

PERSONAL INFORMATION SHEET

FORM 150v1

Account Number (for bank use only):



Personal Information:

Last Name: _____ First Name: _____ Middle Initial: _____

Residential Address: _____
(Physical Address required, no P.O. Box)

City: _____ Country: _____ Postal/Zip Code _____

Mailing Address (if different from above): _____

City: _____ Country: _____ Postal/Zip Code _____

Telephone: _____ Fax: _____

E-Mail: _____

Nationality: _____ Passport No.: _____ D.O.B: _____

Country of Birth: _____ Social Security No. (US Citizens only) _____

Second Nationality: _____ Second I.D. (Passport No): _____

Occupation: _____

Relationship to account: Beneficial owner and Signatory Signatory only
 Power of Attorney Related Party (non-signatory), i.e. Company shareholder

Online Banking Portal:

Bank Statements, account activity and secure bank communications are available through our Online Banking Portal. Access is via a Username and Password which will be emailed to you after your account is active. Please note wire transfers to 3rd Parties can NOT be conducted through the portal for security reasons.

Please indicate if you would like access to your account via the Online Portal: Yes No

Signature: _____ Date: _____

P.O. Box 105, Coconut Drive, San Pedro, Ambergris Caye, Belize
Tel: (501) 226-2388/3083 Fax (501) 226-2892 Email: cibl@btl.net

For Bank use only – Referred by: