information with the TAX ADMINISTRATION JAMAICA (TAJ).

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

Date: (dd/mm/yyyy): \_\_\_\_\_

*JN Bank Limited is obliged under the Intergovernmental Agreements ("IGA") entered into by the Jamaica and the United States of America, in relation to the automatic exchange of information for tax matters ("FATCA"), to collect certain information about each account holder. Please note that in certain circumstances we may be obliged to share this information with TAX ADMINISTRATION JAMAICA (TAJ).*

*If any of the information above regarding your tax residence or FATCA classification changes in the future, please ensure you advise us of these changes promptly. If you have any questions about your tax status and how it is impacted by the completion of this form, please contact your tax advisor.*

