# **NATSAVE**

### **Corporate/Business Account Opening Form**

| PART A         Branch         Existing Accounts 10         20         21         Accounts Required (T/ck where applicable)         Business Account         Corporate Account(specify)         Currency         Name of Company:         Contact Number         E-mail address         2) Services Required (T/ck where applicable)         Debit card       Internet Banking         Monthend e-Statements       Mobile Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Others (specify)       Others (specify)         4) Business Activities (T/ck where applicable)       Agriculture         Bcducation       NGO         MGO       Health       Real estate         Brancial and insurances services       Financial and insurances services         Art gallery       Tourism and hospitality       Information & Communication Technology         Construction and Housing       Germstione traders/Jewellers         Others (specify)       Estimated annual inflows/sales turnover         Purpose for the account       Source of wealth         Source of wealth       Mame of Firn/ Company         Name of Contact Person       Ad  |                                     |   |                        | Date            | D D   | MM         | YYYY        |
|---|-------------------------------------|---|------------------------|-----------------|-------|------------|-------------|
| Existing Accounts 1)       Company Name         1) Accounts Required ( <i>Tick where applicable</i> )         Business Account       Corporate Account(specify)         Currency       Napsa Employee No:         Name of Company.       Company Registration No         Contact Number       E-mail address         2) Services Required ( <i>Tick where applicable</i> )       Monthend e-Statements         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Guardian       Nacounts (Tick where applicable)         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Others (specify)       Others (specify)         4) Business Activities ( <i>Tick where applicable</i> )       Agriculture       Trading         Ant gallery       Tourism and hospitality       Information & Communication Technology       Construction and Housing         Gambiing or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders / Sewellers         Others (specify)       Sitemated annual inflows/sales turnover       Purpose for the account         Source of wealth       Purpose for the account       Purpose for the account         Source of we | PART A                              |   |                        |                 |       |            |             |
| Existing Accounts 11       Company Name         1) Accounts Required (Tick where applicable)         Business Account       Corporate Account(specify)         Currency       Napsa Employee No:         Name of Company:       Company Registration No         Contact Number       E-mail address         2) Services Required (Tick where applicable)       Debit card         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Guadation       Nacounts (Tick where applicable)         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Others (specify)       Manufacturing         Alguiness Activities (Tick where applicable)       Agriculture         At gallery       Tourism and hospitality         Information & Communication Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading         Cross boarder cash traders?       Germstone traders/isewellers         Others (specify)       Part B         Source of wealth       Part B         Part B       Source of wealth         Source of wealth       Address </td <td>Branch</td> <td></td> <td></td> <th></th> <td></td> <td></td> <td></td>   | Branch                              |   |                        |                 |       |            |             |
| 2) Accounts Required (Tick where applicable)         Business Account         Currency         Name of Company:         Company Registration No         Contact Number         E-mail address         2) Services Required (Tick where applicable)         Debit card         Internet Banking         Monthend e-Statements         Mobile Banking         3) Company Type         Sole Proprietor         Partnership         Limited Company         Others (specify)             4) Business Activities (Tick where applicable)         Agriculture       Trading         Manufacturing       Mining and quarrying         Education       NGO         MGD       Health         Real estate       Legal services         Argallery       Tourism and hospitality         Information & Comsunciation Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders         S) Financial Declaration*       Estimated annual inflows/sales turnover         Purpose for the account       Source of wealth       Source of wealth         Source of wealth       Address       Address   | Existing Accounts 1)                |   | Company Name           |                 |       |            |             |
| Business Account       Corporate Account(specify)         Currency       Napsa Employee No:       TPIN         Name of Company:       Company Registration No         Contact Number       E-mailaddress         2) Services Required (Tick where applicable)       Debit card         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Others (specify)       4) Business Activities (Tick where applicable)         Agriculture       Trading         Manufacturing       Mining and quarrying         Education       NGO         Health       Real estate       Legal services         Art gallery       Tourism and hospitality       Information &Communication Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders       Germstone traders/lewellers         Source of wealth   | 2)                                  |   |                        |                 |       |            |             |
| Currency       Napsa Employee No:       TPIN         Name of Company:       Company RegistrationNo         ContactNumber       E-mailaddress         2) Services Required (Tick where applicable)       Debit card         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         4) Business Activities (Tick where applicable)       Agriculture         Education       NGO         Health       Realestate         Education       NGO         Art gallery       Tourism and hospitality         Information & Construction and Housing       Germstone traders/Jewellers         Others (specify)   |                                     | ,, .                                    |                        |                 |       |            |             |
| Company       Company Registration No         Name of Company:       Company Registration No         Contact Number       E-mail address         2) Services Required (Tick where applicable)       Monthend e-Statements       Mobile Banking         3) Company Type       Sole Proprietor       Partnership       Limited Company         4) Business Activities (Tick where applicable)       Agriculture       Trading       Manufacturing         Education       NGO       Health       Realestate       Legal services       Financial and insurances services         Art gallery       Tourism and hospitality       Information & Communication Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders       Germstone traders/Jewellers         Others (specify)   | Business Account                    | Corporate Account( <i>specify</i> )     |                        |                 |       |            |             |
