

Self-Declaration Form (Regarding Income, Profession & Source of Fund)

Date:

Manager
BRAC Bank Ltd.

Account Number:

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Account Title:

Occupation Type : (Please put <input checked="" type="checkbox"/> mark multiple if applicable)			
<input type="checkbox"/> Private Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> House-wife <input type="checkbox"/> Land-Lord/ Land-Lady <input type="checkbox"/> Farmer <input type="checkbox"/> Professional (Doctor/ Lawyer/ Accountant/ Engineer/ Architect/ Mariners etc.) <input type="checkbox"/> Defense/ Law Enforcement Agencies <input type="checkbox"/> Retired <input type="checkbox"/> Freelancer <input type="checkbox"/> Consultancy/Trainer/Coach <input type="checkbox"/> Sportsman <input type="checkbox"/> Others (Please specify)			
Occupation Details : (Please fill up multiple fields if applicable)			
For Service Holder Designation: Name of the Organization:			
For Business Person Name of the Business entity:			
Nature of Business	Details of Business/Products	Nature of Business	Details of Business/Products
<input type="checkbox"/> Manufacturing <input type="checkbox"/> Trading <input type="checkbox"/> Export-Import <input type="checkbox"/> Wholesaler <input type="checkbox"/> Agro Business <input type="checkbox"/> Consultancy/Training <input type="checkbox"/> C&F Agent	<input type="checkbox"/> Service Provider <input type="checkbox"/> Distributor <input type="checkbox"/> Retailer <input type="checkbox"/> Cottage/Small Industry <input type="checkbox"/> e-Commerce/Online Seller <input type="checkbox"/> MFS Agent/ Business <input type="checkbox"/> Others (Please specify)
For Professionals (Doctor/ Lawyer/ Accountant/ Engineer/ Architect/ Mariner etc.) Name of the profession: Name of the Entity/Firm:			
For Housewife/ Student/ Unemployed Please provide details of fund provider/ earning member of the family/ Beneficial Owner (BO) : Relationship with the fund provider/ earning member/ BO: Occupation of fund provider/ earning member/ BO: Occupation Details of BO:			
For Landlord/ Retired Person/ Consultant/ Others (please provide details below): 			
Monthly Income : (in BDT equivalent) (Please put <input checked="" type="checkbox"/> mark)			
<input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,001 - 50,000 <input type="checkbox"/> 50,001 - 150,000 <input type="checkbox"/> 150,001 - 250,000 <input type="checkbox"/> 250,001 - 350,000 <input type="checkbox"/> 350,001 – 500,000 <input type="checkbox"/> 500,001 – 10,00,000 <input type="checkbox"/> More Than 10,00,000 (please try to obtain supporting documents)			
Source of Fund / Income Generating From: (Please put <input checked="" type="checkbox"/> mark multiple if applicable):			
<input type="checkbox"/> Salary, Bonus, Allowance, Incentives <input type="checkbox"/> Rent <input type="checkbox"/> Agro/Fishery/Livestock <input type="checkbox"/> Business <input type="checkbox"/> Remittance** <input type="checkbox"/> Govt. Bonds/ SP/ WEDB/ Treasury Bond <input type="checkbox"/> Savings/ Pension Scheme/ Retirement Benefits <input type="checkbox"/> Providing Professional Services <input type="checkbox"/> Freelancing <input type="checkbox"/> Commission <input type="checkbox"/> Online Selling/ e-Commerce <input type="checkbox"/> Consultancy/Training <input type="checkbox"/> Sports/ Coaching <input type="checkbox"/> Mariner's Remuneration &/ Benefits <input type="checkbox"/> Others (Please specify)			
** In case of your source of income is Remittance, please provide name and details of the fund provider in General Declaration (in next page).			

General Declaration / Clarification (about Income/Profession/Source of Fund)

Please use the below section for declaring other Source of Income/ Clarification in details

I/we confirm that the above mentioned information given is/are true and correct.

Account Holder's/ Walk-in-Customer's
Signature

Joint Account Holder's Signature
(If any)

FOR BANK USE ONLY	Customer ID:								
Received By:	Checked/Supported By:								