



**Butterfield Bank
(Cayman) Limited**

Young Savers Account Application

CAYMAN ISLANDS | 1 JANUARY 2023

Butterfield Bank (Cayman) Limited

Welcome to Butterfield



BUTTERFIELD

The following is a list of information/items required for our review and acceptance prior to the opening of a Young Savers Account:

CHILD:

- i. Original Passports for all countries of citizenship (to be certified by the Bank and as such, a personal interview is required)
- ii. Original Birth Certificate reflecting the name of the parent(s) (to be certified by the Bank)
- iii. Completed application form

PARENT:

- i. Employment Letter addressed to Butterfield confirming position, salary, and length of employment
- ii. A recent utility bill (no older than three months) in the name of at least one parent, or a lease agreement identifying at least one parent as the tenant, or landlord confirmation letter and a copy of the landlord's utility bill. At least one parent named on one of the aforementioned confirmation of the physical address must confirm that your child resides at the same physical address.
- iii. Original Passports for all countries of citizenship (to be certified by the Bank and as such, a personal interview is required)
- iv. Funding letter from parent for the Young Saver's account including amount that will be credited to the account on a monthly basis and the method that will be used (e.g. cash, internal transfers)

ADDITIONAL DOCUMENTS FOR NON-CAYMANIAN PARENT:

- i. A Copy of Cayman Status, Naturalisation Certificate, Work Permit or Rights to Work Letter
- ii. Completed W9 Form for self and for child, if considered a US Person/citizen

SPECIAL NOTE:

There may be situations where additional documentation may be required following the review of your application. Should this occur, you will be contacted as soon as reasonably possible. There may be situations that are not covered by the above items. A supervisor or manager will be happy to discuss our requirements in exceptional cases.

*** All applications are subject to a review process, following which, the Bank's decision will be communicated to the client. All rights are reserved.*

Butterfield Bank (Cayman) Limited
Telephone: +1 (345) 949 7055 | Fax: +1 (345) 949 7004

Clients and other individuals have certain rights with respect to the data held by Butterfield. The details of the individual rights, as well as how we handle the data provided to us, can be found in our Privacy Statement which can be obtained from www.butterfieldgroup.com or by contacting LICcayman@butterfieldgroup.com. Butterfield Bank (Cayman) Limited is licensed to conduct banking and investment business by the Cayman Islands Monetary Authority.

Bank Account Application for All Account Holders and Signatories

The Applicant(s) apply(ies) to open an account with Butterfield Bank (Cayman) Limited, which shall be governed by the General Terms & Conditions as modified from time to time and as available on the Bank's website or in Banking Centre welcome areas.

Name and address for account correspondence _____

ACCOUNT INFORMATION

Chequing KYD USD Saving KYD USD Other _____ Young Savers KYD USD
 Fixed term-deposit options 1 Year 2 Year 3 Year KYD USD Other _____

CLIENT INFORMATION

| PRIMARY APPLICANT | JOINT APPLICANT |
|--|--|
| CIF # | |
| First and middle names | |
| Last name | |
| Previous names (including maiden name or change by deed poll) | |
| Street address and postal code | |
| Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| ID type and # (e.g. passport) | |
| Date of birth (DD/MMM/YYYY) | |
| Country of birth | |
| Country(ies) of citizenship | |
| Do you hold a passport for any other country? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you (or will you be) ordinarily resident in Cayman? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you a resident for tax purposes of any country other than Cayman? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If Yes, please list country(ies) of residency for tax purposes and corresponding Social Insurance / similar Taxpayer Identification Number (where applicable): Country | |
| ID number | |
| Phone details (W) _____ (H) _____ (M) _____ | (W) _____ (H) _____ (M) _____ |
| E-mail | |
| Occupation | |
| Employer | |
| If self-employed, please state the name of business: | |
| Mother's maiden name (for security purposes) | |
| Are you a close associate or immediate family member of a politically exposed person (PEP)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide name of PEP | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| INTERNET BANKING <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Would you like the option of sending wires? <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If Yes, please specify the limit <input type="checkbox"/> \$1-\$1,000 <input type="checkbox"/> \$1,001-\$5,000 <input type="checkbox"/> \$5,001-\$10,000 <input type="checkbox"/> \$10,001-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$200,000 | <input type="checkbox"/> \$1-\$1,000 <input type="checkbox"/> \$1,001-\$5,000 <input type="checkbox"/> \$5,001-\$10,000 <input type="checkbox"/> \$10,001-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$200,000 |
| Would you like to receive a paper statement? (Bank fees apply for paper statements) <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Primary applicant signature _____ | Joint applicant signature _____ |
| Young Savers (view only) <input type="checkbox"/> Yes <input type="checkbox"/> No | |

PLATINUM DEBIT CARD
YOUNG SAVERS DEBIT CARD

Yes No
 Yes No

Yes No
 Yes No

CIF#

Primary account name

Secondary account name

Account number

Additional account number

Signature

Date of birth (DD/MMM/YYYY)

Mother's maiden name (for security purposes)

Link all KY\$ and/or US\$ accounts available at ATM

Declaration of parent/guardian of account holder aged 10 to 17 years old.

