

ACCOUNT OPENING / FIXED DEPOSIT FORM

1. Business Particulars

Registered Name

Business Registration No.

Business Entity	Limited Company	Partnership	Society/Club/Association
	Corporation	Sole Proprietorship	Others :

Registered Address

Department

Sub-Department

Street

Building Number

Building Name

Floor

PO Box Number

Room

Postal Code

City

Town Location Name

District Name

Country Subdivision

Country

Mailing Address (if different from Registered Address)

Department

Sub-Department

Street

Building Number

Building Name

Floor

PO Box Number

Room

Postal Code

City

Town Location Name

District Name

Country Subdivision

Country

2. Contact Details

Contact Person

Office Tel Number + -

Email Address

Mobile Number + -

3. Product Details

Product Type	Account Name (if different from Registered Name)	Currency (Local)	Currency (Foreign)	Purpose
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* If "Others: Pls specify" is selected, overwrite this entry with specific free text input.

4. E-mail Statement

Password (min 8 characters)

Name of Authorized Recipient

Email Address

5. Declaration

By signing below, I/we have read, understood, and agree to be bound by, the Terms and Conditions of the Master Terms of Business for Banking and the relevant Country Addendum (each as may be amended or supplemented by the Bank from time to time) with respect to each Account opened and Service provided in connection therewith. Capitalized terms used hereunder shall have the meaning set forth in the Master Terms of Business for Banking and, as applicable, the relevant Country Addendum. I/We declare and certify that the information in this form is true, complete and correct.

6. Agreement & Sign-Off

Name

Date

Title

Name

Date

Title

Authorized Signature/Seal

Authorized Signature/Seal

Name

Date

Title

Name

Date

Title

Authorized Signature/Seal

Authorized Signature/Seal

7. Bank Use Only

Branch

A/C No

CIF No.

Date