| Contact Number       E-mail address         2) Services Required (Tick where applicable)       Monthend e-Statements       Mobile Banking         3) Company Type       Sole Proprietor       Partnership       Limited Company       Others (specify)         4) Business Activities (Tick where applicable)       Agriculture       Trading       Manufacturing       Mining and quarrying         Education       NGO       Health       Realestate       Legal services       Financial and insurances services         Art gallery       Tourism and hospitality       Information & Communication Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders       Germstone traders/Jewellers         5) Financial Declaration*       Estimated annual inflows/sales turnover       Purpose for the account       Surce of wealth         PART B       6) References       Name of Contact Person       Name of Contact Person       Address         Address       Address       Address       Bank and Branch       Account Number       Elephone  | Currency                            | Napsa Employee No:                      |                        |                 |       |            |             |
| 2) Services Required (Tick where applicable)         Debit card       Internet Banking         3) Company Type       Sole Proprietor         Partnership       Limited Company         Others (specify)         4) Business Activities (Tick where applicable)       Agriculture         Trading       Manufacturing         Mining and quarrying         Education       NGO         Health       Real estate         Legal services       Flinancial and insurances services         Art gallery       Tourism and hospitality       Information & Communication Technology         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders         Germstone traders/Jewellers         Others (specify)         5) Financial Declaration*         Estimated annual inflows/sales turnover         Purpose for the account         Source of wealth         Mame of Firm/ Company         Name of Firm/ Company         Name of Contact Person         Address         Clephone         Bank and Branch         Account Number  | Name of Company:                    |   | Company Registratio    | onNo            |       |            |             |
| Debit card Internet Banking Monthend e-Statements Mobile Banking   3) Company Type Sole Proprietor Partnership Limited Company Others (specify) 4) Business Activities (Tick whereapplicable) Agriculture Trading Manufacturing Mining and quarrying Education NOO Health Realestate Legal services Financial and insurances services Financial and insurances services Financial and insurances services Gambling or Casino Motor vehicle/ Vessel trading Cross boarder cash traders Construction and Housing Gambling or Casino Motor vehicle/ Vessel trading Cross boarder cash traders Germstone traders/Jewellers Others (specify) 5) Financial Declaration* Estimated annual inflows/sales turnover Purpose for the account Source of wealth Ourpose for the account Source of wealth Anne of Firm/ Company Name of Contact Person Address Telephone Bank and Branch Account Number Contact Number  | Contact Number                      |   | E-mail address         |                 |       |            |             |
| 4) Business Activities (Tick whereapplicable)       Agriculture       Trading       Manufacturing       Mining and quarrying         Education       NGO       Health       Realestate       Legal services       Financial and insurances services         Art gallery       Tourism and hospitality       Information & Communication Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders       Germstone traders/Jewellers         Others (specify)  |                                     |   | Mobile Banking         |                 |       |            |             |
| 4) Business Activities (Tick whereapplicable)       Agriculture       Trading       Manufacturing       Mining and quarrying         Education       NGO       Health       Realestate       Legal services       Financial and insurances services         Art gallery       Tourism and hospitality       Information & Communication Technology       Construction and Housing         Gambling or Casino       Motor vehicle/ Vessel trading       Cross boarder cash traders       Germstone traders/Jewellers         Others (specify)  |                                     |   |                        |                 |       |            |             |
| Education NGO Health Real estate Legal services Financial and insurances services   Art gallery Tourism and hospitality Information & Communication Technology Construction and Housing   Gambling or Casino Motor vehicle/ Vessel trading Cross boarder cash traders Germstone traders/Jewellers   Others (specify)   5) Financial Declaration*   Estimated annual inflows/sales turnover   Purpose for the account   Source of wealth   Art B   6) References   Name of Firm/ Company   Name of Contact Person   Address   Telephone   Bank and Branch   Account Number   | 3) Company Type Sol                 | e Proprietor Partnership Limited        | d Company Othe         | ers <i>(spe</i> | cify) |            |             |
| Estimated annual inflows/sales turnover   Purpose for the account   Source of wealth     PART B   6) References   Name of Firm/ Company   Name of Firm/ Company   Name of Contact Person   Address   Telephone   Bank and Branch   Account Number     Account Number  | Art gallery Gambling or Casin       | Tourism and hospitality Information & ( | Communication Technolo | ogy             | Cons  | truction a | and Housing |
| Purpose for the account   Source of wealth     PART B     6) References   Name of Firm/ Company   Name of Firm/ Company   Name of Contact Person   Address   Telephone   Bank and Branch   Account Number     Account Number  | •                                   | les turnover                            |                        |                 |       |            |             |
| Source of wealth  |                                     |   |                        |                 |       |            |             |
| PART B         6) References         Name of Firm/ Company         Name of Contact Person         Address         Telephone         Bank and Branch         Account Number  |                                     |   |                        |                 |       |            |             |
| 6) References         Name of Firm/ Company         Name of Firm/ Company         Name of Contact Person         Address         Telephone         Bank and Branch         Account Number   |                                     |   |                        |                 |       |            |             |
| Name of Firm/ CompanyName of Firm/ CompanyName of Contact PersonName of Contact PersonAddressAddress TelephoneTelephoneBank and BranchBank and BranchAccount Number   | PART B                              |   |                        |                 |       |            |             |
| Name of Contact PersonName of Contact PersonAddressAddress TelephoneTelephoneBank and BranchBank and BranchAccount Number   |                                     | Nor                                     | a of Firm / Company    |                 |       |            |             |
| Address     Address Telephone       Telephone     Bank and Branch       Bank and Branch     Account Number  |                                     |   |                        |                 |       |            |             |
| Telephone     Bank and Branch       Bank and Branch     Account Number  |                                     |   |                        |                 |       |            |             |
| Bank and Branch     Account Number       Account Number   | Telephone                           |   |                        |                 |       |            |             |
|   | Bank and Branch                     |   |                        |                 |       |            |             |
| 7) Signing Arrangements* (Tick where applicable)  | Account Number                      |   |                        |                 |       |            |             |
| One signatory to sign       Two signatories to sign Others       Three signatories to sign         (describe alternative mode of operation below)       Alternative mode of operation (specify)   | One signatory to (describe alterna) | sign Two signatories to sign Oth        | ers Three signate      | ories to:       | sign  |            |             |

