

Individual Self-Certification Form

Name:	Date of Birth:	Country of Birth:	
ontact Information:			
Home: Mob	ile:	Email Addre	ss:
rmanent Residence Address:			
(Number & Stree	/4/		(City/Town)
(Number & Street			(City/Town)
(Country/State/Drevings)	(Post	Codo)	(Country)
(Country/State/Province)	(Post	Code)	(Country)
illing Address(if different from above):			
(Number & Stree	ot)		(City/Town)
(Manibol & Odoc			(Oity/10Will)
(County (Chata / Duo) in co	(Past	(C- 1-)	(Country)
(Country/State/Province)	(POSI	Code)	(Country)
Please tick either (a) or (b) or (c) and (a) I confirm that I am a U.S. Per (Green Card Holder) or resident u identifying number (U.S. TIN) is	complete as appropriate son (an American citizer under the substantial pres	, dual citizen, la	wful permanent resident
Please tick either (a) or (b) or (c) and (a)	complete as appropriate rson (an American citizer under the substantial pres as follows: U.S. (or a U.S. territory) uship as evidenced by the	, dual citizen, lav sence test) and n	wful permanent resident ny U.S. federal taxpayer er a U.S. citizen as I have
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 (a) ☐ I confirm that I am a U.S. Per (Green Card Holder) or resident u identifying number (U.S. TIN) is (b) ☐ I confirm that I was born in the voluntarily surrendered my citizer (c) ☐ I confirm that I am not a U.S. I ection 3: Declaration of Tax Remplete this section if you have non-levely confirm that I am, for tax purpose mber type and number applicable in each Country/Countries of Tax 	complete as appropriate rson (an American citizer under the substantial prese as follows: U.S. (or a U.S. territory) uship as evidenced by the Person. esidency (other than u.S. tax residencies. es, resident in the following uch country). Tax Reference	but I am no long attached docum	wful permanent resident my U.S. federal taxpayer er a U.S. citizen as I have nents.



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Section 4: Declarations and Undertakings

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complete. I un 30 days where	the information provided in this form is, to the best of my knowledge and belief, accurate and idertake to advise the recipient promptly and provide an updated Self-Certification form within any change in circumstances occurs which causes any of the information contained in this form rate or incomplete.
	obliged to do so, I hereby consent to the recipient sharing this information with the TAX TION JAMAICA (TAJ)
Signature:	Date:
United States of collect certain	ed is obliged under the Intergovernmental Agreements ("IGA") entered into by the Jamaica and the of America, in relation to the automatic exchange of information for tax matters ("FATCA"), to information about each account holder. Please note that in certain circumstances we may be re this information with TAX ADMINISTRATION JAMAICA (TAJ).
ensure you ad	oformation above regarding your tax residence or FATCA classification changes in the future, please wise us of these changes promptly. If you have any questions about your tax status and how it is the completion of this form, please contact your tax advisor.