



National Investment Bank Limited

LIMITED LIABILITY COMPANY ACCOUNT OPENING FORM

Address Noted and Verified	Computer	Manager	Assistant Manager

Authority For Opening Account in the Name Of Companies Registered Under The Companies Acts

(For Office use only)		NIB/CA/5
<input type="checkbox"/> Account Number		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Branch _____		Date _____

To:
THE MANAGER
NATIONAL INVESTMENT BANK LIMITED

Dear Sir,
Limited
 (Registered Office/House No.....)

My Directors request you to open an account for the above-named Company, and I hand you herewith:

- 1. Certificate of Incorporation (certified copy)
- 2. Regulations of the company (certified copy)
- 3. Certificate to Commence Business (certified copy)
- 4. A Resolution of the Board of Directors regulating the conduct of the account (certified copy) (overleaf)
- 5. Specimen signatures of the authorized signatories (overleaf)
- 6. Registrar General's Form 3 and 4
- 7. Introduction Letter

Yours faithfully,
 Secretary _____

APPOINTMENT OF BANKERS

At a meeting of the Board of Directors of _____
 Limited held at _____ on the _____ day of _____ 20 _____
 Members Present _____

■ It was Resolved

- *Insert Branch Name*
- *Insert 'any two of the Directors and counter-signed by the Secretary,' or otherwise as may be required*

1. "That the National Investment Bank Ltd. be appointed the bankers of the company and that they be and are hereby authorized and requested to:
 - a) Open a Current Account at their _____
Branch for the company.
 - b) Honour cheques, Bills of Exchange and Promissory Notes drawn, signed, accepted or made on behalf of the
company by: _____

 - c) Act on any instructions given by the authorized persons relating to the account whether the same be in credit
or overdrawn, or relating to transactions of the company.
2. That the Bank be advised by letter signed by the Chairman for the time being of all changes in the authorized
signatories from time to time and that this resolution remain in force until the receipt by the Bank of a copy of a
resolution rescinding or amending the same."

We hereby certify the above to be a true copy from the Minutes.

Chairman/Director

Secretary

■ Names and Specimen Signatures of Authorised Signatories

	1	2	3	4
Full Name in Block Letters				
Place & Date of Birth:				
Nationality:				
Official Position				
Res. Address and Location				
Telephone, Fax, Email				
Specimen Signature				

Section B

Purpose of Account Operation	<i>Confirm purpose of account opening</i> <table border="1" data-bbox="636 159 1455 216"> <tr> <td data-bbox="636 159 683 216"></td> <td data-bbox="683 159 1019 216"><i>Investment</i></td> <td data-bbox="1019 159 1066 216"></td> <td data-bbox="1066 159 1455 216"><i>Transactional</i></td> </tr> </table> <i>Other, please Specify</i> _____				<i>Investment</i>		<i>Transactional</i>					
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Indicate Source of Funds <i>(Tick as many boxes where appropriate)</i>	<i>Kindly indicate the source of funds</i> <table border="1" data-bbox="636 338 1455 453"> <tr> <td data-bbox="636 338 683 394"></td> <td data-bbox="683 338 1019 394"><i>Sales Proceeds</i></td> <td data-bbox="1019 338 1066 394"></td> <td data-bbox="1066 338 1455 394"><i>Services Rendered</i></td> </tr> <tr> <td data-bbox="636 394 683 453"></td> <td data-bbox="683 394 1019 453"><i>Trust funds per Trust Deed</i></td> <td data-bbox="1019 394 1066 453"></td> <td data-bbox="1066 394 1455 453"></td> </tr> </table> <i>Other, please Specify</i> _____				<i>Sales Proceeds</i>		<i>Services Rendered</i>		<i>Trust funds per Trust Deed</i>			
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Expected Volume & Type of Activity	<table border="1" data-bbox="636 522 1455 766"> <thead> <tr> <th data-bbox="636 522 932 611">Transaction Type</th> <th data-bbox="932 522 1214 611">Expected Transactions Per month</th> <th data-bbox="1214 522 1455 611">Expected Amount Per month</th> </tr> </thead> <tbody> <tr> <td data-bbox="636 611 932 684"><i>Deposits or Inwards Transfers</i></td> <td data-bbox="932 611 1214 684"></td> <td data-bbox="1214 611 1455 684"></td> </tr> <tr> <td data-bbox="636 684 932 766"><i>Withdrawals or outwards Transfers</i></td> <td data-bbox="932 684 1214 766"></td> <td data-bbox="1214 684 1455 766"></td> </tr> </tbody> </table>			Transaction Type	Expected Transactions Per month	Expected Amount Per month	<i>Deposits or Inwards Transfers</i>			<i>Withdrawals or outwards Transfers</i>		
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Type of Account to be opened	<i>Please tick Account Type to be opened:</i> <table border="1" data-bbox="636 833 1455 957"> <tr> <td data-bbox="636 833 683 898"></td> <td data-bbox="683 833 1036 898"><i>Current Account</i></td> <td data-bbox="1036 833 1083 898"></td> <td data-bbox="1083 833 1455 898"><i>Savings Account</i></td> </tr> <tr> <td data-bbox="636 898 683 957"></td> <td data-bbox="683 898 1036 957"><i>Foreign Account</i></td> <td data-bbox="1036 898 1083 957"></td> <td data-bbox="1083 898 1455 957"><i>Other (please specify)</i></td> </tr> </table> <i>Specify</i> _____				<i>Current Account</i>		<i>Savings Account</i>		<i>Foreign Account</i>		<i>Other (please specify)</i>	
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Type of Currency for Account	<i>Please tick preferred Currency Option</i> <table border="1" data-bbox="636 1077 1455 1199"> <tr> <td data-bbox="636 1077 683 1142"></td> <td data-bbox="683 1077 1036 1142"><i>Cedi</i></td> <td data-bbox="1036 1077 1083 1142"></td> <td data-bbox="1083 1077 1455 1142"><i>GB Pound Sterling</i></td> </tr> <tr> <td data-bbox="636 1142 683 1199"></td> <td data-bbox="683 1142 1036 1199"><i>US Dollar</i></td> <td data-bbox="1036 1142 1083 1199"></td> <td data-bbox="1083 1142 1455 1199"><i>Euro</i></td> </tr> </table>				<i>Cedi</i>		<i>GB Pound Sterling</i>		<i>US Dollar</i>		<i>Euro</i>	
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	<i>US Dollar</i>		<i>Euro</i>									

