

ACCOUNT OPENING MANDATE

SOCIETIES/ CLUBS/ ASSOCIATIONS

The Manager,
Amãna Bank,
_____ Branch

Date

Account No.

We request you to open an account as per details given below.

Note: Please write in clear block CAPITALS. Mark (✓) where applicable and strike off sections that are not applicable / empty and sign after reading the General Terms and Conditions of which this application will form an integral part.

TYPE OF ACCOUNT

- Society Club Association Other _____ (Specify)
 Current Savings Term Investment Other _____ (Specify)

DETAILS OF BUSINESS

Name of the Institution :

Registered Office Address :

Correspondence Address :
(If different from above)

Nature of Activity :

Registration No. :

Date of Registration :

Tax File / TIN No. :

Telephone No. :

Office

Contact Mobile

Fax No. :

E-mail Address :

Website :

FOR TERM INVESTMENT ONLY

Investment Period : 1 Month 3 Months 6 Months 12 Months Other _____ (Specify)

Profit Payment : Paid at Maturity (for 1 / 3 / 6 / 12 / ___ month/s deposits) Paid Monthly (for 12 months deposits)

Please credit/remittance profits at maturity/monthly to :

Name of Bank and Branch

Account No.

Account Name

If specific instructions are not received by you regarding the re-investment or return of the monies prior to the date of maturity, you are hereby authorised to re-invest the said monies for a similar period on Terms and Conditions prevailing at the time of maturity of the Term Investment.

NOTE: Profits cannot be credited/remitted to any account other than those in the Name of the Society / Association / Club

SOURCE OF FUNDS

Initial Deposit Amount :

Source of Funds :

Mode of Deposit : Cash Cheque No. _____

Debit our Account No. _____

Signature of Account Holder/s

CORRESPONDENCE

Statement Frequency

for Current Account Monthly Quarterly Bi Annually

for Savings Account Quarterly Bi Annually

Mode of Dispatch

by Post by E-mail (Please fill E-Statement Registration Form) Collect at branch

EXISTING ACCOUNTS MAINTAINED WITH AMĀNA BANK

Account No.	Account Type	Name of Account Branch
Account No.	Account Type	Name of Account Branch

ACCOUNTS HELD IN OTHER BANKS

Account Type	Name of Bank	Branch
Account Type	Name of Bank	Branch

INSTRUCTIONS TO BANK

We authorise the Bank to act on instructions given by us by Facsimile message/ E-mail or other similar medium

Yes - Duly completed Indemnity form is attached No

CHEQUE BOOK REQUISITION (for Current Accounts only)

Please issue us a cheque book with : 25 Leaves 50 Leaves 100 Leaves

OPERATING INSTRUCTIONS

Signature Requirement :
(Specify)

We confirm that the details given above are correct and hereby agree and undertake to comply with the Rules, Terms and Conditions of Amāna Bank PLC for the operation of the account/s.
We hereby agree to notify Amāna Bank Limited immediately in writing of any change in any of the foregoing particulars.

DETAILS OF OFFICE BEARERS/ COMMITTEE MEMBERS

Full Name : _____ Address : _____ _____ NIC No. : _____ Official Position : _____ Tel No. : _____ E-mail : _____	Signature (Under Rubber Stamp)
Full Name : _____ Address : _____ _____ NIC No. : _____ Official Position : _____ Tel No. : _____ E-mail : _____	Signature (Under Rubber Stamp)
Full Name : _____ Address : _____ _____ NIC No. : _____ Official Position : _____ Tel No. : _____ E-mail : _____	Signature (Under Rubber Stamp)
Full Name : _____ Address : _____ _____ NIC No. : _____ Official Position : _____ Tel No. : _____ E-mail : _____	Signature (Under Rubber Stamp)

RESOLUTION

To: Amāna Bank PLC

At the meeting of the Committee of _____ (hereafter called 'the Institution') duly held at _____ on the ____ / ____ / 20__ the following resolutions were passed.

