



የሂሳብ ዓይነት / Type of Account

Saving Accounts/የቁጠራሂሳቦች		Current Accounts/ተንቀሳቃሽሂሳቦች		FCY Accounts/ በወጭ አገር ገንዘብ የሚከፈሉ ቴሂሳቦች			Fixed Time Deposit Contracts/የግዜ ገደብ ተቀማጭ ሂሳብ	
<input type="checkbox"/>	Ordinary/መደበኛ	<input type="checkbox"/>	Ordinary/መደበኛ	<input type="checkbox"/>	NRT FCY/ ኤንአርቲሂሳብ		<input type="checkbox"/>	Birr/የብር ሂሳብ
<input type="checkbox"/>	Womens/የሴቶች	<input type="checkbox"/>	Special /ልዩ	<input type="checkbox"/>	NRT Birr/ኤንአርቲ የብር ሂሳብ		<input type="checkbox"/>	FCY/የወጭ ገንዘብ ሂሳብ
<input type="checkbox"/>	Youth/የወጣቶች	<input type="checkbox"/>	Other/ሌላ _____	<input type="checkbox"/>	NRNT//ኤንአርኤንቲ የብር ሂሳብ			
<input type="checkbox"/>	Teen-Youth/የታዳጊ ወጣቶች	<input type="checkbox"/>		Other/ሌላ _____	<input type="checkbox"/>	Retention A & B/ራቴንሽን		
<input type="checkbox"/>	Educational /የትምህርት	<input type="checkbox"/>	Other/ሌላ _____		<input type="checkbox"/>	Diaspora/ዲያስፖራ		
<input type="checkbox"/>	Minor/ለአቅመ አዳም/ሄዋን ያልደረሰ/ች	<input type="checkbox"/>		Other/ሌላ _____	<input type="checkbox"/>	Other/ሌላ _____		
<input type="checkbox"/>	Mortgage/የቤቶች ቁጠራ	<input type="checkbox"/>	Other/ሌላ _____		Currency Type			
<input type="checkbox"/>	Pension/የጠረቃ	<input type="checkbox"/>		Other/ሌላ _____	USD	GBP	EURO	
<input type="checkbox"/>	Other/ሌላ _____	<input type="checkbox"/>	Other/ሌላ _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		Other/ሌላ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



በኢትዮጵያንግድባንክቅርንጫፎችሌላሂሳብአሎዎት?

Do you have any account with any branch of CBE? አዎ/Yes

የለኝም/No

መልስዎአዎከሆነየሂሳብቁጥሮችንይዘርዝሩ

IF Yes, Please list the account(s)

- 1. _____ 4. _____
- 2. _____ 5. _____
- 3. _____ 6. _____

የደንበኛመለያቁጥር/Customer ID No.		የሂሳብቁጥር/Account No.	
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1. የማንነት መግለጫ/Proof of Identity

ማእረግ/Title		የትምህርት ደረጃ/Educational qualification		የእናት ሙሉ ስም/Mother's full name	
ስም/Name		የአባት ስም/Father's name		የአያት ስም/Grand Father's Name	
ፆታ/Sex		የትውልድ ቀን/Date of Birth		ዓ.ም./Year	
የትውልድ ስፍራ/Place of Birth		የጋብቻ ሁኔታ/Marital Status			
ዜግነት/Nationality		የደም አይነት/Blood Type			
የአይን ቀለም/Eye color	ጥቁር/Black		ቁመት/Height	ረጅም/Tall	
	ቡኒ/Brown			ልክኛ/Medium	
	አረንጓዴ/Green			አጭር/Short	
	ሌላ/Other				

2. የመኖር ያድራሻ መረጃ/Proof of Address

ክልል/ከተማ አስተዳደር/Region/City Administration		ስልክ ቁጥር/Telephone Number-Residence (if any) (Optional)	
ዞን/Zone		ተንቀሳቃሽ ስልክ ቁጥር/Mobile number	
ክፍለ ከተማ/Sub-City		ስልክ ቁጥር የቢሮ (ካለ)/Telephone Number-Office (If any) (Optional)	
ወረዳ/ቀበሌ/Woreda/kebele		ኢሜል አድራሻ (ካለ) /e-mail address (If any) (Optional)	
የቤት ቁጥር/House Number		ፋክስ ቁጥር (ካለ)/Fax Number (If any) (Optional)	

3. የመታወቂያ ዝርዝር መረጃ/Document details

የመታወቂያ አይነት/Document type		አገልግሎት የሚያበቃበት ቀን/Expiry date	
የመታወቂያ ቁጥር/ID Number			
መታወቂያ የሰጠው አካል/Issued By			
መታወቂያ የተሰጠበት ቀን/Issued Date			

