

OFFICIAL USE ONLY	
CIF #:	
Acct #:	
Date opened:	
Branch:	

Please review the information and indicate correctness by signing in the space provided below.

CORPORATE DETAILS			
NAME OF ENTITY			

ADDRESS DETAILS			
ADDRESS: (LINE 1)	CITY:	COUNTRY:	ZIP CODE/POSTAL CODE:
PHONE NUMBER (BUSINESS):	PHONE NUMBER (BUSINESS):	CELLULAR/FAX NUMBER:	

ACCOUNT INFORMATION			
ACCOUNT TYPE:	OPENING AMOUNT:	RATE:	REMARKS:
Select Account Type	\$		

SOURCE OF FUNDS	
WHAT IS THE SOURCE OF YOUR INITIAL DEPOSIT?	
<input type="checkbox"/> SAVINGS <input type="checkbox"/> INCOME FROM EMPLOYMENT <input type="checkbox"/> INTERNAL TRANSFER <input type="checkbox"/> PROPERTY INVESTMENT <input type="checkbox"/> INHERITANCE	
<input type="checkbox"/> OTHER	<input type="text"/>
HOW WILL ACCOUNT BE FUNDED?	
<input type="checkbox"/> SALARY <input type="checkbox"/> CASHIERS CHEQUES <input type="checkbox"/> BANK WIRE TRANSFER <input type="checkbox"/> PROFIT FROM BUSINESS	
<input type="checkbox"/> OTHER	<input type="text"/>

ACCOUNT ACTIVITY (Total value of transaction in and out of the account)	
POTENTIAL ACTIVITY DEPOSIT \$	POTENTIAL ACTIVITY WITHDRAWALS \$
INCOMING /OUTGOING WIRE TRANSFER \$	OTHER \$
FREQUENCY OF DEPOSITS: <input type="checkbox"/> DAILY <input type="checkbox"/> WEEKLY <input type="checkbox"/> BI WEEKLY <input type="checkbox"/> MONTHLY	FREQUENCY OF WITHDRAWALS: <input type="checkbox"/> DAILY <input type="checkbox"/> WEEKLY <input type="checkbox"/> BI WEEKLY <input type="checkbox"/> MONTHLY

AUTHORIZED SIGNATORIES DETAILS		
First Name, Middle Name(s), Surname	D.O.B (mm/dd/yyyy)	CIF#
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

**AGREEMENT AND DECLARATION**

**Current Account**

In consideration of the Bank dealing with or continuing to deal with he undersigned (herein called the "Customer") in the way of its business as a bank, you agree with the Bank as follows:

Subject to any specific instructions given to the Bank in writing by the Customer hereby waive every presentment, notice of dishonour and protest of all bill of exchange, promissory notes, cheques and other instruments drawn, made, accepted or endorsed by the Customer, now or hereafter delivered to any branch of the Bank for any purpose whatsoever and the Customer shall be liable to the Bank in respect thereof as if presentment. Notice of dishonour and protest had been duly done or given;

If the Bank should consider it in the best interest of the Customer or the Bank that any such instrument should be noted or protested because of any endorsement other than that of Customer or for any other reason then at the discretion of any officer of the Bank, the same may be noted or protested accordingly, but the Bank shall not be liable to the Customer for any failure or omission to note or protest any such instrument;

When any act or thing is necessary or required to be done in the course of or in connection with the banking business of the Customer at a place where there is no branch of the Bank, the Bank may use the services of any bank or other agency for the purposes thereof and in such case the Bank shall not be liable to the Customer by reason of any act or omission of such bank or other agency in the performance of the services required of it or by reason of the loss, destruction or delayed delivery of any instrument, security, certificate or document of any kind while in transit to or from such bank or other agency or while in its possession.

The Bank may debit any of the Customer accounts at any branch of the Bank with the amount of any bill of exchange, promissory note, cheque or other instrument (i) which is payable at any branch of the Bank and has been or may hereafter be drawn, made or accepted by the Customer, or (ii) which, having been previously cashed by the Bank or credited to any such account, is returned to the Bank unpaid or in respect of which settlement is not received by the Bank, together with any charges and expenses properly incurred by the Bank in connection therewith and the Customer, shall be liable to the Bank in respect of each amount so debited.

Upon negotiation at any branch or agency of the Bank of any cheque drawn on the Bank by the Customer, the Bank may, if and whenever it sees fit, immediately debit the amount of such cheque to the account on which it is drawn.

The Customer shall pay to the Bank forthwith after demand therefore any overdraft, indebtedness or liability in favour of the Bank in connection with or arising out of the operation of any account together with interest not exceeding 18% per annum for the time being.

All information in relation to the account of the Customer may be recorded or stored by the Bank in such form and by means of such devices as the Bank may see fit and the Bank is under no such obligation to retain original documents, instruments or vouchers other than those belonging to or entrusted to the Bank by the Customer.