1. That a/the Current / Savings / Term Investment Account be opened/continued* with Amāna Bank PLC and any other account or accounts as may be subsequently directed by any _____ of the members of the Committee or by _____.
2. That the Bank be instructed to honour and comply with all cheques, promissory notes and other orders drawn, and all bills accepted on behalf of the Society/Club/Association, whether the current account be in credit or overdrawn, to comply with all directions given for or in respect of any account or accounts of any kind whatsoever on behalf of the Society/Club/Association, and to accept and act upon all receipts for monies deposited with or owing by the Bank on any account or accounts in the name of the Society/Club/Association provided that such cheques, promissory notes, orders, bills, directions or receipts are signed by any _____ of the members of the Committee or by _____ and such signature/s shall be sufficient authority and bind the Society/Club/Association in all transactions between the Bank and the Society/Club/Association.
3. That any _____ of the members of the Committee or _____ be authorised to withdraw and deal with any of the Society's/ Club's/Association's securities or properties or documents of title thereto which may be deposited with the Bank for safe custody or in safe deposit from time to time, whether by way of security or otherwise.
4. That any _____ of the members of the Committee or _____ be authorised to arrange with the Bank for obtaining any financial assistance to the Society/Club/Association including the issue of guarantees by the Bank from time to time as required, and sign on behalf of the Society/Club/Association form of deposit and withdrawal, Memorandum of Deposit, Letter of Trust, Mortgage, Hypothecation and Pledge relating to any securities and/or documents of title relating thereto to secure the said advances, obligations, undertakings, instructions, guarantees, indemnities, counter indemnities, and other documents which may be required by you in connection with the aforesaid facilities.
5. That in the absence of any directions to the contrary, all accounts subsequently opened shall be operated and dealt with upon the terms set out above insofar as the same may be applicable.
6. That the Bank be forthwith supplied with a copy of the Rules of the Society/Club/Association and of each amendment thereto as soon as the same has been made.
7. That our relationship with the Bank shall be subject to the Bank's 'General Terms and Conditions' and in confirmation thereof a copy of same has been duly signed by our authorised signatories.

I hereby certify that the foregoing are true copies of the Resolutions entered in the Minute Book and are in accordance with the Rules of the Society/Club/Association.

Dated this _____ day of _____ 20__

Chairman of the Meeting

Secretary of the Society/Club/Association

N.B. ALL AMENDMENTS MUST BE INITIALLED BY THE CHAIRMAN OF THE MEETING

INTRODUCTION (for Current Accounts only)

I certify that I am well acquainted with the above applicants for the past _____ years and I confirm and further certify that the above applicant is suitable to open and maintain a current account with Amāna Bank.

I provide this introduction as;

an Account Holder of Amāna Bank and my account number is _____

a Company Director of _____

a person holding a senior position in a government/ semi government establishment named _____

Name _____ NIC/Passport/DL No. _____

Address _____

Designation _____ Tel No. : Res _____ Off _____ Mob _____

Signature

Date _____

FOR BANK USE ONLY

Documents to be obtained

- | | |
|--|--|
| Completed Account opening mandate <input type="checkbox"/> | Certified copy of the Registration Certificate <input type="checkbox"/> |
| Certified copy of Rules / Constitution <input type="checkbox"/> | Copies of the National Identity Card/ PP/ DL <input type="checkbox"/> |
| Certified copy of the extracts of the meeting minutes where Office Bearers were elected <input type="checkbox"/> | Copy of the minutes of the meeting where it was resolved to open an account with Amāna Bank <input type="checkbox"/> |
| Specimen Signature Card <input type="checkbox"/> | KYC Form <input type="checkbox"/> |
| Copy of the Address verification document <input type="checkbox"/> | Other _____ <input type="checkbox"/> |
- _____ (Specify document submitted)

Account Canvassed by	Employee Name	Employee No.	Branch
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<p>For Term Investment Account only</p> <p>Term Investment Certificate No. : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/></p> <p>Certificate Issued on : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/></p> <p>Investment Txn No. : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/></p>	<p>Priority : <input type="checkbox"/> Ordinary <input type="checkbox"/> Prime <input type="checkbox"/> VIP</p> <p>CIF Type : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> Economic Sector : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/></p> <p>Division : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> Department : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/></p> <p>Account Type : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/></p>
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for Branch Approval

Account Opened on :

_____	_____	_____
Account Opened by	Authorised Officer	Audited by

for Central Operations

Received Date :	CIF Completed <input type="checkbox"/>	Documents Checked <input type="checkbox"/>	Standing Orders Setup <input type="checkbox"/>
<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	Mandates Completed <input type="checkbox"/>	Signature Scanned <input type="checkbox"/>	Statements Setup <input type="checkbox"/>

_____	_____	_____	_____
Data Input by	Authorised Officer	Authorised Officer	Audited by