

General			
In order to comply with Anti Money Laundering Regulations, this form is to be completed for all transactions > AED 40,000 and for all early settlement requests.			
Branch	<input type="checkbox"/> Abu Dhabi	<input type="checkbox"/> Dubai	
Customer Name			
Depositor Name		Agreement Number	
Depositor Address	PO Box:	Emirate:	
Telephone Number		Mobile Number	
Payer Identification Details			
Nationality			
ID Type	<input type="checkbox"/> PASSPORT	<input type="checkbox"/> UAE ID CARD	<input type="checkbox"/> LABOUR CARD
	<input type="checkbox"/> UAE DRIVING LICENCE	Other (specify below)	
<input type="checkbox"/> Clear and Valid Copy of Identification (both sides) attached to this form			
Transaction Details			
Amount	AED		
Mode of Payment	<input type="checkbox"/> Cash	<input type="checkbox"/> Transfer	<input type="checkbox"/> Cheque
	<input type="checkbox"/> Through Exchange House	Other (specify below)	
Copy of receipt/cheque or any transaction proof to be obtained from the customer.			
Purpose of Transaction	<input type="checkbox"/> Monthly Insallment	<input type="checkbox"/> Early Settlement	<input type="checkbox"/> Overdues
	Other (specify below)		
Source of Funds	<input type="checkbox"/> Salary	<input type="checkbox"/> Business	<input type="checkbox"/> Sale of Assets
	Other (specify below)		
Declaration			
I hereby certify that I am the lawful owner of the above stated funds. I also certify that the money has not been obtained through any transaction connected with money laundering.			
Customer Signature		Date	
Staff Name		Date	