## **NATSAVE**

| Authorised Signatory 1.  |                |
|--|----------------|
| Name   | Designation    |
| Nationality  | Date of birth  |
| ID/Passport No.  | Telephone No.  |
| Contact address  |                |
| Signing Capacity/ Panel  | E-mail address |
| Specimen signatures: (sign once in all three boxes below)                        |                |
|  | рното          |
| Authorised Signatory 2.  |                |
| Name   | Designation    |
| Nationality  | Date of birth  |
| ID/Passport No.  | Telephone      |
| Contact address  | No.            |
| Signing capacity/Panel Specimen signatures: (sign once in all three boxes below) | E-mailaddress  |
| Authorised Signatory 3.  |                |
| Name   | Designation    |
| Nationality  | Date of birth  |
| ID/Passport No.  | Telephone No.  |
| Contact address  |                |
| Signing Capacity/Panel   | E-mailaddress  |
| Specimen signatures: (sign once in all three boxes below)                        | рното          |

## **NATSAVE**

### Authorised Signatory 4.

| Name                | Designation       |
|---------------------|-------------------|
| Nationality         | Date of birth     |
| ID/Passport No.     | Telephone         |
| Contact address     | No.               |
| Signing Capacity/Pa | nel E-mailaddress |

#### Specimen signatures: (sign once in all six boxes below)



### PART C

| ACCOUNT OPENING REQUIREMENTSCHECKLIST  | CUSTOMER | OFFICIAL |
|--|----------|----------|
| PACRA Certificate of Incorporation   |          |          |
| TPIN   |          |          |
| Copy of National ID for director/signatories/Agents                            |          |          |
| 2 passport size photo for each signatory/Agents                                |          |          |
| Signed board/Mandate form  |          |          |
| Proof of residence of signatories  |          |          |
| Proof of trading address e.g. utility biills, rate bills, certificate of title |          |          |
| Article of Association   |          |          |
| 2 Reference Letters  |          |          |
|  | 1        | 1        |

| Official Use Account Number (Official use) |                        |                 | ]        |      |
|--|------------------------|-----------------|----------|------|
| KYC requirement submitted Yes No Custom    | er Risk Classification | Low Mic         | ldle     | High |
| Customer number Chai                       | ge group               |                 |          |      |
| RM ID                                      | Sector                 |                 |          |      |
| Business seg                               | ]                      |                 |          |      |
| Date account opened D D M M Y Y Y Y        |                        | Date visited DD | MM       | YYYY |
| Account opened by (Name):                  |                        |                 |          |      |
| Signature                                  | ]                      |                 | Official |      |
| Account opening authorised by (Name):      |                        |                 | Stamp    |      |
| Signature                                  |                        |                 | <        | -    |