



## PERSONAL / JOINT NON RESIDENT ACCOUNT OPENING FORM

### FOR OFFICIAL USE ONLY

Branch \_\_\_\_\_

Customer ID No. (Cumm.) \_\_\_\_\_

Date

Account No \_\_\_\_\_

I / We wish to open an account at Equity Bank Ltd. And undertake to comply, observe and be bound by the general terms and conditions in force from time to time governing the operation of the accounts with the bank

### TYPE OF ACCOUNT

Current

Savings

Other (Specify) \_\_\_\_\_

### PERSONAL ACCOUNT HOLDER

Account Name \_\_\_\_\_

### 1ST APPLICANT

Full Names (Mr./Mrs./Ms./Miss./Dr./Prof.) \_\_\_\_\_

Nationality: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ ID/ Passport No: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_

Code: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Tel. Office: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Currency:  Kshs.  Foreign Currency (Specify) \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Postal Address: \_\_\_\_\_

Next of kin: \_\_\_\_\_

ID/ Passport No: \_\_\_\_\_

Next of kin Address: \_\_\_\_\_

Tel: \_\_\_\_\_

**JOINT ACCOUNT HOLDERS (WHERE APPLICABLE)**

**2ND APPLICANT**

Full Names (Mr./Mrs./Ms./Miss./Dr./Prof. \_\_\_\_\_)

Nationality: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ ID/ Passport No: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_

Code: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Tel. Office \_\_\_\_\_ Mobile No. \_\_\_\_\_

Fax. \_\_\_\_\_ Email. \_\_\_\_\_

Employment/Occupation Details \_\_\_\_\_ Personal File No. / Growers No. \_\_\_\_\_

Employer's Postal Address \_\_\_\_\_ Tel: \_\_\_\_\_

**3RD APPLICANT**

Full Names (Mr./Mrs./Ms./Miss./Dr./Prof. \_\_\_\_\_)

Nationality: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ ID/ Passport No: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_

Code: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Tel. Office: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Fax. \_\_\_\_\_ Email. \_\_\_\_\_

Employment/Occupation Details \_\_\_\_\_ Personal File No. / Growers No: \_\_\_\_\_

Employer's Postal Address \_\_\_\_\_ Tel: \_\_\_\_\_

Do you have any other Account(s) with Equity Bank or any other Bank? Yes  No  If yes, please give details:

Account Number	Bank	Branch
1.		
2.		

Do you want to be issued with a cheque book? Yes  No  If yes, indicate:

Number of leaves: 25  50  100  Size: Corporate  Personal  Voucher

Allow Sweep: Yes  No

Why did you choose Equity Bank?



## INTRODUCER

Full Names (Mr./Mrs./Ms./Miss./Dr./Prof. \_\_\_\_\_)

Mailing Address: \_\_\_\_\_ Street: \_\_\_\_\_ State \_\_\_\_\_ Code: \_\_\_\_\_ Country: \_\_\_\_\_

Mobile No. \_\_\_\_\_ Tel. Office \_\_\_\_\_ State: \_\_\_\_\_ Account No \_\_\_\_\_

### DECLARATION

I/We confirm that;

- a) The information I/We have provided herein and the disclosures made are true; and
- b) I/We have received, read and understood the general terms and conditions of the Bank and undertake to comply, observe and be bound by the same.

Names in Full (BLOCK LETTERS) of Authorised Signatories	National ID/ Passport No.	Specimen Signature
1st Applicant.		
2nd Applicant.		
3rd Applicant.		

### FOR BANK USE ONLY

Account Number

Branch \_\_\_\_\_

Account Name \_\_\_\_\_

Account Opened by \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

NAME OF STAFF

	Form completed by/in presence of	Details input by	Account verified by
Initials / Sign.			
Date Signed			

### ACCOUNT OPENING CHECK LIST

- Original ID's/Passport Sighted
- ID's/Passport copies obtained
- Application details completed
- Specimen Signature Obtained
- Cheque book ordered
- Photo taken, signature scanned
- ATM services data keyed in
- SMS banking data keyed in
- Signed terms and conditions attached

**CURRENT BANKERS AUTHENTICATION**

**Name of the Bank:** \_\_\_\_\_

**Bank Address:** \_\_\_\_\_

**Bank Tel No:** \_\_\_\_\_

**Banks Official:** \_\_\_\_\_

**Stamp & Signature:** \_\_\_\_\_

I confirm that I have checked that all the above details have been completed in accordance with KYC procedures and that relevant documents are attached. I confirm acceptance of this customer relationship with Equity Bank Limited.

Branch Manager.....Signature..... Date

WRITE NAME