



AB Bank Limited
_____ Branch

Date

| | | | | | | | | | |
|-----|-----|-----|--|------|--|--|--|--|--|
| | | | | | | | | | |
| D/D | M/M | Y/Y | | /Y/Y | | | | | |

The Manager
AB Bank Limited
_____ Branch

APPLICATION FOR OPENING OF ACCOUNT - (INDIVIDUAL)

Customer ID

| | | | | | | | | | | | |
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Account Number

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I/We wish to open an account with AB Bank Limited, _____ Branch, in the name & style of myself/ourselves _____

I/We submit the application with required papers/documents and request you hereby for opening the account in the following manner. I/we confirm that no unusual/irregular/suspicious transaction (which may be deemed as money laundering) will be conducted through the account. I/we have provided detail information as follows

Account Title/Name of account
(In Capital Letter) _____

TYPE OF ACCOUNT

Account Type (Please ✓) Savings Account Current Account STD
 Fixed Deposit A/C FC RFCD
 NCFCD NITA Others _____

Account Currency (Please ✓) BDT US\$ EURO
 GBP Others _____

Declaration of Account (Please ✓) Single Joint Multiple Others _____

Existing Bank Relationship (if any) _____

1. Name of Bank _____ Branch _____ Deposit A/C Loan A/C Others _____
 Account No. _____ Account Title _____

2. Name of Bank _____ Branch _____ Deposit A/C Loan A/C Others _____
 Account No. _____ Account Title _____

3. Name of Bank _____ Branch _____ Deposit A/C Loan A/C Others _____
 Account No. _____ Account Title _____

TYPE OF CUSTOMER

Bangladeshi National Resident No Residence
 Foreign National Resident Non Resident

Recent
Passport size
colour
photograph

PARTICULARS OF CUSTOMER (ONE)

Name : _____

Relationship with the Account 1st Applicant 2nd Applicant 3rd Applicant Director Partner
 Minor Attorney Holder Signatories Others _____

Father's Name : _____

Mother's Name : _____

Date of Birth : _____ Place of Birth _____ Gender _____

Nationality : _____ National ID No. _____ TIN No. (if any) _____

Passport No. (if any) : _____ Validity _____ Place Issue _____

Driving Licence No (if any) : _____ Validity _____ Place Issue _____

Other Identification (if any) : _____

Occupation & Designation (if required) : _____

Marital Status Married Single Widow Divorced/Separated

Spouse Name _____ No. of Children _____

Residence Address : _____

Residence : Rented Own Private House Living Partner's House

Tele No. Res Off. Mob. Email

Education : None Primary SSC/HSC Graduate / Post Graduate

Occupation : _____ Job Title _____

If Business, please mention the Nature of Business _____

Personal Income (BDT) : Less than 15,000 15,001 - 25,000 25,001 - 40,000

(Per month) : 40,001 - 70,000 70,001 - 1,20,000 More than 1,20,000

Household/ Other Income : Less than 15,000 15,001 - 25,000 25,001 - 40,000

(Per month) 40,001 - 70,000 70,001 - 1,20,000 More than 1,20,000

Source of Income : _____

Car Ownership : Yes No

Credit Card : Issuing Institution _____ Card No. _____ Expiry Date _____

Issuing Institution _____ Card No. _____ Expiry Date _____

Occupational Address : _____

Existing Banking Relationship (if any):

- Name of Bank _____ Branch _____ Deposit A/C Loan A/C Others _____
Account No. _____ Account Title _____
- Name of Bank _____ Branch _____ Deposit A/C Loan A/C Others _____
Account No. _____ Account Title _____
- Name of Bank _____ Branch _____ Deposit A/C Loan A/C Others _____
Account No. _____ Account Title _____

MINOR'S DETAILS

I/We hereby declared that the Minor/Master/Mrs. _____

Father's Name: _____ Mother's Name: _____

is my (state relation) and the first signatory hereto viz. Mr./Mrs. _____

Address: _____

is his/her natural/duly appointed guardian. I/We confirm that the Minor's Date of Birth is _____

_____ and will attained majority on _____

and the account shall be operated by myself _____ as the legal guardian till such date as the account holder (Minor) attains his majority state or any changes made as per my instructions.

Signature of guardian

DETAILS OF INTRODUCER

Name of Introducer : _____ Account No. _____ Branch _____
 Introducer's ID : _____ Address _____
 Telephone/Mobile : _____ Relationship with Applicant _____
 E-mail : _____

I certify that the applicant(s) and/or signatory(s) is/are personally known to me for the last months/years and confirm that his/her/their occupation and address as stated elsewhere in this application is correct to my knowledge.

