## PERSONAL ACCOUNT OPENING APPLICATION (INDIVIDUAL)



FOR BANK USE ONLY		
Scanning Ref No. 2 0	CCY Category Lead Generator Emp ID  II ID IB IV Promo Code  Lead Closure Emp ID Promo Code  Dank pursuant to the details given hereunder. I undertake to inform the bank  I hereby authorise the bank to open any subsequent accounts that I may request inderstand and accept the risks to me associated with opening subsequent accounts	
Account Type: Select Account Type (Mark ✓ in the selected box)		
Current Acount Savings Acount		
Personal Current Account Statement Savings Passbook Savings Nations MaxBonus Nations Prabuddha Nations Mega Saver Salary Saver Current Nations Tax Planner Salary Saver Saving Other (Specify)		
Fixed Deposit Foreign Curren	cy Account Currency Type	
Maturity Fixed Deposit		
Secretarion in the Company of the Co	COLUMN TO INTO INTO INTO INTO INTO INTO INTO	
PERSONAL INFORMATION	CONTACT INFORMATION	
Title:* Mr	Permanent address: *  District: *  Correspondence address: ('~' same as permenent address) (Please fill I different from your permanent address)  District: *  All your correspondence including monthly statements will be delivered to this address.  Foreign address *	
DEBIT CARD	VALUE ADDED SERVICES	
Card Type: Non Personalised Personalised  Name to appear on Personalised:  (Maximum 19 characters including spaces)  Mother's maiden Name:  Debit transaction account:	You will be automatically enrolled for these services. If you DO NOT wish to utilize this service. (x)  Online Banking  Online banking Account Will be suspended if inactive For more than three months from date of activation.  E-advice / E-statement  POF E-advices will be released on a monthly basis. (Paper Statements Will not be released)  SMS Transaction Alert  Mobile Banking  All Value Added Services are subject to the bank's standard terms and conditions.	

EMPLOYMENT / FINANCIAL INFORMATION
Occupation: *
Salaried Self-employed Self-employed professional Retired Student Priest Unemployed income earner
Occupation : if self employed professional *
Doctor Accountant Lawyer Architect Engineer Others (Please specify)
Field of employment / business : *
Manufacturing Trading Agriculture Financial Others (Please specify)
Designation: *
Proprietor Partner Director / CEO Executive Senior / Corporate Manager Manager Non Executive Others
Name of Employer / Business: * Address of Employer / Business: *(include department)
Monthly Less than Rs.20,000 Rs.20,000 - 49,999 Rs.50,000 - 99,999 Rs.100,000 - 199,999 Rs.20,000 - 299,999
Above Rs. 300,000
KYC INFORMATION
Purpose of opening the account *
Salary Remittance Business Profit Loan Repayment Savings Investment Purpose Crediting of Interest
Utility Bill Payment Education Purpose Household Expenses Others (Please specify)
Sourse of credits to A/C *
Salary Income Rental income Business Profit Remittances Donation / Charity Commission Income
Interest/income from Investments Sales of Assets Others (Please specify)
Expected mode of transaction *  Cash Popositis
Cash Deposits Cash Withdrawals Cheque Debits Cheque Credits CLIPS/CEFT In CLIPS/CEFT Out
ITT OTT All of the above Others (Please specify)
Anticipated monthly inflows of funds to the account *
Less than Rs. 100,000/- Rs. 1,00,000 to 499,999/- Rs. 5,00,000 to 999,999/- Rs. 1,000,000 to 1,999,999/-
Rs. 1,000,000 to 1,99,999/- Rs. 2,000,000 to 2,999,999/- Rs. 3,000,000 to 3,999,999/- Over Rs. 5,000,000/-
Wealth generated from *
Profession or Employment Business Ownership Inheritance Investments Others (Please specify)
Politically Exposed Person (PEP) *  Are you a Politically Exposed Person (PEP) or relation party / connected party to a politically exposed person?  Yes  No
If it is a connected party or Relation party to PEP, state the relationship?
Are you a citizen of another country (includes dual citizenship)  Yes No Country
Are you a resident of another country (includes greencard holder)  Yes  No  Country
Are you a tax payer of another country  Yes No Country
Tax identification Number of the above specified country
TERM DEPOSIT (FIXED DEPOSIT/CALL DEPOSIT)
Call Deposit: Fixed Deposit Currency LKR Amount: Period: Months Days
Interest payable : Monthly Maturity Renewel Instruction : Renew Capital & Interest Renew Capital Only Do not Renew
Payment of Capital: Nations A/C No:
Payment of Interest : Nations A/C No : Amount : Amount :
Debit Instructions: Nations A/C No:

Applicant Signature ......