NATURE OF BUSINESS:

COMPANY REGISTERED ADDRESS:

COMPANY TRADING ADDRESS:

Signatures certified by: Chairman/Director Secretary

Name & Address of Person Introducing

.....
 I hereby confirm that I have known

Mr/Miss/Mrs

for the past 12 months and consider customer to be good and trustworthy to operate an Account.

Sign: |

INTRODUCED BY: Known Customer Employer Auditor Lawyer NIB Senior Rank Official

A Signatory Officer for Branches _____	B Signatory Manager and above for Head Office _____
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■ Section I

Items	Details and items to be verified						
<i>Identification</i>	Name and identity verified? Yes <input type="checkbox"/> No <input type="checkbox"/>						
<i>Name, Date of Birth and Nationality of Applicant</i>	Applicant(s) name, date of Birth and Nationality confirmed by one of the following, please tick submitted option: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%; text-align: center;"><i>Passport</i></td> <td style="width: 33%; text-align: center;"><i>Voter ID Card</i></td> <td style="width: 33%; text-align: center;"><i>Employee ID Card</i></td> </tr> <tr> <td style="text-align: center;"><i>National ID Card</i></td> <td style="text-align: center;"><i>Driving Licence</i></td> <td style="text-align: center;"><i>Other (please specify)</i></td> </tr> </table> Specify _____	<i>Passport</i>	<i>Voter ID Card</i>	<i>Employee ID Card</i>	<i>National ID Card</i>	<i>Driving Licence</i>	<i>Other (please specify)</i>
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<i>National ID Card</i>	<i>Driving Licence</i>	<i>Other (please specify)</i>					
<i>Address & Telephone numbers</i>	Applicant(s) address confirmed by one of the following, please tick submitted option: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%; text-align: center;"><i>Tenancy Contract</i></td> <td style="width: 33%; text-align: center;"><i>Utility Bill</i></td> <td style="width: 33%; text-align: center;"><i>Income Tax</i></td> </tr> <tr> <td style="text-align: center;"><i>Other Bank Statement</i></td> <td style="text-align: center;"><i>Employer's Reference Letter</i></td> <td style="text-align: center;"><i>Other (please specify)</i></td> </tr> </table> Specify _____	<i>Tenancy Contract</i>	<i>Utility Bill</i>	<i>Income Tax</i>	<i>Other Bank Statement</i>	<i>Employer's Reference Letter</i>	<i>Other (please specify)</i>
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<i>Other Bank Statement</i>	<i>Employer's Reference Letter</i>	<i>Other (please specify)</i>					

■ Section II

Section A

Level 1 (Low Risk Customer) - Indicate if Applicant belongs to any of the following.

Applicant does not reside or operate in a high risk country.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applicant is an ordinary individual and not associated with a Politically Exposed Person.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applicant(s) funding is sourced from normal activities.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Level 2 (Medium Risk Customer) - Indicate if Applicant belongs to any of the following.

Applicant(s) or authorized signatories fall into any type of account that is not listed as either Level 1 and 3.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Section B

Level 3 (High Risk Customer) - Indicate if Applicant belongs to any of the following categories.
If the account holder(s) or authorized signatories fall into any of the following categories, tick the appropriate box(es) and specify details. If not applicable, skip section C in respect of this individual.

The customer is a Politically Exposed Person (PEP) or closely associated with a PEP. Please specify details of PEP position and relationship.	<input type="checkbox"/> Yes <input type="checkbox"/> No
An overseas customer residing or operating in high-risk jurisdiction. Please specify country or territory.	<input type="checkbox"/> Yes <input type="checkbox"/> No
The customer's source of funds is from high-risk jurisdictions. Please specify country or territory.	<input type="checkbox"/> Yes <input type="checkbox"/> No