Nsutaman Rural Bank Plc.

ACCOUNT OPENING FORM - INDIVIDUAL/JOINT ACCOUNT	
ACCOUNT TYPE Savings Current Joint Other Specify AGENCY/ BRANCH	Affix Passport Photograph Here
STAMP	
ACCOUNT NO. (For office use only)	
1A PERSONAL INFORMATION	
Title Surname First Name	
Middle Name(s)	
Former Name	
Marital Status (Please tick as appropriate) Single Married Other (Pls Specify) Gender M	F
Date of Birth D M M Y Y Y Place of Birth	
D D M M Y Y Y Y	
Mother's Maiden Name	
Nationality Resident Permit No.	
Permit Issue Date Permit Fyniry Date	YYYY
Father's Maiden Name	
Nationality Resident Permit No.	
Permit legue Date	
D D M M Y Y Y Y TERRIT EXPRIS DATE D D M M	Y Y Y Y
Tax Identification Number (TIN) Region	
Purpose of Account (Please Tick) Salary Savings Business Other, Specify	
1B. PERSONAL INFORMATION Title Surpame	
Title Surname	
First Name	
Middle Name(s)	
Former Name	_

Marital Status (Please tick as appropriate) Single Married Other (Pls Specify) Gender M F
Date of Birth D D M M Y Y Y Place of Birth Place of Birth
Mother's Maiden Name
Nationality Resident Permit No.
Permit Issue Date D D M M Y Y Y Permit Expiry Date D D M M Y Y Y Y
Father's Maiden Name
Nationality Resident Permit No.
Permit Issue Date D D M M Y Y Y Y Permit Expiry Date D D M M Y Y Y Y Y T T T T T T T T T T T T T
Tax Identification Number (TIN) Region
House Ownership Householder Living with parents Others Nester Renter
Purpose of Account (Please Tick) Salary Savings Business Others (Specify)
2 CONTACT DETAILS
Residential Address
City / Town / Village Nearest Landmark
Proof of Address (Indicate type and Serial Number) Metropolitan, Municipal, District Assembly Area (MMDA)
Mailing Address
Phone Number 2
Email Address
3. VALID MEANS OF IDENTIFICATION
National ID Card Driver's License Passport Voter's ID
ID No.
ID Issue D D M M Y Y Y Y Expiry Date D D M M Y Y Y Y Date
4 EMPLOYMENT DETAILS
Employed Self Employed Unemployed Student Others (Pls Specify)

Date of Emplo	oyment (If E	Employe	ed)	D	D	M	M	Υ	Y	Υ	Y												
Annual Salar	y / Expected	d Annu	al Inco	me																			
Annual Salary: Less than GHC5,000 GHC5,001 - 10,000 GHC10,001 - 20,000 More than GHC20,000																							
Employer's N																							
Employer's A	ddress															_							
																\perp							
Nearest Land	mark				_		1				_		_	1									\neg
0; (7 ()	C11																						
City / Town / \	village						$\overline{}$	\perp		\top		Re	egion										
													J	L									
Nature of Bus	siness/Occu	pation																					
Office Phone	Number					_					Мо	bile I	Numl	er									
Email Addres	s									_													
5 DETAILS	S OF NEXT	OF KI	N																				
Title		Gende	er F		М]																
Surname															_								
First Name:										7				_									
Middle Name																of Bi							
Middle Name										1		D	D	M	ı	Λ	Υ	Y	Y	`	Y		
Relationship										_													
Relationship										\neg					Т	Т			Т				
Phone Number	er (1)										Phor	ne Nu	ımbe	r (2)									
THOUSE TRAINING	0. (1)					1					1101	10 110		. (=)		Т			Т				
Residential A	ddress					•																	
Region																							
6 ADDITION	NAL DETAI	LS																					
Name of Ben	eficial Owne	er(s) of	the Ac	ccour	nt																		
				<u>'</u>		Т	T	T	T	T	T	T				T	T	T	Ť	T			$\overline{\Box}$
Spouse's Nar	me																						
						Т	Т		Τ		Т					Т			П	П			
Spouse's Date of Birth	D D	ММ	Y	Υ	Υ	Υ		Sį	oouse	e's C	Occup	oation	1										
Sources of Fu	unds to the	Accour	nt 1							_					_	_	_		_		_		$\overline{}$
Sources of Fu	unds to the	Accour	nt 2								$\overline{}$			Т	Τ	T	\top	\top	\top	\top	\top		

