

Date: [Insert Date]

To:

[Name of Financial Institution]

[Address of Financial Institution]

Subject: FATCA Status Declaration - United States Person

I, [Your Full Name], hereby confirm my tax residency status for the purpose of the Foreign Account Tax Compliance Act (FATCA).

1. U.S. Person Status

I confirm that I am a "United States Person" as defined for U.S. federal tax purposes. This status is based on the following (check applicable):

- I am a citizen of the United States.
- I am a lawful permanent resident of the United States (Green Card holder).
- I meet the Substantial Presence Test for tax purposes.

2. Taxpayer Identification Number (TIN)

My U.S. Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) is:
[Insert SSN or ITIN]

3. Documentation

I have attached a completed and signed IRS Form W-9 (Request for Taxpayer Identification Number and Certification) to this letter.

4. Declaration

I certify that the information provided in this letter and the attached Form W-9 is true, correct, and complete. I authorize [Name of Financial Institution] to provide this information and any reportable account details to the U.S. Internal Revenue Service (IRS) or local tax authorities as required by law. I undertake to notify the financial institution within 30 days if there is any change in my circumstances that affects my tax residency status.

Sincerely,

(Signature)

[Your Full Name]

[Your Current Address]

[Your Phone Number]

[Your Email Address]