A-A01P2

INTRODUCTION (CURRENT ACCOUNTS ONLY.TO BE COMPLETED BY THE INTRODUCER)			
I, undersigned hereby confirm that the applicant of this current account is personally known to me and I consider him / her a suitable person to conduct a current account with Nation Trust Bank PLC.			
Name of the introducer:	NIC:		
Address of the introducer:			
Current Account Number:			
Date: D D M M Y Y Y Y Signature / Seal	SV		
For Current Account only: Name that should appear on the cheque book **			
NOMINATION			
Nomination required: Yes No If yes, please attach the completed nomination form and collect the acknowledgement from the bar account.	nk official. Nomination is not aplicable in the case of current		
DECLARATION FOR ELECTRONIC FUND TRANSFER CARDS			
To: Director- Department of Foreign Exchange (To be filled by the Applicant to obtain foreign exchange against Credit/Debit or any other Electronic	: Fund Transfer Card)		
I/We(Primary/Supplementary Cardholder),(Primary/Supplementary us on this form are true and correct.	ry Cardholder) declare that all details given above by me/		
I/We hereby confirm that I/ We am/ are aware of the terms and conditions applicable for the use of E No. O3 of 2021 dated 18 March 2021 (Annexed) issued under the provisions of the Foreign Exchange A for transactions in foreign exchange and I/We hereby undertake to abide by the said conditions.	electronic Fund Transfer Cards (EFTCs) as detailed in the Directions Act, No. 12 of 2017 (the FEA) subject to which the card may be used		
I/We further agree to provide any information on transactions carried out by me/us in foreign exchan for the purpose of the Act.	ge on the card issued to me/us as Nations Trust Bank may require		
I/ We am/ are aware that the bank is required to suspend availability of foreign exchange on EFTC if reasonich are not permitted in terms of the annexed Directions issued under the provisions of the FEA are matter to the Director - Department of Foreign Exchange.	sonable grounds exist to suspect that foreign exchange transactions being carried out on the EFTC issued to me/us and to report the		
I/ We also affirm that I/ We undertake to surrender the EFTCs to the bank, if I/ We migrate or leave Sri L Further, I/we also agreed to notify my/our change in residential status to the bank, if any, accordingly.			
the language of my/our choice before the signing here of and I/we have read and understood the de consent to be bound thereby.  Applicant Signature  CIF: Name:	taus terms and conditions theretire ontained and agree and		
CUSTOMER ACKNOWLEDGEMENT	7		
I acknowledge receipt of Debit card No:	Customer's Signature :		
FOR BANK USE ONLY			
Declaration for Electronic Fund Transfer Cards  I, as the Authorized Officer of the bank have carefully examined the information together with rebona-fide of these information and documents. Further, I as the Authorized Officer of the bank uncarried out by the cardholder on his/ her EFTC in foreign exchange and to suspend the availability of for that foreign exchange transactions which are not permitted in terms of Directions No. O3 of 2021 (Exchange Act, No. 12 of 2017 are being carried out on the EFTC, in violation of the undertaking give the Director - Department of Foreign Exchange.	dertake at all times, to exercise due diligence on the transactions breign exchange on the EFTC if reasonable grounds exist to suspect dated 18 March 2021 issued under the provisions of the Foreign		
Copy of NIC / PP  Tenancy agreement  Letter from a public authority  Name screened against SDN List  Statement of other banks  Recent utility bills (specify)  Income tax receipt / Assessment Notice	Copy of Resident Visa Other		
Data verified and Signature witnessed by	Terms and Conditions handover  I here by confirm that below mentioned Terms & Conditions were handed over to the customer.		
Document checked by			
ARM Code	GBC NKIP NPIP NSS Savings Foreign Currency T&C Others		
Manager / Assistant Manager (Name,Employee ID & Signature)  Date	Staff ID Signature		
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