The Bank may use the services of any electronic data processing service bureau or organization in connection with keeping any account of the Customer, and in such case the Bank shall not be liable to the Customer by reason of any act or omission of such service bureau or organization in the performance of the services required of it.

Within thirty days of the date of each delivery from time to time or to the order of the Customer a statement of the Customer's account together with the relative cheques and vouchers, or, if the Customer has instructed the Bank to forward such statements and cheques and vouchers by mail to the Customer, within thirty days of the date of each such mailing as shown by the records of the Bank, the Customer will examine such cheques and vouchers and all entries appearing in such statement and will notify the Bank in writing of any errors, irregularities or omissions therein or there from; and upon the expiration of said period of thirty days (save as to any errors, irregularities or omissions previously notified to the Bank as aforesaid and save as to payments made on forged or unauthorized endorsements) it shall be finally and conclusively settled and agreed as between the Bank and the Customer that the amount of the balance shown in such statement is true and correct, that the said cheques and vouchers are genuine, that all amounts charged in the said account are properly chargeable to the Customer, that the Customer is not entitled to be credited with any amount not shown on the said statement and that the Bank is released from all claims by the Customer in respect of any and every item in the said statement. If the Customer has not taken delivery of any statement together with the relative cheques and vouchers by collecting the same on or before the thirtieth day following the date on which they became available (as to which the Bank's records shall be conclusive evidence), the same shall be deemed to have been delivered to the Customer on such thirtieth day.

The term "statement" shall include passbook where applicable and, if the Customer carries more than one account with the Bank, this agreement shall apply to each such account.

In consideration of Bank keeping the account(s) of the undersigned, the undersigned expressly agrees that the said Bank may make a reasonable charge at its discretion for keeping and operating the said account(s) and the said Bank hereby authorised to debit such account(s) with the amounts so charged. The schedule of charges may be ascertained upon enquiry.

Until further notice in writing the Bank is hereby authorised and directed to forward from time to time by ordinary mail to the undersigned at the address provided and at the risk of the undersigned, all statements of the current Tandem account/s of the undersigned with you together with the relative cheques and vouchers.

#### Savings Accounts

A minimum deposit of \$50 is required to open an account. A minimum daily balance of \$50 must be maintained otherwise a service fee of EC\$5.00 will be charged every month the balance remains below \$50. 00.

Interest is added on your account quarterly. Interest will be allowed at the rate and on terms established by the Bank from time to time and shall be added to principal. The current rate can be ascertained at the Bank.

The bank reserves the right to reduce the rate of interest on, and to charge a commission for, the keeping of any account if, in the opinion of the Bank, such account does not appear to be operated as a true savings account.

The Bank reserves the right at anytime to alter the terms and conditions on which savings accounts are conducted. The completed deposit voucher or withdrawal voucher with your account number, name, signature and the amount should be handed to the Customer Service Representative. The duplicated copy of this voucher will be returned to the depositor initialed and stamped by the cashier.

Cheques may not be drawn on Savings Accounts. The Bank reserves the right to require fifteen days' notice of withdrawal of all or any portion of the amount at credit of the account.

Statements will be issued quarterly on March 31, June 30, September 30 and December 31 in each year. No Passbook will be issued with this account. The bank will forward all quarterly statements of the savings account/s by ordinary mail to the undersigned at the above stated address, until further notice in writing. The Bank should be notified of any change of address.

#### Certificate of Deposits

IN THE ABSENCE OF INSTRUCTIONS TO THE CONTRARY, AT MATURITY THE BANK WILL AUTOMATICALLY RENEW YOUR DEPOSIT TOGETHER WITH THE ACCRUED INTEREST THEREON FOR A LIKE PERIOD AT A THE PREVAILING RATE OF INTEREST TO BE ADVISED BY THE BANK IN A CONFIRMATION OF DEPOSIT ISSUED IN REPLACEMENT HEREOF. SHOULD YOUR DEPOSIT BE WITHDRAWN PRIOR TO MATURITY AN INTEREST PENALTY MAY BE CHARGED. NO INTEREST WILL BE PAID ON DEPOSIT ACCOUNTS CANCELLED WITHIN 90 DAYS.

**DEPOSITS:** Minimum deposit amount of EC\$5,000.00 is required. Should your account balance fall below EC\$5,000.00 the interest rate on your deposit will convert to the lower of the regular savings rate or lowest available rate for the product.

**RATE:** The interest rate will be the prevailing interest rate on offer for new certificates which have the same term, balance and other features as this original certificate. Interest rates are quoted per annum.

**RENEWALS:** Your account will mature on the stated maturity date. The certificate has an automatic renewal provision, and as such it will automatically renew at our prevailing interest rate on offer for certificates of the same term and amount. You will be required to provide notice to the bank 10 days prior to the maturity date if any changes are to be made to this account. If written instructions are not received at least 10 days prior to maturity, we will automatically renew this deposit.

**RIGHTS OF SURVIVORSHIP:** You, jointly and severally agree with the Bank that the death of one or more of the account holders shall not affect the right of the survivors or any one of them, or of the sole survivor, to withdraw all of the said money and interest from the Bank and to give a valid and effectual discharge or receipt therefore.