Le۱	el o	Depo	osits			,							_							ı									
													F	requ	ienc	y of	Dep	osit	S	l									
Exp	expected Annual Income from other sources																												
Nar Nar	lame of Associated Business(es) 1																												
Ivai		1 /330	Joiate	u Dusi	11033	(63)	†		Т		Т	Т							Τ	Т				Т	T		Т	Т	
Naı	me o	f Asso	ociate	d Bus	iness	(es)	2																		_				
l ta		17.000	Joiato	u Duo		(00)	<u> </u>		Т		Т	Т								Τ				Т	Т		Τ	Τ	
Naı	me o	f Asso	ociate	d Bus	iness	(es)	3																						
		17.000	o ciano				Ī				Τ	Т								Τ							Τ	Τ	
Typ	e of	Busin	ness																										<u> </u>
Ť																					Т				Т				
Bus	sines	s Add	Iress																										
	AC	COLIN	ITC M	UTU (THE	D D	A NILZ	· C																					
	AU	COUN	115 W	ПНС) I HE	КБ	ANN	.5																		Ţ			
S	/N	E	NAN ADDF BANK	IE ANI RESS (BRAN	OF CH			AC 1	CO	JNT IE					Þ	CC	OUN	T NU	MB	ER							Α	TATU CTIV	/E/
1.																													
2. 3.						\dashv								\vdash	H			Н					Н	\dashv	\dashv	+			\dashv
4. 5.																							П			\dashv			\Box
8	ACC	OUN																											
8 (Pl	ACC ease	e tick	as a _l	prop	riate		4: -1-				.: - 4 -																		
8 <i>(Pl</i> Ma	ACC ease	e <i>tick</i> te aut	<i>as a_l</i> thoriz	<i>oprop</i> ation	riate (Ple	ase		as																					
8 (Pla Ma	ACC ease inda e Sig	e tick	<i>as a_l</i> thoriz	<i>oprop</i> ation	riate	ase		as		oropi Both																			
8 (Pla Ma Sol Nai	ACC ease inda e Się me:	e <i>tick</i> te aut gnator	<i>as a_l</i> thoriz	<i>oprop</i> ation	riate (Ple	ase		as																					
8 (Pla Ma Sol Nai Sur	ACC ease inda e Sig me:	e <i>tick</i> te aut gnator	<i>as a_l</i> thoriz	<i>oprop</i> ation	riate (Ple	ase		as																					
8 (Pl/Ma Sol Nai Sur Oth	ACC ease anda e Sig me: rnam	e tick te aut gnator e ame	as aµ thoriz ⁻y	<i>oprop</i> ation	riate (Ple	ase		as						- -								-							
8 (Pl Ma Sol Nai Sur Oth	ease inda e Sig me: nam er N	e tick te aut gnator e ame f Signa	as apthorizery	<i>oprop</i> ation	riate (Ple	ase		as																					
8 (Plane) Ma Sol Nan Sur Oth Clane	ACC ease nda e Siq me: rnam er N ss o	e tick te aut gnator e ame f Signa	as aµ thoriz y y atory Type	<i>oprop</i> ation	riate (Ple	ase		as																					
8 (Pl Ma Sol Nai Sur Oth Cla Ide	ACC ease nda e Sig me: rnam er N ss o ntific	e tick te aut gnator e ame f Signation	as apthorized the state of the	oprop cation	riate (Ple	ase		as																					
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No. umber	oprop cation] Eit	riate (Ple	ase		as																					
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation	as aptithorizing attory Type No. umber	oprop cation] Eit	riate (Ple	ase		as																					
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No. umber	oprop cation] Eit	riate (Ple	ase		as																					
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No.	oprop cation] Eit	riate (Ple	ase		as																					
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No.	oprop cation] Eit	riate (Ple	ase				3oth	to S																		
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No.	oprop cation] Eit	riate (Ple	ase				3oth	to S						PH	HOT	O(:	5)									
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No.	oprop cation] Eit	riate (Ple	ase				3oth	to S						PI	HOT	· · · · · · · · · · · · · · · · · · ·	S)									
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease inda e Sig me: rnam er N ss o ntific epho	e tick te aut gnator e ame f Signation ation	as aptithorizing attory Type No.	oprop cation] Eit	riate (Ple	ase				3oth	to S						Ph	HOT	·O(;	5)									
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease nda e Siq me: namer N ss o ntific epho natu	e tick te aut gnator e ame f Signation ation	as ay thoriz ry atory Type No. umber	pprop cation] Eit	riate (Ple	ase				3oth	to S					FOF		HOT											
8 (PI) Ma Sol Nair Sur Oth Cla Ide Ide Tel	ACC ease nda e Siq me: namer N ss o ntific epho natu	e tick te aut gnator e ame f Signation ation	as ay thoriz ry atory Type No. umber	pprop cation] Eit	riate (Ple	ase				3oth	to S					FOR													

