



Full Name of Director 10 :  
(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

Grid for Director 10 name

NIC / PP / DL No. :

Grid for NIC / PP / DL No.

Percentage of Shares Held :

Grid for Percentage of Shares Held

%

Client ID :

Grid for Client ID

### Savings / Current Account Opening

Initial Deposit :

Grid for Initial Deposit

Mode of Payment :

Grid for Mode of Payment

Signature box

Account Statement Frequency\*

Grid for Account Statement Frequency

Signature

\*For Daily and Weekly Statements charges will apply as per tariff.

### Fixed Deposit / Call Deposit Opening

Initial Deposit :

Grid for Initial Deposit

Mode of Payment :

Grid for Mode of Payment

Signature box

Signature

Period :

Grid for Period

Interest Rate :

Grid for Interest Rate

To be paid :

Grid for To be paid

Mode of Interest Payment :

Grid for Mode of Interest Payment

Account Holder's Name

Grid for Account Holder's Name

Maturity Instructions

Grid for Maturity Instructions

Unless specific instructions as stated above are given, it is the Bank's normal practice to continue with the deposit, at the rate of interest prevailing on the date of maturity.

### General Information

Source of Funds :  
(Choose one or more)

Grid for Source of Funds

Anticipated Volumes of  
Deposits from Above Sources :

Grid for Anticipated Volumes of Deposits

### Authorised Signatories

Authorised Signatory 01  
(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

Grid for Authorised Signatory 01 name

NIC/PP/DL No. :

Grid for Authorised Signatory 01 NIC/PP/DL No.

Client ID :

Grid for Authorised Signatory 01 Client ID

Designation :

Grid for Authorised Signatory 01 Designation

Authorised Signatory 02  
(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

Grid for Authorised Signatory 02 name

NIC/PP/DL No. :

Grid for Authorised Signatory 02 NIC/PP/DL No.

Client ID :

Grid for Authorised Signatory 02 Client ID

Designation :

Grid for Authorised Signatory 02 Designation

Authorised Signatory 03  
(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

Grid for Authorised Signatory 03 name

NIC/PP/DL No. :

Grid for Authorised Signatory 03 NIC/PP/DL No.

Client ID :

Grid for Authorised Signatory 03 Client ID

Designation :

Grid for Authorised Signatory 03 Designation

**Authorised Signatory 04**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Authorised Signatory 05**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Authorised Signatory 06**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Authorised Signatory 07**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Authorised Signatory 08**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Authorised Signatory 09**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Authorised Signatory 10**

(Rev./Dr./Mr./Mrs./Ms.)  
(Please underline the surname)

NIC/PP/DL No. :

Client ID :

Designation :

**Declaration**

We hereby agree to comply with and to be bound by all applicable laws and the Bank's prevailing rules and regulations and/or terms and conditions and/or procedures and operations, services and transactions relating to the said account(s) and/or banking facilities attached thereto and subject to be further bound by any variations, amendments and changes made to same as may be prescribed by the Bank from time to time in future. We confirm that the details given above and overleaf are true and correct. Further we confirm the receipt of details and conditions applicable to the said account(s) and to the products/ services related thereto and their terms and conditions, which were explained to us in our language of conversance and understood by us .

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

Names and specimen signatures of the persons authorised to operate the account(s) according to the Resolution passed by the Board of Directors are provided above and we undertake to advise the Bank of changes to same as and when such changes take place. We further undertake to promptly inform the Bank of any changes to the Board of Directors of the Company and / or Memorandum and Articles of Association of the Company and /or Authorised Signatories.

We agree and understand that the Signature Card attached herewith is an integral part of this account opening form. Further, we confirm that all the other directors have been informed of this account(s) opening with DFCC Bank PLC.

Signature of Chairman/Director  
(On Rubber Stamp)

Signature of Chairman/Director  
(On Rubber Stamp)

Signature of Company Secretary  
(On Rubber Stamp)