 Signature of introducer
 & Seal (if applicable) with date

 Introducer's signature verified by
 Name & AB Bnkk's Employee No.

INITIAL DEPOSIT

Cash received BDT. : _____ (In words) _____ only.
 Received cheque No. _____ dtd. _____
 Drawn on (Bank) _____
 Debit my/our Account No. _____ with your branch for BDT _____
 (In words) _____

STATEMENT REQUIREMENT

Account statement to be provided : Monthly Quarterly Half-yearly Yearly

Note: Any exception/errors regarding transaction or change of address should be advised to the bank within 15 days of receiving statement.

DETAILS OF SPECIAL SCHEME/PRODUCT

I/We hereby deposit an amount of BDT/US\$/GBP/EURO _____ (In figure)
 _____ (in words) for a period of _____ days/months/years @
 _____ % p.a. interest with instructions.

Source of fund : _____

Deposit in : Cash Cheque Cheque No. _____ Date _____ Drawn on _____
 Amount (BDT) _____ In words _____ only.

We authorize you to debit my/our account no. _____ title _____ with you.

Interest payment : Pay in cash Credit to account No. _____

On maturity disposal :

- Reply Principal & Interest in cash
 Credit Principal & Interest to account No. _____
 Renewal Principal for _____ days / months / year & credit interest to account No. _____
 Renewal Principal for _____ days / months / year & pay interest in cash. _____
 Renewal Principal & Interest for _____ days / months / year

Note : Unless prior written notice is received by the Bank will automatically renew the deposit Plus accrued interest for the same period on the maturity date at the prevailing rate of Interest

If at the time of my/ our death the nominee remains a minor Mr./ Mrs./ Ms. _____
 _____ S/o D/o/ W/o Mr/ Mrs. _____ shall
 as the guardian be authorized to receive/ draw on behalf of the nominee the amount of deposit held by you in any/
 our account.

Name of the Guardian _____ Signature _____

Signature of nominee and Guardian (if applicable) Attested By _____

 Signature of 1st applicant

 Signature of 2nd applicant

 Signature of 3rd applicant

APPLICANT'S DECLARATION

1. I/We confirm that the information given above is true and complete. I/We read and accepted the Terms & Conditions governing the account (s) which I/we am/are opening as outlined in the Account Rules and hereby agree to be bound by such Terms and Conditions.
2. I/We acknowledge that I/We have read and understood the terms and conditions stated and agree to comply with these.
3. I/we declare that I/we am/are fully aware of the Money Laundering Prevention ordinance, 2008 and I/we shall not do any act/transaction in contravention of the provisions of the said act. I/we also commit to provide necessary information/documents which may be required by the bank from time to time.
4. I/we hereby confirm: (to open a current account please tick and fill up if appropriate)
 - That I am/ we are not enjoying any credit facility from any other bank/ any other branch of your bank and under take to inform you in writing as soon as any credit facility is availed by me/us from any other bank or any other branch of your bank".
 - That I am/ we are/our concern is enjoying credit facilities from other bank(s)/any other branch of your bank as are furnished below:"

| Branch/ Bank | Account No. | Nature of Credit | Amount O/s | Validity |
|--------------|-------------|------------------|------------|----------|
| | | | | |
| | | | | |
| | | | | |

RESIDENTIAL ADDRESS

 Signature of 1st applicant
 Full Name:
 Date:

 Signature of 2nd applicant
 Full Name:
 Date:

 Signature of 3rd applicant
 Full Name:
 Date:

FOR BANK'S USE ONLY

(To be filled up by Account Opening Officer)

Type of Account applied for _____ Code Title of Account applied for :
Currency type : BDT/GBP/USD/EURO _____ Code All required documents provided : Yes No Remarks (if no)KYC Profile analyzed : Yes No Overall Risk Assessment:

| Risk Rating | Risk Level |
|-------------|------------|
| | |

Initial deposit : (i) Cash (BDT.) _____
(ii) Cheque/ Draft/ PO/ Others (BDT.) _____

The Application Form & relevant documents have been checked and found in order. Requested account is opened hereby :

| | Branch No. | Customer No. | Suffix |
|-------------|------------------------|----------------------|----------------------|
| Account No. | : <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | |
|----------------|------------------------|----------------------|
| Issued FDR No. | : <input type="text"/> | <input type="text"/> |
|----------------|------------------------|----------------------|