4. የህጋዊ ተወካይ መረጃ/ Legal Delegate Information (በውክልና ለሚከፈት ሂሳብ/For Legal Deligates)

ስም/ Name		የአባት ስም/ Father's name		የአያት ስም/ Grand Father's Name	
ክልል/ከተማ አስተዳደር/Region/City Administration			ስልክ ቁጥር/የመኖር ቦታ/Telephone Number-Residence		
ዞን/Zone			ተንቀሳቃሽ ስልክ ቁጥር/Mobile number		
ክፍለ ከተማ/Sub-City			ስልክ ቁጥር/የቢሮ/Telephone Number- Office (Optional)		
ወረዳ/ቀበሌ/Woreda/kebele			ኢሜል አድራሻ/e-mail address if any (Optional)		
የቤት ቁጥር/House Number			ፋክስ ቁጥር/Fax Number if any (Optional)		
መታወቂያ /ፓስፖርት ቁጥር/ID or Passport Number			የመታወቂያ አይነት/ID Card type		
መታወቂያ የሰጠው አካል/Issued By			መታወቂያ የተሰጠበት ቀን/Issue d Date		
አገልግሎት የሚያበቃበት ቀን/Expiry date			ውክልና የተሰጠበት ቀን/Legal Delegation Issued date		
የህጋዊ ውክልና ቁጥር/Legal Delegation Number					

5. የመኖሪያ መረጃ/Residential details

5.1. Residence Status

5.2. የመኖሪያ ቤት አይነት/Residence house Type

የግል መኖሪያ ቤት/house holder(optional)		ቪላ/Villa	
የኪራይ መኖሪያ ቤት/Rented house	ከኪራይ ቤት አስተዳደር ኪራይ የተገኘ/R ented from rented house adminstration	አፓርታማ/Appartment	
	ከቀበሌ በኪራይ የተገኘ/Rented from Kebele	ኮንዶሚኒየም/Condominium	
	የገለሰ በኪራይ ቤት/Rented from Private	ሌላ Other	
የቤተሰብ መኖሪያ ቤት/Living with parents			

6. የገቢ መግለጫ/Financial details

የስራ አይነት/Business Type		በግል ስራ-ከተሰማሩ የሚሰሩት የሰራ አይ ነት/Type of your business if you are self employed	
የሚሰሩበት ስም/Name of Employer		የሚሰሩት በራስ ስራ ድርጅት ከሆነ አባክዎ ንደርጁት ያስጠቁ/Please mention your private business organization	
የመ/ቤተ/የስራ መስክ/Busines sector of the employer		የግብር ከፋይ መለያ ቁጥር/TIN Number	
አመታዊ /ወር ሃዋ/የቀን የገቢ መጠን/Annual/Mont hly/Daily Income		የንግድ ልዩ ልዩ ቁጥር (ካለ) /trade licence number (If any) (Optional)	
የቅጥር ዘመን/Employment Date		ሌላ ገቢ ካለ ግለጽ/Other income if any	
የስራ ድርጅት/ሃላፊነት/Position			

7. ሌሎች መረጃዎች/Other details

7.1. የፖለቲካ ሥልጣን ላላቸው ደንበኞች (በቻ)/Politically Exposed Person (For PEP only)

የፖለቲካ ሥልጣን ተገኝተዎት? /Are you politically exposed person? አዎ/Yes አይደለም/No

መልስዎ አዎ ከሆነ አባክዎ ቀጥሎ የሌሎችን ይሙሉ /If your response is Yes, please fill the following

የሚሰሩበት ስም/ቤት ስም/Name of your organization		
በም/ቤተሰብ ውስጥ የሥራ ማዕከል/Position		
የልጆች ስም/Name of Children	1.	
	2.	
	3.	

ሂሳብ አንዲከፈት ያፀደቀው ሃላፊ ስም እና ፊርማ (የፖለቲካ ተጋላጭ ለሆኑ ደንበኞች ብቻ)
Full name and signature of approver (For PEP customer only)

ስም/Name _____ ፊርማ/Signature _____

7.2. የፖለቲካ ሥልጣን ተገኝ ሚስት ወይንም ጋራ አባላት/Close Family Members of the PEP

የእናት ስም/Mother's full name	
የትዳር ጓደኛ ስም/Full name of spouse	
ሌሎች/Others	

7.3. የአሜሪካ ዜጋ ወይንም የወጪ ነዎት? / Are You a US Person? አዎ/Yes አይደለም/No

መልስዎ አዎ ከሆነ አባክዎትን ፎርም W9 ይሙሉ /If Your answer is Yes, Please fill form W9

የግብር ከፋይ መለያ ቁጥር (የአሜሪካ ተነ) /TIN Number (US TIN)

8. ሌሎች አማራጭ የክፍያ መንገዶች/Other alternative payment channels

ከታችከተሉት አማራጭ የክፍያ መንገዶች አንዱን ወይንም ሌሎችን ይጠቀሙ ለመረጡ ላይ ጥቅም ያላቸውን ፎርም ይሙሉ Put "X" in the box, if you need one or more alternative payment channels.