I give the above named young person permission to obtain and operate a Youth Debit Card. (Daily limit \$50 ATM / \$300 POS)

Applicant Name (Print):

Applicant Signature:

Date:

DD / MMM / YYYY

Collect from:

Butterfield Place

Camana Bay

Midtown

Mail to address on file

Input by

Supervisor signature

Card#

OPERATION OF ACCOUNT(S) (To be answered by any of the account holders)

What is the purpose of this account?

Why have you chosen to establish the account in Cayman? (Non-residents only)

Do any of the account holders have a connection with Cayman? (Non-residents only)

(e.g. family ties, property ownership, frequent visitor, business related dealings?)

Yes

No

If Yes, please provide details.

Is this account being held for the benefit of another party other than those named on the account?

Yes

No

If Yes, please provide details.

ACCOUNT(S) FINANCIAL DETAILS

Initial deposit \$ _____

Initial funds deposited via

Internal transfer

Local bank transfer

Personal cheque

Cash

Wire

Other _____

Where are the funds coming from? Self or from other Individual / Entity / (Name) _____

Origin of funds - city, country

How were the initial funds acquired?

Source of wealth (We may require evidence to support the information you have provided. Select all that apply.)

Salary

Rental income

Sale of Property

Sales revenue

Investment income

Other (please describe) _____

Please give details of expected wire activity (i.e., two wires per month to Canada of \$1,000 each):

Estimated total monthly incoming funds \$ _____

Estimated total monthly outgoing funds \$ _____

(If more than one account holder insert combined total)

DECLARATION

To enable Butterfield to confirm and document my tax status accurately (including, but not limited to, my tax status as a US Person or Non-US Person for US federal income tax purposes), I hereby certify that:

- (i) The information provided above is complete and accurate.
- (ii) I am the beneficial owner of the account, or am authorised to sign on behalf of the individual who is the beneficial owner of the account.
- (iii) I will notify Butterfield immediately in the event of any change in the personal information provided in this Declaration or in my circumstances relevant to this Declaration, and will provide Butterfield with an updated Declaration within 30 days of such change occurring. I further understand and agree that any failure to do so shall entitle Butterfield, in its sole discretion, to terminate any account in which I have a beneficial interest.
- (iv) I will comply with all tax and exchange control laws, regulations and reporting requirements imposed by any applicable jurisdiction relating to my accounts maintained with Butterfield.
- (v) I authorise Butterfield, at its sole discretion, to provide a copy of this form and any information regarding any account with Butterfield to which I am a party to any tax authority or party that is authorised to act on behalf of such an authority.
- (vi) I am* currently a US Person¹ I am not** currently a US Person¹ | I am* currently a US Person¹ I am not** currently a US Person¹

* This assertion must be supported by a completed IRS form W-9 (accessible from www.IRS.gov/); or

** Please note that you may be required, under certain circumstances, to provide additional information/documentation confirming your tax status before an account is opened.

Applicant signature
(please sign within block)

Date (DD/MMM/YYYY)

RIGHT OF SURVIVORSHIP (For joint account holders)

Please select one of the following:

- Tenancy in common: upon the death of one of the joint account holders the account balance will be split evenly and the deceased's share of the account balance will pass to the deceased's estate.
- Joint tenancy: upon the death of one of the joint account holders the entire account balance vests in the surviving account holder(s).

IDENTIFICATION AND DEPOSIT REQUIREMENTS

Clients are required to provide the following: (Existing clients should provide updated documents where necessary)

- Verification of nationality.** All applicants must provide: i) an original or notarised copy of all current passports or ii) a birth certificate and government issued photo identification. Identification should state the true legal name, date of birth, place of birth and nationality of the account applicant(s).
- W-9 Form as appropriate.** This information is required to enable Butterfield to file information returns with certain tax authorities. If you are a US Person¹, this information should be supported by a completed IRS Form W-9. You may be required to periodically update the information provided in support of this assertion.
- Verification of main source of income: RESIDENTS AND NON-RESIDENTS** must provide documentation to support their main source of income e.g., pay slip, letter from employer or trust, letter and source of funds from parent/guardian if account holder is youth or overseas student (along with proof of enrolment), investment statement, etc.
- Verification of physical street address (where you reside) and mailing address (if different from physical and not a P.O. Box).** Please provide any one of the following documents: household utility bill or statement from bank other than Butterfield both from within 3 months. Rental agreement or letter from landlord; letter from employer; letter from member of household over 18 along with their address verification; property tax invoice (current year).
- Minimum deposit.** KY\$100 or equivalent is required to open a chequing or savings account. KY\$20 is required to open a Young Savers account.
- Verification of Cayman residency (Non-Cayman only).** An official immigration document is required if you are resident in Cayman and are not Caymanian.

