



To be completed by the bank

Date of opening

Number of account

FIRST ALLIANCE BANK (Z) LTD.

(Registered Commercial Bank)

OPENING AN ACCOUNT

Dear Sir(s),

kindly open in your books a current/deposit at notice/term deposit a/c in appropriate category/ies marked in the form in the name of _____

(please insert title of account in block capitals)

Currency of a/c	<input type="checkbox"/> Zambian Kwacha	<input type="checkbox"/> Others, specify	<input type="checkbox"/> Current a/c	<input type="checkbox"/> Notice/term deposit a/c
A/c ownership	<input type="checkbox"/> Individual	<input type="checkbox"/> Joint	<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> Partnership firm
	<input type="checkbox"/> Pvt. Ltd. Company	<input type="checkbox"/> Public Ltd. Company	<input type="checkbox"/> Club, Society or Association	

CONDITIONS - CURRENT ACCOUNTS

- Current account/s shall not attract any interest. However, amount/s in excess K_____ could be transferred by way of standing instructions to a deposit at notice, fixed term account at the bank's prevalent interest rate on the day of such transfer.
 - The minimum credit balance required to be maintained at all times for individual/personal a/cs is K_____ and for corporate/business a/cs K_____ which is subject to change at bank's sole discretion, without prior notice in writing.
 - The additional information, supporting documents, full physical and postal address(es) and specimen signature card(s) signed by me/us authorised officials is/are attached. I/we undertake to advise the bank of any change immediately in writing.
 - The law & regulations of the government of the Republic of Zambia, the usual customs and procedures common to banks in Zambia will apply to and govern the conduct of account/s.
 - The bank reserves the right to amend these rules at any time and in any manner which the bank deems fit with or without prior written notice to the applicants or the general public.
 - Commission and/or service charges shall be levied by the bank periodically, as are permissible.
 - The credit balance/s in account/s would be considered by the bank to be a security for all the obligations, present or future, of the constituent/s to the bank. In the event of dishonour of such obligations, the bank is entitled without prior written notice to the constituent/s, to utilise such funds in part or full, against the obligations of the constituent/s to the bank.
 - The Bank is entitled to close the account without prior written notice if the conduct of the account/s, in the opinion of the bank is unsatisfactory or for any other reason whatsoever.
 - For all accounts documents is original must be produced for inspection, verification and return.
- The additional information required for each category of account detailed there against is furnished to you.

CONDITIONS - DEPOSITS AT NOTICE/ TERM DEPOSIT ACCOUNT/S

- The interest would cease to accrue on the maturity date of the notice/term deposit/s.
- The deposit/s could be renewed automatically for like periods and amount/s with or without interest at the sole discretion of the bank, and/or by automatic renewal instructions signed by you.
- The deposit/s will be renewed for further period/s at the prevalent rate of interest of the bank on that date, and no prepayment/s would be allowed until next maturity.
- The general rules and regulations of the bank would apply to such deposits.
- **The conditions, rules and regulations stipulated in this form for the conduct of account/s with your bank is/are understood by me/us and I/we hereby agree to abide by them at all times during the currency of account relationship with you.**

Yours faithfully,

x _____ x _____ x _____ x _____ x _____

(Specimen signature/s of the applicant/s/account holder/s)

Dated _____ / _____ / _____

continued ▶

Individual / personal a/c

Joint / personal a/c

mandate form /FAB/DEP/4/94 duly completed and signed is attached

Full Name/s _____

(please insert name/s or individual/s for single/joint personal accounts)

x

x

Account to be operated upon by _____

(please insert "singly" if the account is in single name. If the account is in more than one name, insert "either or survivor", "both", "any" "all", singly, jointly or other specific instructions as desired by the a/c holder/s)

Sole proprietorship

- declaration form/FAB/DEP/5/94 duly completed and signed is attached
- copy of business registration certificate
- photocopy of National Registration Card (NRC) Passport letter/s of introduction

Partnership firm

- certified true copy of partnership deed signed and dated by all the partners.
- mandate for partnership account form FAB/DEP/6/94 duly completed and signed is attached
- full names, addresses and specimen signatures of the partners for operation of account with operational instructions.
- photocopy of National Registration Card/s (NRC) Passport/s letter/s of introduction

Full Name/s _____

[please insert name/s of individual t/a (sole proprietorship) or individual partners t/a (partnership firm)

x

x

Account to be operated upon by _____

(please insert "singly" for sole proprietorship. For partnership insert "either", "both", "any", "all" singly/jointly or other specific instructions as desired by all the partners).

Nature of business _____ Full physical address _____

Address for Correspondence _____ Postal address _____

Other address _____ Res. address _____

Telephone Nos. _____ National Registration Card No/s. _____ dated _____

Office _____

Business _____ Issued by _____ at _____

Direct _____ Passport No/s. _____ issued on _____

Others _____

Fax / contact _____ by _____ at _____

Residence _____ valid up to _____

Name, address and a/c No/s with other banks in Zambia, _____ (for obtaining references)

A/c. No _____ Bank Ltd. _____ branch _____

A/c. No _____ Bank Ltd. _____ branch _____

A/c. No _____ Bank Ltd. _____ branch _____

Yours faithfully,

x

x

x

x

x

x

(Specimen signature/s of the applicant/s with title of the account/s where applicable)

Dated _____ / _____ / _____

Pvt. Limited Co.

- certified true copy of the Memorandum and Articles of Association of the company
- certified true copy of the resolution of the board of directors/managing committee/
governing body, for operation of account.
- certified true copy signed by Chairman & Secretary supported by copy of resolution
authorising directors/office bearers to operate the a/c in Form FAB/DEP/9/94 attached
- certified true copy of the certificate of incorporation (registration).

Public Ltd. Co.

- all documents listed under Pvt. Limited Co. Above.
- certified true copy of the certificate of commencement of business
- list of signatories authorised to operate upon the account, supported by resolution
signed and dated by the general body.

Club, Society or Association a/c

- certified true copy of the resolution signed by the chairman and secretary or the
authorised officials, in form /FAB/DEP/11/94
- certified true copy of the rules signed by the chairman and secretary
- specimen signatures of the authorised signatories

**Deposit at notice/
Term deposit a/c**

- please provide the documents required in appropriate category of a/c respectively for
individual, joint, sole proprietorship, partnership firm, pvt. Ltd. co. public ltd. Co.
club society, or association.
- agreement of deposit in form /FAB/DEP/12/94 duly completed and signed by the
authorised signatory/ies to operate upon the a/c.

Full Name/s _____ x

Account to be operated upon by _____
(please insert "chairman and secretary", "any two of the directors counter-signed by the secretary", singly/jointly or otherwise as the case may be)

The name/s of the Chairman/Director/s/Secretary/Office Bearers authorised to operate upon the account/s are

Full Name/s	Official position	Specimen signature/s
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Nature of business _____ Business Reg. No. _____ dated _____

Full physical address _____

Address for Correspondence _____ Postal address _____

Other address _____ Res. address _____

Telephone Nos.

Office _____ Others _____

Business _____ Fax / contract _____

Direct _____ Residence _____

Name, address and a/c No/s with other banks in Zambia, _____ (for obtaining references)

A/c. No _____ Bank Ltd. _____ branch _____

A/c. No _____ Bank Ltd. _____ branch _____

A/c. No _____ Bank Ltd. _____ branch _____

Name/s address of parent/subsidiary/affiliate company/ies

A/c. No _____ Name _____

A/c. No _____ Name _____

A/c. No _____ Name _____