የክፍያ ካርድ/ Payment Card	
ሞባይል ባንክ/ Mobile Banking	
ኢንተርኔት ባንክ/ Internet Banking	
የሲ.ቢ.ቢ. ባንክ/ CBE BIRR Customer	

የቁጠባዊ ብተርያስ ስፈልግዎታል? አዎ/አይስፈልግዎትም /Do you need a passbook? (YES/NO)

ቀን/Date: _____ የአመልካች/ች ፊርማ/Signature of Applicant(s): _____

ለቢሮ አገልግሎት ብቻ /FOR OFFICE USE ONLY

ደንበኛው የሚኖርበት የስጋት መጠን Customer Risk Grade ከፍተኛ/High <input type="checkbox"/> መካከለኛ/Medium <input type="checkbox"/> ዝቅተኛ/Low <input type="checkbox"/>	ቀጣይ ከዋይሲ የሚሰራበት ቀን/Date of Next KYC Update _____
We ascertain that the mentioned applicant does not exist in any of the sanctions lists.	
ሂሳብ ን የከፈተው/ች ወ.ስም እና ፊርማ NAME AND SIGNATURE OF THE PERFORMER	
ሂሳብ ን ያረጋገጠው/ች ወ.ስም እና ፊርማ NAME AND SIGNATURE OF THE AUTHORIZER	
ቀን/Date	

የኢትዮጵያንግድባንክ Commercial Bank of Ethiopia		 የፊርማና መ-ና መቀበያ Signatory Specimen	
የሂሳብ ስም/Account Name			
የሂሳብ ቁጥር/Account Number (s)			
የፊርማው ስም/Name of the signatory	ስም/First Name:	የአባት ስም/Second Name <input type="checkbox"/>	የአያት ስም/Last Name:
ክልል ወይም ከተማ አስተዳደር/Region or City administration		የመታወቂያ ዓይነት/Document Type	
ከ/ከተማ/Sub City		መታወቂያ ቁጥር/ID/Passport No.	
ወረዳ/ቀበሌ/Wereda		የሰጠው አካል/Issued By	
የቤት ቁጥር/House No.		የተሰጠበት ቀን/Issued Date	
ኢሜይል/e-mail		የሚያበቃበት ቀን/Expiry date	
ፖ.ሣ.ቁ/P.O.Box			
የተንቀሳቃሽ ስልክ/Mobile no.			
የቢሮ የመስመር ስልክ/Office Telephone			
የፊርማ መ-ና/Specimen Signature	_____		አንድ ጉርድ ፎቶ ማራፍ/Passport size photo (if any)

የፈራሚው ስም/Name of the signatory	ስም/First Name:	የአባት ስም/Second Name:	የአያት ስም/Last Name:
ክልል ወይም ከተማ አስተዳደር/Region or City administration		የመታወቂያው አይነት/Document Type	
ከ/ከተማ/Sub City		መታወቂያ ቁጥር/ID/Passport No.	
ወረዳ/ቀበሌ/Wereda		የሰጠው አካል/Issued By	
የቤት ቁጥር/House No.		የተሰጠበት ቀን/Issued Date	
ኢሜይል/e-mail		የሚያበቃበት ቀን/Expiry date	
ፖ.ሣ.ቁ/P.O.Box			
የተንቀሳቃሽ ስልክ/Mobile no.			
የቢሮ የመስመር ስልክ/Office Telephone			
የፈራሚ ምሳ/Specimen Signature			አንድ ጉርድ ፎቶ ግራፍ/Passport size photo (if any)

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give Form to the
 requester. Do not
 send to the IRS.**

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC
 C Corporation
 S Corporation
 Partnership
 Trust/estate

Limited liability Company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ others _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions)

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

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Social security number

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Or

Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and I acknowledge that the information given is genuine and legitimate;
2. I authorize the bank to give my financial information to the U.S. IRS when so requested to it.
3. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
4. I am a U.S. citizen or other U.S. person ; and
5. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

For further clarification please visit www.irs.gov/FormW9

**Sign
 Here**

Signature of
 U.S. person ▶

Date ▶