





Personal Client Self-Certification

Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)

<u> </u>	<u> </u>				
For ATB Financial Use (Client BP Number):					
Client Name:					
Date of Birth:					
Permanent Residence (Physical Address including country):					
Canadian Social Insurance Number(SIN) ¹					
¹ You only need to provide your Canadian Social Ins	surance Number if you are also a tax resident of a country other				
than Canada. If you are solely a tax resident of Car					
Section A: Declaration of your Tax Res	idence				
Tick (✓) all options that apply.					
\square I am a tax resident of Canada (Including ind minors).	ividuals generally not subject to taxation, such as				
\square I am a tax resident of the United States (US)).				
If selected, provide your Taxpayer Ider	ntification Number (TIN) from the US:				
□ I am a citizen of the US.					
If selected, provide your TIN from the US:					
\square I am a tax resident of a jurisdiction other tha	an Canada or the United States.				
If selected, indicate below your jurisdic Identification Number (TIN)s or functio	ctions of tax residence and the related Taxpayer and equivalent.				
If you do not have a TIN or functional e	equivalent for a specific jurisdiction, select a reason below:				
Reason 1: I will apply or have a	oplied for a TIN but have not yet received it.				
Reason 2: My jurisdiction of tax	residence does not issue TINs to its residents.				
Reason 3: Other reason: Please specify in the reason field in the table below.					

Form 2967 (Rev. 08/25)





Country of Tax Residence	Taxpayer Identification Number (TIN)	Reason (if no TIN)		

Section B: Optional certification for snowbirds and other temporary visitors to the US

☐ Please check if you agree with **all** of the following statements

- I certify that I am a resident of Canada.
- I further certify that any US address, US telephone number, or standing instructions to transfer funds to an account maintained in the US associated with this account exists or will arise only for the purpose of temporary visits that I make to the US while I remain a resident of Canada and not, at any time, because I am a resident of the US for tax purposes or a US citizen.
- I agree to notify ATB Financial if events cause this certification to become false or misleading.

Section C: Your declaration

I declare that the information provided on this form is, to the best of my knowledge and belief, correct and complete. I will notify ATB Financial within 30 days of any change in circumstances that cause the information on this form to become incomplete or inaccurate.

Name:	 	 	
Signature:	 	 	
Date:	 -		

For further details on FATCA and CRS, refer to the Government of Canada website:

https://www.canada.ca/en/revenue-agency/services/tax/international-non-residents/enhanced-financial-account-information-reporting/information-individuals-holding-accounts-canadian-financial-institutions.html

https://www.canada.ca/content/dam/cra-arc/formspubs/pbg/rc518/rc518-24e.pdf