

FORM E

**ACCOUNT OPENING FORM
MISCELLANEOUS ACCOUNT**

Date

	D	D		M	M		Y	Y	Y	Y

Account No.

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The Manager,
..... Bank
.....

CIF No.

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Manager's Intl.

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Dear Sir,
I/We desire to open a current account in the name
of.....
.....

With your Bank, and forward herewith the sum of Rs.
(Rupees.....)
For credit thereof. I/We request you to pay all cheques purporting to be drawn on behalf of
.....
and to debit the same to the said account, whether the same be in credit or otherwise, provide the said cheques are signed
by.....
.....

specimens of whose signature/s is/are appended, and you will be advised in writing of all changes which may take place in the same
from time to time. These instructions shall remain in force until the receipt by you of a notice rescinding the same. I/We understand
that any false declaration will entitle you to close my/our account without notice to me/us.

On behalf of the
I/We agree to comply with and be bound by the Bank's rules for the conduct of such accounts.

Mr.....will sign thus.....
Mr.....will sign thus.....
Mr.....will sign thus.....
Mr.....will sign thus.....
Mr.....will sign thus.....
Mr.....will sign thus.....

Type of Business Account

- Clubs and Societies
- Non-governmental Organization/Charity(NGO)
- Trade Union
- Cooperative Societies
- Executors & Administrators Account
- Trust Account
- Non-Government School Account
- Others (Please Specify).....

Type of Account Required

Statement

<ul style="list-style-type: none"> <input type="checkbox"/> Savings A/c <input type="checkbox"/> Current A/c <input type="checkbox"/> Fixed/Call Deposit A/c <input type="checkbox"/> Money Market A/c <input type="checkbox"/> Treasury Bill/Bonds <input type="checkbox"/> NRFC <input type="checkbox"/> SIERA <input type="checkbox"/> Others please specify..... 	<ul style="list-style-type: none"> <input type="checkbox"/> Daily <input type="checkbox"/> Weekly/Monthly <input type="checkbox"/> Other..... (Specify)
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PART A – Customer Information

Name of Entity :	Registered Address
Registration Number	Date of Commencement of Business
Nature of Activities	Purpose of Business
(Clubs/Societies/Charities/Associations and Non Governmental Organizations should provide details of the objectives, scope and areas of activity)	

Subsidiary/Associate

1. Do you operate under parent subsidiaries/Associates? Yes/No

Details

PART B Financial Information

Note: If a new establishment complete below with proposed data under "Current Year"

Are the audited financial statements for the last two years available? Yes No

Description (LKR'000)	Current Year	Previous Year
Annual Turnover:		

Tax Declaration

The following is a mandatory declaration which is required to be completed by all under the Inland Revenue Act No.28 of 1979

Income Tax File No.

PART C *Director/Shareholders/Office Bearers/Trustees Information

Details of Directors, Shareholders, Office Bearers, Trustees,(Others (Please specify)	National Identity Card Number/ Valid Pass Port No	Contact No.	Address

Note:

* In the case of Clubs/Societies/Charities/Associations and Non governmental Organisations, please provide details of Office bearers, signatories, administrators, members of the governing body or committee or any other person who has control or influence over the operations of the entity.

In the case of Trust, nominee and fiduciary accounts details of all trustees, settlers/grantors and beneficiaries should be provided

All Directors/Office bearers/Authorised Personnels and Major Share Holders should complete the Individual Information Sheet (Annex B), in addition to providing the above information as required by Rules Prescribed in terms of Section 2(3) of the Financial Transactions Reporting Act No.6 of 2006. In the case of Clubs/societies/Charities/Associations and Non governmental Organisations two Officers should fill out the Individual Information Sheet (Annex B)

PART D Information pertaining to Account usage

1. Anticipated Volumes :

Expected/Usual average volumes of deposits into the account in Rupees per month

- Less than 500,000
- 500,000 to 1,000,000
- 1,000,000 to 2,000,000
- 2,000,000 to 5,000,000
- Over 5,000,000

2. Assets owned by the Business /Organization

- | | |
|--|---|
| <input type="checkbox"/> Property/Premises | <input type="checkbox"/> Investments |
| <input type="checkbox"/> Motor Vehicle | <input type="checkbox"/> Others (Specify) |
| <input type="checkbox"/> Financial Assets | |

3. Source of Funds to the Account

- | | |
|--|--|
| <input type="checkbox"/> Business income | <input type="checkbox"/> Donations (Local/Foreign) |
| <input type="checkbox"/> Investments | <input type="checkbox"/> Others (Specify) |
| <input type="checkbox"/> Bank Facilities | |

PART E – Verification

For Bank Use Only

Documents Submitted	Remarks
<input type="checkbox"/> Mandate <input type="checkbox"/> Any Resolution if available <input type="checkbox"/> Business Registration/Registration by Ministry etc. <input type="checkbox"/> Latest Audited Accounts (If available) <input type="checkbox"/> Constitution/Charters etc (If Club, Society, Charity, Association or NGO) <input type="checkbox"/> Individual Information Sheet completed by all Directors/Major Share Holders/Office bearers, signatories, administrators, members of the governing body or committee/Trustees, Settlers/Grantors and beneficiaries <input type="checkbox"/> Trust Deed (if Trust) <input type="checkbox"/> Introduction/Reference	

Introduced by (Mandatory for Current Accounts. For others on a risk based approach at the discretion of the Branch Manager)

I am pleased to introduce the above applicant/s to the Bank, for the purpose of opening an account. I provide this introduction as:

- 1. Account Holder ofBank .My Account Number is at.....Branch.
- 2. A Company Director of
- 3. A person holding a senior position in a Government Establishment named
- 4. Any other (PI Specify).....

Telephone No Occupation.....

Date Account No.....

NIC No Signature

Bank use Only

Product Code

Introducing Signature verified by

Statement Code

Input by

Authorised by