9 ACCOUNT SERVICES(S) REQUIRED (Please tick the applic	cable option below)
Card Preferences ATM Card GH Link O	thers (Please specify)
Electronic Banking Preferences Internet Banking Mo	bile Banking Others (Please specify)
Transaction Alert Preferences Email Alert SM	//S Alert
Statement Preference	Statement Frequency:
Statements to be collected at the Branch/Agency	Semi - Annually Annually
10 DECLARATION / DISCLOSURE	
DECLARATION	
I/We hereby apply for the opening of account(s) with Nsutaman Ru and the documents supplied are the basis for opening such accounts.	
I/We further undertake to indemnify the Bank for any loss suffered	as a result of any false information provided to the Bank.
DISCLOSURE TO CREDIT REFERENCE BUREAUX The Bank will obtain any information about you from the credit refebureaux will record our enquiries which may be seen by other insti	
The Bank shall also disclose your credit transactions to credit reference (Act 726)	rence bureaux in accordance with the Credit Reporting Act, 2007
NameSignature	Date
NameSignature	Date
11 (THIS SHOULD BE ADOPTED WHERE THE APPLICANT HERBY A THIRD PARTY)	IS NOT LITERATE AND THE FORM IS READ TO HIM OR
I agree to abide by the content of this agreement and acknowledge me by an interpreter.	e that it has been truly and audibly read over and explained to
MARK/THUMBPRINT OF CUSTOMER	WITNESSED BY OFFICER OPENING THE ACCOUNT
	Date
D D M	M Y Y Y Y
NAME AND ADDRESS OF INTERPRETER	
LANGUAGE OF INTERPRETATION	
1 REQUIREMENT CHECKLIST	
Savings Account	
NO. DOCUMENTS REQUIRED	CHECKED DEFERRED WAIVED
Duly completed Account opening form.	CHECKED DEPEKKED WAIVED
Specimen signature card duly completed	
Recent passport photograph	
Proof of identity: International passport, Driver's license or National Health card, Valid Ghanaian Voters ID (original must be signed)	
5. Resident Permit (for non - Ghanaian)	
6. Proof of Address: Utility bills etc. (Certified true copy is acceptable if the original is not held)	
7. Letter from Employer / School (for salary account and or student only)	

Fixed/Current /Fixed Investment/Other Types of Account

NO.	DOCUMENTS REQUIRED	CHECKED	DEFERRED	WAIVED
1.				
2. 3.				
4.				
5.				
6. 7.				
8.				
9.				
2 AU	ITHENTICATION FOR FINANCIAL INCLUSION			
1 1- 41-	o contacto de la cont			
	e customer socially or financially disadvantaged? Yes swer to the question (i) above is YES, state other document		with the Bank's policy of	on social/financially
	antaged customer in compliance with paragraph			
			-	
	es the Customer enjoy tiered KYC requirement? Yes	No		
	nswer to question (iii) above is YES, identify the customer ri	sk category		
Lov	v Risk Medium Risk High Risk			
3 AU	THENTICATION FOR POLITICALLY EXPOSED PERSON	ıs		
Is the A	Applicant a Politically Exposed Person? Yes No			
A. AC	COUNT OPENED BY:			
Name				
			D D M M	YYYY
Signati	ure:			
- J				
B. DE	FERRAL/WAIVER OF DOCUMENT (IF ANY) AUTHORISE	ED BY:		
	,			
Name				
			D D M M	YYYY
Signatu	ure:			
C A	DDRESS VERIFICATION CARRIED OUT BY:			
Name	THE OF THE PARTIES OF DI.			
ivallie				
				

COM	ΜE	NT(S) (A	Addre	ess	desc	ripti	on a	nd re	sult	find	ling)):													
				••••					••••									 						• • • • •		
				••••														 								
				••••														 								
				••••														 								
D. <i>A</i>	AC(COL	INT (OPE	NIN	G AU	ТНС	RIZ	ED B	Y:																
Name																										
																		D	D	М	М	Υ	Υ	Υ	Υ	
Signat	ure	e:																								
						,	AUTI	HOR	IZED)																
Name																										
																		D	D	M	М	Υ	Υ	Υ	Υ	
Signat	ture	e:				 1AM																				
						IVIZ	V/JOI	_1\ 0	, 00	INI IIY	VIVI\	iioi	•													
D 6	\DE	-011	ac Ni	0E E		ED I	NO IN	TO /	CINIC	· E D	DDU	IT O	шот	-CM	- DO	ONI	M									

Impression state (left/right)