

Date: DD / MM / YYYY

The Head of Branch Prime Bank Limited \_\_\_\_\_ Branch

Subject: New Issue/ Re-Investment / Encashment/ Interest of WEDB/ USDPB/USDIB favoring

Dear sir,

With due respect I would like to request you to New Issue/Re-Investment/Encashment/ Interest of WEDB/USDPB/USDIB amount BDT/USD \_\_\_\_\_\_\_ and Debit/Credit My SB/FC Account No \_\_\_\_\_\_ maintaining with your \_\_\_\_\_\_ branch.

Thanking you and expecting your best co-operation in this regards.

Your faithfully

SIGNATURE

Name: Phone No: Email:

#### ANNEXURE

#### FORM NO. DPB-I

#### APPLICATION FOR PURCHASE OF US DOLLAR PREMIUM BOND

Sl. No.

Date: DD / MM / YYYY

#### The Manager

\_\_\_\_\_

Dear Sir,

I, \_\_\_\_\_\_Name in Capital Letter\_\_\_\_\_ intend to purchase 3-years US Dollar Premium Bond to the face value of US\$ \_\_\_\_\_\_\_) only. My address, the name and address of the nominee and the bank branch (paying office) where from the amounts becoming due against the Bond(s) as interest, redemption value and death-risk-benefit (if admissible) will be drawn as under:

Name and address of-		
Holder	Nominee	Name of Paying Office

Relation with the nominee:

I accept the conversion rate applied by you.

I declare that:-

(a) I am a non-resident account holder bearing Passport No. \_\_\_\_\_\_ and I maintain F.C. Account No. \_\_\_\_\_ with \_\_\_\_\_ and I earn my wage/income as \_\_\_\_\_\_ (Status) in \_\_\_\_\_\_ in \_\_\_\_\_
(b) My date of birth is \_\_\_\_\_\_

I solemnly affirm that-

- (i) The statements made above are true and the funds tendered for purchase of the Bond(s) represent savings out of my income abroad which have not been received from Bangladeshi services.
- (ii) The Statements made above are true to the best of my knowledge and belief.

(In case of purchase of Bond abroad); I select \_\_\_\_\_ branch of your banks as the paying office .

I hereby agree to abide by the U.S. Dollar Investment Bond Rules, 2002

Yours faithfully,

## Signature of Applicant

Name in Block letters
Address:
(a) Abroad:
(b) In Bangladesh:
Passport No
Place of Issue
F.C. Account No

Particulars of the Bond(s) issued:

David Cl. No.	Demonitoretion	Name and	Name of Paying	
Bond Sl. No.	Denomination	Holder.	Nominee.	Office.
Total				

The Bond(s) as detailed above has/have been issued.

-	

Authorized Officer

Authorized Officer

Received the Bond(s) detailed above of	<sup>f</sup> the face value of Tk
(Taka	) which confirm to my consideration

Signature of Applicant

### DIASPORA BOND INVESTOR INFORMATION FORM

□ Wage Earner Bond

- US Dollar Premium Bond
- US Doller Investment Bond

Investment Amount \_\_\_\_\_

Interest Cycle: 
□ Half-yearly □ End of Period

#### **1. DIASPORA INFORMATION**

NID	DOB		Gender
Name (Bangla)		Name (English)	
Present Address			
Permanent Address			
Father's Name		Mother's Name	
Spouse's Name		Email	
Phone (Bangladesh)		Phone (Abroad)	
Passport	_Expiry Date		Issue Country
Date of arrival in Bangladesh (If retu	rned from abroa	d permanently)	

#### 2. BENEFICIARY (IF APPLICABLE)

NID	_ DOB		Gender
Name (Bangla)		Name(English)	
Present Address			
Permanent Address			
Father's Name		Mother's Name	
Spouse's Name		Email	
Phone (Bangladesh)		Phone (Abroad)	

#### **3. REMITTANCE INFORMATION**

Source Country	Diaspora Occupation	Relationship with holder
Visa Type:	Visa Start Date:	Visa End Date:

Remittance Channel	Bank/Exchange House	Acc./Ref#	Date	Currency	Remittance Amount

### 4. BANK RELATED INFORMATION

Pay-in Account	Principal Payment Account	Interest Payment Account
Account Title:	Account Title:	Account Title:
Account No:	Account No:	Account No:
Bank:	Bank:	Bank:
Branch:	Branch:	Branch:
Account Type:	Account Type:	Account Type:

#### **5. NOMINEE INFORMATION** (IF THE NOMINEE IS A MINOR, AN IDENTIFIER'S NID & DOB WILL BE REQUIRED)

Nominee is minor (If applicable):				
Minor Nominee Name				
Minor Nominee Address				
NID	_ DOB		Gender	
Name (Bangla)		Name (English)		
Present Address				
Permanent Address				
Father's Name		Mother's Name		
Relation (with holder)	Phone		Email	

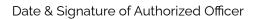
Date & Signature of Nominee (Optional)

Date & Signature of Beneficiary (*If applicable*)

Date & Signature of Diaspora

#### TO BE FILLED BY THE ISSUE OFFICE

<b>Registration Number</b>	Issue Date	Issued Amount





.....Branch

## Foreign Account Tax Compliance Act ("FATCA")

#### Account Opening Form Supplement (use additional copies, if required)

This form must be completed by any individual/non-individual/entity who wishes to open a Bank Account/have been maintaining one.

