



Account No.:																				
Corporate CIF:																				

Please Note: The information requested is in compliance of the rules and regulations set out by the **Financial Intelligence Unit (FIU) of Central Bank of Sri Lanka** and will be treated with utmost confidentiality.
 All terms and conditions are available through our website: www.cargillsbank.com or as a printed format on request.

1. Declaration

Cargills Bank Limited **Date:** _____
 _____ **Branch**

Dear Sir/ Madam,

Limited (Registered Office) _____

Tele: _____ do hereby request you to open a **Current/ Savings/ FD/ CALL/ REPO** account in the name of this Company as shown above. In pursuance of the request, we hand you herewith certified copies of the following together with the Original Documents (as applicable) for perusal and return :

- Copy of the Certificate of Incorporation
- Copy of Form 40 or Form 1 (Application for Registration) and the Articles of Association
- Board Resolution authorizing to open an account
- Copy of Form 13 – Confirmation of the registered address (where applicable only)
- Copy of Form 20 – List of registered Directors
- Audited financials of immediate past two (02) years (if available)

The full names and signatures of the Directors are also appended.

We agree to comply with and to be bound by the Bank’s rules for the time being for the conduct of such accounts as displayed in the Bank’s premises.

We agree that the Bank may without notice combine or consolidate my/our account/s and liabilities to the Bank and set-off or transfer any sum/s standing to the credit of any such accounts or any sum/s owing to us from the Bank in or towards satisfaction of our liabilities to the Bank on any other respect whether such liabilities be actual or contingent primary or collateral and several or joint.

We hereby certify that the following is a true copy of an extract from the minutes of a meeting of the Board of Directors of the Company, held in accordance with its Articles of Association, on _____ 20____ at _____

Resolved: That a Banking Account in the name of the Company be opened with Cargills Bank Limited and that the said Bank be and is hereby authorized to honour cheques, orders, Bills of Exchange and Promissory Notes drawn, accepted or made on behalf of the Company by,

_____ (State the Operating Instructions)

and to act on any instructions so given relating to the account (whether the account is overdrawn or not) or relating to the transactions of the Company.

Yours faithfully,

 Secretary / Managing Agents
 Seal of the Company (affixed in a manner specified by the Articles)

 Director / Chairman

2. Details of the Company

- | | |
|---|---|
| 1. Name of the Company: _____ | 2. Certificate of Incorporation No.: _____ |
| _____ | 3. Date of Incorporation: D D / M M / Y Y Y Y |
| 4. Registered Office / Factory Address: _____ | 5. Date of Commencement of Business: D D / M M / Y Y Y Y |
| _____ | 6. Correspondence Address (if different from Registered Address): |
| Tel: _____ / _____ | _____ |
| Fax: _____ E-mail: _____ | 7. Purpose of Opening this Account: _____ |
| 8. Tax File No _____ | 9. Source of Funds to the Account: _____ |
| 10. Nature and Purpose of the Business: _____ | |
| 11. Statement Frequency: Daily/ Weekly/ Monthly/ Quarterly/ Half-Yearly/ Yearly (Delete whichever is inapplicable) | |

3. Director’s Information

Full Name of the Director	National Identity Card No. (PID)*	Address	Contact No.

*PID- Personal Identification No.-NIC, Passport, Driving License
 OPS Form 07 - E - V5

4. Major Share Holders Information (More than 10% of Voting Shares)

Full Name of the Director	National Identity Card No. (PID)*	% of shares held	Address	Contact No.

5. FATCA Compliance

The Limited Liability Company is a subject of the USA Taxes as per the Foreign Account Tax Compliant Act (FATCA) and fall within the categories mention herein.

Yes No

- | | |
|---|--|
| 1. One or more Director/s is/are residing in the USA | 2. Limited Liability Company registered in the USA |
| 3. Limited Liability Company resident in the USA | 4. USA Limited Liability Company resident in another Country |
| 5. Director/s is/ are beneficial Owner/s is/are lawful resident/s of the USA, including a Green Card holder/s | 6. US Corporations, estates and trusts |
| 7. Non-USA Entities/ Persons with substantial interest to any USA entity | 8. Non-USA Entities with at least one USA person as a substantial beneficial owner |
| 9. Joint accounts where at least one party falls within any of the above categories opening application. | |

If your response is "Yes",

- Please submit the 'Foreign Account Tax Compliant Act (FATCA) compliance form' obtained from the Bank, along with your account opening application.
- Directors of the Limited Liability Company authorize Cargills Bank to furnish the information to the US Inland Revenue Services

6. Deposit and withdrawal instructions for the Term Deposit (Delete whichever is inapplicable)

- Type of deposit : Fixed deposit/ Call deposit/ REPO _____ (Other)
- Amount of deposit : _____ (in words) _____ /- (in figures)
- Deposit period : _____ Months/ Days
- Interest payable : at Maturity/ Monthly/ _____ (specify)
- Automatic renewal: Yes/ No

(If automatic renewal is provided as "Yes", the deposit will be renewed as per the instructions given herein at the prevailing interest rate, same period and conditions applicable at the time of maturity until further notice.)

6. If yes: Cumulative with interest/ without interest

7. Interest Payable to: Account No _____ of _____ (Bank/Branch) in favour of _____ (Name of beneficiary).

8. The Deposit is repayable

- to A/c No _____ of _____ (Bank/ Branch) favouring _____
- by Pay Order

9. Method of Crediting funds of the term deposit:

- Please accept cash/ cheque No _____ for Rs. _____ /-
- Debit My/ Our Savings/ Current Account No. _____ with you for a sum of Rs _____ /-

7. Operating Instructions (Specify)

8. Authorized Signatories

CIF No. _____ Name with initials: _____ Signature (1) with seal	CIF No. _____ Name with initials: _____ Signature (2) with seal	CIF No. _____ Name with initials: _____ Signature (3) with seal
CIF No. _____ Name with initials: _____ Signature (4) with seal	CIF No. _____ Name with initials: _____ Signature (5) with seal	CIF No. _____ Name with initials: _____ Signature (6) with seal

Please Note: All Directors and Major Share Holders whose information is provided herein should submit their separate Personal Information Forms in compliance with the Central Bank FIU requirements.

For office use only

CIF Entry:	Account Entry:	Contract Opening:	Apportion Details	Sig. Tag:
CIF Auth:	Account Auth:	Contract Auth:	Apportion Details Auth:	Sig. Tag Auth: