

Miscellaneous Account Application



For Office Use Only													
Entered	Verified	Account No.:											
User ID	User ID	Corporate CIF:											
Signature	Signature												

For Term Deposits Only	Account Opening	Contract Opening	Apportioning Details	Signature Tagging
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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.

Category of Account :

- Clubs and Societies
 Non-Government Organizations/Charities
 Trade Union
 Co-operative Societies
 Executors & Administrators
 Trust Accounts
 Non-Government School Accounts
 Other (Specify)

1. Declaration

Cargills Bank PLC **Date:** _____

_____ **Branch**

Dear Sir/ Madam,

We hereby request you to open a Current/Savings/Fixed Deposit/Call Deposit account as above mentioned in the name of

We authorize you to pay all cheques or orders purporting to be drawn on behalf of
 and deduct the same to the said account, whether the same be in credit or otherwise, provided the said cheques or orders are signed by.....

.....(Operating Instructions)

Specimen signatures are overleaf 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 same.

On behalf of the

we agree to comply with and be bound by the Bank's rules for the conduct of such accounts as displayed in the Bank's premises.

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

Yours faithfully,

..... Signature (1) Signature (2) Signature (3)
..... Signature (4) Signature (5) Signature (6)

2. Details of The Entity

1. Name of the entity :
2. Registered address :
3. Tel : (1) (2) Fax : E-mail :
4. Registration no (if applicable) :
5. Nature and purpose of the entity :
6. Annual income & sources :
7. Statement frequency : Daily/Weekly/Monthly/Quarterly/Half-Yearly/Yearly (Delete whichever in applicable)

*PID- Personal Identification No.-NIC, Passport, Driving License Form - OME001 - V3

Customer Name _____

NIC _____

Signature _____

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3. Term Deposit instructions

1. Type of deposits : FD/Call / REPO (Delete whichever is inapplicable)

2. Amount of deposit : (in words)/- (in figures)

3. Deposit period : Months/Days 4. Interest payable : at Maturity/ Monthly/.....(Specify)

5. Automatic renewal : Yes/No 6. If yes : Cumulative with interest / without interest 7. Interest rate :%

8. Interest payable to : Account no. of (Bank/Branch) in favour of
 9Name of beneficiary).

9. The Deposit is repayable to account number of (Bank/Branch) favouring
 By Pay Order

10. Method of crediting funds for the term deposit :
 Please accept cash / Cheque no..... for Rs./-
 Debit My savings / Current account no. With you for a sum of Rs. -/

4. Other connected institutions

Name	Registration Number	Country

Tick the box below if you'd like to hear from us on existing offers and promotions.

I like to receive information above Cargills Bank's products and services including any personalized offers and promotions.

By signing below, I confirm that I understand how Cargills Bank will handle my personal data in compliance with the Personal Data Protection Act No. 9 of 2022 (as amended) by having read and understood the bank's Data Protection Notice available at Cargills Bank website (www.cargills bank.com)

I / We agree that as a part of the bank's contractual obligation to provide the necessary services along with bank's desire to optimize the usage of the IT infrastructure of the bank, the bank may from time to time utilize information system infrastructure managed or owned by reputed third-party service providers that may be located within or outside Sri Lanka. I / We acknowledge and agree that the bank may share my/our data with such service providers for hosting and processing information system.

5. Details of Authorized Signatories

Name : PID No: Official Position :	Name : PID No: Official Position :	Name : PID No: Official Position :
Authorized Signature (1) with seal	Authorized Signature (2) with seal	Authorized Signature (3) with seal
Name : PID No: Official Position :	Name : PID No: Official Position :	Name : PID No: Official Position :
Authorized Signature (4) with seal	Authorized Signature (5) with seal	Authorized Signature (6) with seal

Note: Each office bearer is required to submit an Advance Compliance from (No. OME003)

*PID- Personal Identification No.-NIC, Passport, Driving License
Form – OME001 – V3