It is Bank policy to verify the source of funds before accepting or executing any transaction.

¹ A US Person is defined in Section 7701 (a) (30) of the Internal Revenue Code as a citizen or resident of the United States. A citizen generally means a person born or naturalised in the United States. A resident of the United States generally means (i) a lawful permanent resident, which includes the holder of a Green Card; (ii) an individual who meets a test indicating "Substantial Physical Presence" for the calendar year in the United States; or (iii) an individual who makes a valid election to be treated as a resident of the United States. If you are unsure whether you are a US Person, you should consult your tax advisor.

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BANK USE ONLY

Account number

Account number

Primary applicant

Joint applicant

ClF#

Staff Yes No

Client New Existing

Staff Yes No

Client New Existing

Complete by name (Print):

Signature:

Date:

Approved by name (Print):

Signature:

Date:

Date:
(DD/MMM/YYYY)

Butterfield Bank (Cayman) Limited
P.O. Box 705
Grand Cayman KY1-1107
Cayman Islands

Dear New Accounts Department:

RE: APPLICATION FOR A YOUNG SAVER'S ACCOUNT

Please accept this letter as confirmation of the following:

1. I / we approve the opening of an account for my / our son / daughter, and that I / we accept all liability associated with said account.
2. I / we understand and accept the conditions attached to opening and operating such accounts. Specifically:
 - The account will be in the sole name of my / our son / daughter
 - My / our son / daughter will be the sole signatory on the account and if Online Banking service is requested for my / our child who is between the ages of 10 and 17, I / we will not be given access through my / our personal account/s
 - Closure of the account can be processed upon my / our child's sole authorisation after he / she turns 17
 - I/we are authorised to close the account prior to our son / daughter reaching 18 years old
 - If asked, the Bank will provide me / us with the information on the account, upon verification of my / our identity

Regards,

Signature

Name (print)

Signature

Name (print)

SIGNATURE CARDBanking Services

INFORMATIONAccount name(s)
(To be typed or printed):Client
number:

SIGNATURE SPECIMENS

Name (1):

Signature (1):

Name (2):

Signature (2):

Name (3):

Signature (3):

Name (4):

Signature (4):

Other:

COMMENTS FOR BANK USE ONLY

Date: (DD/MMM/YYYY)

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Date: [Redacted]
(DD/MMM/YYYY)

Butterfield Bank (Cayman) Limited
P.O. Box 705
Grand Cayman KY1-1107
Cayman Islands

CONFIRMATION OF PHYSICAL ADDRESS

Name of [Redacted] Tenant / [Redacted] Spouse / [Redacted] Child: [Redacted]

Name of [Redacted] Landlord / [Redacted] Spouse / [Redacted] Parent: [Redacted]

Dear New Accounts Department:

Please accept this letter of confirmation that the above mentioned person, presently resides at,
[Redacted]
Grand Cayman, Cayman Islands.

Regards,
[Redacted]

Landlord/Spouse or Parent's signature

[Redacted]

Landlord/Spouse or Parent's name (print)

[Redacted]

Landlord/Spouse or Parent's telephone number

*** Please note that this letter must be accompanied by proof of the above physical address by way of a utility bill (not older than 3 months) or a lease agreement.**

CLIENT INSTRUCTION

Retail Banking

To: The Manager,
Butterfield Bank (Cayman) Limited**Please complete in black ink.**

Dear Sir/Madam,

Reference account name: **Account number:** **Date:** (DD/MMM/YYYY) **Provide details of your request**

Please close ⁽⁴⁾ the account number referenced above.

⁽⁴⁾ Please note that any card(s) issued in relation to this account will be required to be cancelled. Please cut the relevant card(s) in half and return the halves with this form.

Note: Collect closed card, cut in half and attached to form for Card Services attention.

AUTHORISATION

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Authorised signature

Name (print)

Date (DD/MMM/YYYY)

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Authorised signature

Name (print)

Date (DD/MMM/YYYY)

Bank Use ONLYInstructions actioned by: Date: (DD/MMM/YYYY) Verified by: Date: (DD/MMM/YYYY)

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