Date of Account opening :

Opened by

Approved by-
(Relationship Manager/
Operations Manager)

Signature :

Signature :

Name :

Name :

Designation :

Designation :

Employee No. :

Employee No. :

Follow up action :

- (i)
- (ii)
- (iii)

Note:

- Two passport size colour photographs of applicant(s) duly attested by the introducer to be obtained.
- Introducer's signature of Application Form and Signature Card to be verified by an authorized officer of the bank with his / her signature and office stamp mentioning PA No./ Employee No.
- In case of Joint Account, operational instructions are to be signed by the joint applicant.
- In case of nomination, photographs and signature of the Nominee are to be attested by the applicant(s) / account holder(s).
- The word 'MINOR' to be put boldly after the title of the account in case of minor's account.
- Signature of the Customer(s) and Introducer shall be obtained in front of Bank Official(s).

Date

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|-----|-----|--|--|--|--|--|--|---------|--|
| | | | | | | | | | |
| D/D | M/M | | | | | | | Y/Y/Y/Y | |

ACCOUNT OPENING FORM: PERSONAL INFORMATION

(After filling this form it should be attached with main part of Individual and Corporate account opening Form)

 Account Number

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 Customer ID

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PARTICULARS OF CUSTOMER (ONE)

Name : _____

Relationship with the Account 1st Applicant 2nd Applicant 3rd Applicant Director Partner
 Minor Attorney Holder Signatories Others _____

Father's Name : _____

Mother's Name : _____

Husband/wife's Name : _____

Date of Birth : _____ Gender _____

Nationality : _____

Passport No. (if any) : _____

Sex (Please) Male Female

Occupation(With Designation) : _____ Validity _____ Place Issue _____

Driving Licence No. (if any) : _____ Validity _____ Place Issue _____

TIN No.(if any) : _____ Validity _____ Place Issue _____

National ID No. : _____ Validity _____ Place Issue _____

Present Address : _____

Permanent Address : _____

Occupational Address : _____

Contact Address : House Office Mobile.....
 : E-mail Fax

Residence Address(Please) : Resident Non-Resident

Credit Card Information: : Issuing Office & Card Number (If Card Holder)

1.....
 2.....

 Signature with Date

EXPECTED TRANSACTION PROFILE

[To be filled by the Applicant/Customer(s)]

Name of Applicant/Customer(S) : _____

Account Type : CD / STD / SB / FDR/ Other (Please specify) _____

Reference Account Number _____

Personal net worth (in case of individual) : BDT _____

Company net worth (in case of Company) : BDT _____

Source of Fund:

| Type of Transaction (Deposit) | No. of Transactions (monthly) | Maximum Size (Per Transaction) (Tk lac) | Total Value monthly (Tk lac) |
|------------------------------------|-------------------------------|---|------------------------------|
| Cash deposits (With online) | | | |
| Transfer/ Instrument Deposits | | | |
| Incoming Remittance (Local) | | | |
| Incoming Remittance (foreign) | | | |
| Cash Collection | | | |
| Cheque Collection | | | |
| Foreign Currency Cheque Collection | | | |
| Receipt of Export Proceeds | | | |
| Other (specify) | | | |
| Total Expected Deposit | | | |

| Type of Transaction (withdrawal) | No. of Transactions (monthly) | Maximum Size (Per Transaction) (Tk lac) | Total Value monthly (Tk lac) |
|---|-------------------------------|---|------------------------------|
| Cash withdrawals (including online/ATM) | | | |
| Transfer/ Instrument Payment | | | |
| Outgoing Remittance (local) | | | |
| Outgoing Remittance (foreign) | | | |
| Letters of Credit | | | |
| Letters of Guarantee | | | |
| Credit Card Payment | | | |
| FC/Travellers Cheques | | | |
| Investment Transaction | | | |
| Loan facilities | | | |
| Pay roll cards | | | |
| Other (Specify) | | | |
| Total Expected Withdrawal | | | |

Note : Please use additional sheets if required.

I/We, the undersigned, hereby confirm that this Transaction Profile truly represents the transactions arising out of occupation or the normal course of business of my/our firm/ company/organization. I/We also confirm to notify the bank and submit a fresh transaction profile, if my/our income sources increase/decrease, from time to time.

(1) First/Sole applicant

(2) Joint applicant

(3) Joint applicant

| | | | |
|--------------------|--|--|--|
| Signature | | | |
| Name & Designation | | | |

Date : _____

Signature Verified _____