Name	Account Number	
Country of Birth/Incorporation   Please check" √ " 'Yes' or 'No' for each of the following questions   Yes / No   1. Are you a U.S. Resident?   2. Are you a U.S. Citizen?   3. Do you hold a U.S. Permanent Resident Card (Green Card)?   4. Is your entity a foreign entity where there is substantial "US ownership" ?	Name	
Please check" ✓ " 'Yes' or 'No' for each of the following questions       Yes / No         1. Are you a U.S. Resident?       □         2. Are you a U.S. Citizen?       □         3. Do you hold a U.S. Permanent Resident Card (Green Card)?       □         4. Is your entity a foreign entity where there is substantial "US ownership" ?       □	Country of Residence/Registration	
1. Are you a U.S. Resident?       Image: Control for	Country of Birth/Incorporation	
2. Are you a U.S. Citizen?   3. Do you hold a U.S. Permanent Resident Card (Green Card)?   4. Is your entity a foreign entity where there is substantial "US ownership"?	Please check'' $\checkmark$ " 'Yes' or 'No' for each of the following questions	Yes / No
3. Do you hold a U.S. Permanent Resident Card (Green Card)?       Image: Card (Green Card)?         4. Is your entity a foreign entity where there is substantial "US ownership" ?       Image: Card (Green Card)?	1. Are you a U.S. Resident?	
4. Is your entity a foreign entity where there is substantial "US ownership"?	2. Are you a U.S. Citizen?	
	3. Do you hold a U.S. Permanent Resident Card (Green Card)?	

I hereby confirm the information provided above is true, accurate & complete.

Subject to applicable local laws, I hereby consent for Prime Bank Limited, Bangladesh or any of its affiliates (including branches) (Collectively "the Bank") to share my information with domestic/U.S. regulators or tax authorities where necessary to establish my tax liabilities in any jurisdiction.

Where required by domestic or U.S. regulators or tax authorities, I consent and agree that the Bank may withhold from my account(s), such amounts as may be required according to applicable laws, regulations and directives.

I undertake to notify the Bank within 30 (thirty) calendar days if there is a change in any information which I have provided to the Bank.

Applicant's Signature

Applicant's Name .....

Date .....

# অঙ্গীকারনামা

আমি ------ পিতা/স্বামী ------ পিতা/স্বামী ------ এই মর্মে অঙ্গীকার করছি যে, ওয়েজ আর্নার ডেভেলপমেন্ট বন্ড, ইউএস ডলার ইনভেস্টমেন্ট বন্ড, ইউএস ডলার প্রিমিয়াম বন্ড বিদ্যমান এই ৩ প্রকার বন্ডের সমন্বয়ে আমি এবং আমার মনোনীত ব্যাক্তি সাকুল্যে বিনিয়োগের পরিমাণ বাংলাদেশী মুদ্রায় রূপান্তর করা হলে এক কোটি টাকার মধ্যে সীমাবদ্ধ রয়েছে। বর্তমানে আমার নিজ ও আমার মনোনীত ব্যাক্তির নামে সাকুল্যে ইস্যুকৃত বন্ডের মূল্যমান

ভবিষ্যতে ব্যাঙ্কের রেকর্ডপত্রাদি পর্যালোচনা করে বা অন্য কোন উপায়ে উক্ত তিন প্রকার বন্ডে বিনিয়োগের পরিমাণ বাংলাদেশী টাকায় অর্থ মন্ত্রণালয়ের ০৩/১২/২০২০ ইং তারিখের প্রজ্ঞাপন নং- ০৮.০০.০০০০.০৪১.২২.০১৭.১৬.৭৯ ব্যত্যয় ঘটিয়ে যদি ১ (এক) কোটি টাকা অতিক্রম করছে মর্মে প্রমাণিত হয়, তবে ব্যাংক বিধি মোতাবেক ও দেশের প্রচলিত আইন অনুযায়ী যে কোন ব্যবস্থা গ্রহণ করা হলে তা আমি মেনে নিতে বাধ্য থাকব।

তাং: -----গ্রাহক আমাদের সম্মুখে এই অঙ্গীকারনামায় সহি স্বাক্ষর করেছেন।

ا ک	२।
স্বাক্ষর:	স্বাক্ষর:
নামঃ	নামঃ
ঠিকানাঃ	ঠিকানাঃ
এন আইডি নম্বর:	এন আইডি নম্বর:
পাসপোর্ট নম্বর:	পাসপোর্ট নম্বর:
মোবাইল নম্বর:	মোবাইল নম্বর:
ইমেইল:	ইমেইল: