FOMR C ACCOUNT OPENING FORM												
		LIMITED										
Date D D M	мм үүү	Y		Account	No							
				Account	110.							7
The Manager,	Bank											
				CIF No.					Ma	anager	s Intl.	
	Sir/Madam, Directors request you to open	n an account in the nar	ne of the under	mentione	d Comp	any.						
	e of the Companystered office situated at											
100810												
Yours	s Faithfully,											
Comp	pany Secretary											
Name	e of the Company & Comp	any Seal										
Board	d Resolution (To be filled i	f a separate resolution	is not given)									
	ereby certify that the follow											
of RESC the hereb Comp	20and has DLVED : That a banking ac Bank at th by empowered to honour cho pany	s been duly recorded in count for neir eques, bills of exchang	n the minute bo ge, promissory i	ook of the	said Co wn, sign	mpany 	: Lin Branch epted, or	mited be and that made o	opened at the Ba n behalf	with ink be of the	and is	
-												
	countersigned by the secreta y accounts or transactions o	ry , or otherwise as ma	y be required)	and to act	t on any	instruc	tions giv	nsert an en by th	y two of e person	the D is so at	uthorized	
Chair	rman						Se	ecretary				
Currency of Account												
		□ By Cash	□ By che	eque	<u>т</u> т				, , , , , , , , , , , , , , , , , , , 	_		
USD Others		Deposit Amount										
Type of Business Acc	count											
	y Company Limited Liability Company Decify											
Type of Account Req	luired			State	ment							
□ Savings A/c □ Current A/c □ Fixed/Call D □ Money Marł □ Treasury Bil □ NRFC □ SIERA □ Others pleas	Deposit A/c ket A/c ll/Bonds		[□ Daily □ Weekly □ Other (1								
	*		•									

PART A – Customer Informatio	n	<u>.</u>					
Name Of Business Entity :		Registered	Address				
Registration Number	Date of Incorporation						
-	_						
Correspondence Address (Business/Factory ddress)	address if different to	Date of Co	d Date of Commencement of Business				
Nature of Business		Purpose of	Business				
bsidiary/Associate Are you a Subsidiary/Associate of another o	organization? Yes/No						
 a) Subsidiary of (i.e. Owned more than 50%) b) Associate of (i.e. Owned 20% - 50%) 							
Is the Principal/Subsidiary listed in the local	/foreign stock exchange?	Yes/No (If answered "ye	es" please give details)			
Do you have any Subsidiaries/Associates? Y	(es/No (If answered "yes	" please give details)					
Details							
PART B Financial Information							
<i>Note: If a new company, please complete be</i> Are the audited financial statements for th							
Description (LKR'000)	Current	Year	Pr	Previous Year			
Annual sales turnover:							
Net Profit/Loss							
Paid-up capital + accumulated Profits							
ax Declaration	I						
he following is a mandatory declaration which	is required to be complete	ed by all under the Inland F	Revenue Act No.28 of	1979			
Income Tax File No.							
	information						
PART C Director/Shareholder	ingormanon	% of Shares Held	Contact No.	Address			
	National Identity Card	70 OI Shales Helu	Contact No.	Address			
Directors and Major Share Holders (More	National Identity Card Number/other identification number						
Directors and Major Share Holders (More							
Directors and Major Share Holders (More	Number/other						
Directors and Major Share Holders (More	Number/other						
Directors and Major Share Holders (More	Number/other						
PART C Director/Shareholder Directors and Major Share Holders (More than 10% Voting Shares) *	Number/other						

information as required by Rules Prescribed in terms of Section 2(3) of the Financial Transactions Reporting Act No.6 of 2006.

PART D Information pertaining to Account usage

NIC No

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1. Anticipated Volumes :							
Expected/Usual average volumes of deposits into the account in Rupees per month							
□ Less than 500,000							
□ Above 500,000 upto 1,000,000							
□ Above 1,000,000 upto 2,000,000							
1 1 1	Above 2,000,000 upto 5,000,000						
Over 5,000,000 2. Assets owned by the Business /Organization							
Property/Premises	□ Investments						
□ Motor Vehicle	\Box Others (Specify)						
□ Financial Assets							
3. Source of Funds to the Account							
Business income	Donations (Local/Foreign)						
□ Investments □ Bank Facilities	□ Others (Specify)						
PART E – Verification							
For Bank Use Only Documents Submitted	Remarks						
Documents Submitted	Keinaiks						
□ Mandate							
Board Resolution							
Business Registration and Certificate of Incorporation							
(Form 2A, 2B, 2C, 2D or 2E as appropriate under the new Companies Act							
and Form 41 for Companies incorporated under the Old Act) Articles of Association							
□ Form 20							
BOI Agreement (If BOI approved Company)							
EDB approval Letter (<i>If approved by the EDB</i>)							
Certificate to Commence Business (<i>If public quoted business</i>)							
Latest Audited Accounts (If available) (Annex B)							
□ Individual information form completed by all Directors/Major Share Holders/Office bearers, signatories, administrators, members of the							
governing body or committee/Trustees, Settlers/Grantors and							
beneficiaries							
□ Introduction/Reference							
Introduced by Mandatan for Comment Accounts. For others and with based							
Introduced by (Mandatory for Current Accounts. For others on a risk based	approach at the discretion of the Branch Manager)						
I am played to introduce the above applicant/s to the	Pank for the nurness of opening an account I provide						
I am pleased to introduce the above applicant/s to theBank, for the purpose of opening an account. I provide this introduction as:							
□ 1. Account Holder of							
atBranch.							
2 . A Company Director of							
3 . A person holding a senior position in a Government Establishment named							
□ 4. Any other (Pl Specify)							
Telephone No	Occupation						
4	•						
Date	Account No						

I	Bank use Only				
Product Code		Introducing Signature verified by			
Statement Code		Input by			
		Authorised by			

Signature