

Data Information for reporting to the tax authorities on the purchase of a Savings Insurance Policy

Dear client

Please complete the questionnaire and sign to confirm the Information below

First name	Surname	Passport Number	Agent name and number
Full address in Israel:			

Information for reporting to United States tax authorities according to FATCA requirements

Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a resident of the U.S. tax purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes to any of the questions above, please provide a full W9 form, including details of your federal U.S. tax identification number (TIN)	
Were you born in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you are not a U.S. citizen, but you were born in the U.S., please provide a full W8-ben form and a certificate attesting to the waiver of the U.S. citizenship

Information for reporting to tax authorities according to CRS requirements

Do you have a tax residency in a foreign country other than the United State?

(A person is a resident for tax purposes if according to the tax laws of that country he is considered a tax resident in it)

Yes No

If you answered 'Yes', please answer the following questions.

If there are several countries of residence, please fill the questions for each of the relevant countries

countries in which you have a tax residency	Tax Identification Number (TIN)*	CITY	STREET	NUMBER	ZIP CODE

* If there is no TIN, please specify a reason: _____

I confirm that in case of a change to any of my above answers, regarding my tax residency in a foreign country and / or regarding my citizenship, or any other relevant matter, I will update Clal Insurance and Finance group within 30 days.

I hereby declare that to the best of my knowledge all the information I have provided is complete and correct

Date: _____ Full name: _____ Signature ✕ _____