ACCOUNT OPENING APPLICATION FORM (FOR COMPANIES REGISTERED UNDER THE COMPANIES ACT No 7 of 2007)

The Manager					Date:					
Hatton National Bank Plc				Account No's:						
				L	CIF No:					
(Please complete all details in C	APITAL LETTER	S and mark	(X) where	applicable)						
The Directors of the under mention	ed Company requ	est you to o	pen the foll	owing account/s in t	he name of t	he und	er mei	ntion	ed Co	npany.
Current Account	Savings Accou	unt	Fo	reign Currency/Othe	ers	Curr	ency			
DETAILS OF THE COMPANY										
Name of the Company										
Registered Address										
Company Registration No										
Telephone No's				Fax No's]
E-mail Address										
Communication Address (If different from Registered address)										
REQUIREMENT FOR ACCOUNT STA Mode of Collection E Mail Frequency Monthly	Post Weekly	Daily	(Weekly & C	aily statements by Post	t subject to tar	iff)				
INTERNET BANKING Please provide Internet Banking	(Separate	application to	be submitted	3)						

In pursuance of this request, the following documents are submitted herewith -

- 1. Certified copy of Certificate of Incorporation. (if not already available with the Bank)
- 2. Certified copy of the Resolution passed by the Board of Directors regulating the opening of account, authorized signatories and other matters incidental thereto.(Specimen given below)
- List of Directors duly certified by the Registrar of Companies (Form 1/Form 40/Form 20) along with certified copies of the National Identity Card of the Directors. (if not already available with the Bank).
- Certified copy of the Articles of Association (if not already available with the Bank).
- 5. Certified copies of NICs of the Directors and authorized signatories
- 6. KYC form (AML-2) duly completed / signed by all directors ,individually (If not already available with the bank)
- 7. KYC form (AML 1(C)) duly completed /signed by the authorized signatories (If not already available with the bank)
- 8. Certified copy of the Export Development Board Certificate.(If a Foreign Currency Account) (If applicable)
- 9. Certified copy of the National Gem & Jewelry Authority Certificate. (If a Foreign Currency Account) (If applicable)
- 10. Valid documentary evidence of Suppliers of input for exports/professional services providers/foreign employment agencies. (If a Foreign Currency Account) (If applicable)
- 11. Certified copy of the approval document of the Controller of Exchange for Special Foreign Currency Accounts. (If applicable)
- 12. Certified copy of any license issued by a regulatory authority to carry on the business of the company (If applicable)

We authorize the Bank to act on the instructions of the persons empowered by the below/attached Board Resolution and hereby certify that the information provided above and in the attached annexure are true and correct.

If for any reason the Bank is informed of a dispute amongst the Directors/ Governors of the Company, any incorporated body or corporation in relation to the operation of any account opened at any branch of the Bank, the Bank has a right to limit or fully cease the operations of the account under dispute until such time the dispute is resolved to the satisfaction of the Bank.

We hereby confirm having received a booklet containing the General Terms and Conditions applicable for Customer Accounts, Dealings and Transactions of Hatton National Bank PLC applied for by this application form (which together with the terms and conditions of this application shall constitute our contract with the Bank) and having read and understood/ explained and understood, signed this document in agreement thereof and in acceptance of all such Terms and

DETAILS OF DIRECTORS/A	AUTHORISED SIGNATORIES
------------------------	------------------------

SIGNA TURE & REF NO.

onditions. ETAILS OF DIRECTORS/AUTHORISED SIGNATORIES					
L NAME	DESIGNATION	NIC/PP NO.			
ECTOR		R/COMPANY SECRETARY			
be signed on the Company Rubber Stamp)					
ard Resolution – (if a separate resolution suital	oly incorporating the below mentioned cor	nditions is not attached)			
hereby certify that the following resolution of the Board of					
s passed at a meeting of the Board held on the (2)					
ESOLVED:					
hat an account/accounts in the name of (1)					
branch, and the account opening a	pplication to be signed by two directors or a director a	and the company secretary.			
hat the Bank be instructed to honor and debit to the Compa					
any such debit, all cheques or other orders signed, bills acc					
pted or made by (3)certified document incorporating the specimen signatures					
	or the authorized signatories, signed by two director	is of a director and the company secret			
the company rubber stamp, is attached) That this resolution be communicated to the Bank and rem	pain in force until an amending resolution shall be no	assed by the board of directors, and a c			
ereof, certified by the Chairman of the meeting or/and the Co					
That the Bank be informed of any changes which may occur		d officers of the Company."			
GAPALES					
RECTOR	COMPAN	NY SECRETARY			
o be signed on the Company Rubber Stamp)					
Insert name of the Company ; (2)Insert date of the meeting	; (3)Insert the combination of signatures and their de	scriptions eg ."Any two directors" or oti			
se as may be required by the Articles of Association.					
BANK USE ONLY	Nuc c. I.	Santas Coda			
Account opening documents scrutinized and found to be in	order MIS Codes	Sector Code			
	Subsector Code	Industry Type			
	Occupation Code	BASLE Code			
SIGNATURE & Ref. No.	OFFICER Account Type				
Date AUTHORISED (OFFICER Account Type				
		TO ODEN CURRENT ACCOUNT			
Date AUTHORISED (DATA CHECKED BY AUDITE) TO OPEN CURRENT ACCOUNT			
		O TO OPEN CURRENT ACCOUNT			
	D BY AUTHORISED	O TO OPEN CURRENT ACCOUNT			

SIGNA TURE & REF NO.

BRANCH MANAGER/ DESIGNATED A CLASS OFFICER