**FIXED TERM CD TERMS AND CONDITIONS –** General Certificate of Deposit Terms and Conditions apply as well as the following:

**PENALTIES:** No withdrawals are allowed on these accounts other than at maturity. Exceptions may apply at management's discretion. If withdrawals are allowed the account must be closed and penalties must be charged immediately. No interest will be paid on accounts closed with terms less than 3 months. Should accounts be closed after a period of 3 months, interest will be recalculated at the prevailing regular savings rate prorated per annum. The bank reserves the right to make payments on account closures up to 10 days after receiving instructions.

**FLEX CD TERMS AND CONDITIONS –** General Certificate of Deposit Terms and Conditions apply as well as the following:

**ADDITIONS:** Additional deposits of EC\$2,000.00 or more may be added to the Flex CD. These additional deposits will accrue at the same rate as the Flex CD.

**WITHDRAWALS:** Withdrawals of up to 25% of the principle balance may be made during the term of the CD. More than one withdrawal may be made, however, total withdrawals during the term of the CD must not exceed 25% of the principle. Accounts are restricted to 1, 2, 4 and 6 withdrawal allowances on the 3, 6, 12 and 18 month Flex CDs respectively before a penalty applies. Five days notice is required for all withdrawals. The bank reserves the right to make payments on withdrawal or closure request up to five days after receiving instructions.

**PENALTIES:** Account closures, withdrawals without notice and withdrawals in excess of allowances are subject to the following penalties:

Under 6 months	–	one (1) months interest
6 – 12 months	–	two (2) months interest
Over 12 months	–	three (3) months interest

I hereby certify that the above information provided is true and that I have read the Bank's General Terms and Conditions and agree with the contents thereof.

Signature 1: \_\_\_\_\_ Signature 2: \_\_\_\_\_  
(mm/dd/yyyy)

Signature 3: \_\_\_\_\_ Signature 4: \_\_\_\_\_  
(mm/dd/yyyy)

Signature 5: \_\_\_\_\_ Signature 6: \_\_\_\_\_  
(mm/dd/yyyy)

Signature 7: \_\_\_\_\_ Signature 8: \_\_\_\_\_  
(mm/dd/yyyy)



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CIF #:	
Acct #:	
Date opened:	
Branch:	

Check appropriate box and retain list with Customer Opening Documents

SECTION A - PERSONAL ACCOUNTS		
Legible copy of valid Photo ID for each person on Account (Passport, Voters ID, Drivers License) <i>Social Security &amp; Medical Benefits card in cases where there are genuinely no photo ID'</i>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
True name and any other aliases used by customer	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Date and Place of birth	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Copy of Utility Bill no more than six months old (to confirm address)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Original Job Letter or evidence of Work Permit Issued	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Bank or Professional Reference (if applicable) If waived please provide reason	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Credit Check from Local Financial Institutions	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Account Application completed and Signature Card signed	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Indemnity Form completed and signed	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
OFAC Report including signatories/ directors/ beneficial owner (s) (if applicable)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Nature of the Account	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Source of Funds (if applicable)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Online Banking /TeleBanking Service	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Nature of Business if self-employed	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Antigua Business License Number (If account is a Trading As) <b>Additional Form to be Completed (BA-8 Sole Ownership or BA-18 Partnership)</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Notarized copy of photo ID and Signatures (Only if documents are not being signed in the presence of a Bank Officer)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
SECTION B - CLUBS AND SOCIETIES		
Clubs or Societies' Rules/Constitution	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Letter of Request to open account and Identify Signatories	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
<b>Additional Forms to be Completed ( BA-19 ) Plus required Information in Section A</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
SECTION C – CORPORATE ACCOUNTS		
Letter of Request or Original Corporate Resolution including nature of business to open account	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Certificate of Incorporation and Certificate of Good Standing	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Memorandum and Articles of Association	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Certificate showing the Registered Office of the Corporation	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
Financial Statements (if applicable)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
<b>Additional Forms to be Completed (BA-10 , BA-26) Plus required Information in Section A</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
SECTION D – POWER OF ATTORNEY		
Power of Attorney documents in accordance with our Internal Procedures relative to the account (Refer to POA Manual)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Remarks:		
<b>Additional Forms to be Completed (BA-17) Plus required Information in Section A</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Note:  
 All copies made by staff must be stamped "True copy of the original document" and signed.  
 Any deviation from the above should be referred to Management for prior approval.  
 In the event that any of the above items are not obtained please state comments in REMARKS section.

**BANK USE ONLY**

Prepared by: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reviewed by ( Supervisor): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Verifications Department: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**ACCOUNT TYPE:**            **Acct Number:**

<b>Account Name:</b>		
<b>CIF #:</b>		
Name	INDICATE: Joint/Single/P.O.A.	Signature
		Date:
		Date:
		Date:
		Date:
		Date:
		Date:

Witnessed By: \_\_\_\_\_