

CUSTOMER ACCOUNT APPLICATION FORM

Email completed form to accounts@cashfinancelimited.co Website: www.cashfinancelimited.com

# CASH BANK LIMITED



# Account Opening Documentation:

We seek your understanding and cooperation in furnishing the documents required for account opening and value your time and effort in doing so. We request you to provide suitable documentation as indicated below which is required by the Bank under local laws and regulations and also to comply with KYC guidelines and policy as part of the global effort to combat money laundering, terrorist financing and fraudulent activity.

#### **Important Note:**

- Please fill the form in CAPITAL letters and tick wherever applicable.
- · Avoid any sort of alterations/cutting in the Application form.
- · Produce original documents for verification against each self attested photocopy by Account Holder(s).
- Please produce separate documents to evidence proof of identity and proof of address for confirming name, date of birth and current residential address for each account holder.
- · Please avail of the nomination facility.
- Please attach separate sheets in case the given space is insufficient.

### **Account Opening Requirements:**

- 1. Completed Account Opening Application Form along with required documentation.
- 2. Recent Passport size photographs of all the Account Holder(s) duly signed on front (not more than six months old).
- 3. Current Bank Statement (whichever is applicable).

Documents to be submitted for Account Opening:											
Identification Proof (List A)	Address Proof (List B)										
<ul> <li>Passport</li> </ul>	<ul> <li>Passport</li> </ul>										
Driving License	<ul> <li>Voter ID Card</li> </ul>										
Voter ID Card	Driving License										

- Any Photo ID card issued by Central/State Govt./ Armed forces ID card
- Latest utility bill in the name of the applicant(s) i.e. electricity, water or telephone bill (not older than three months)
- Visa copy / Appointment letter (applicable in case of foreign nationals only)
- Letter from the Embassy confirming residential address (applicable for Diplomats and other Embassy officials)

#### **Special Instructions:**

In case of joint account holder(s), acceptable documents which can be submitted as proofs for establishing relationship-

- Passport
- Driving License
- Voter ID Card
- Photo-Ration Card

For ascertaining Minor's date of birth, acceptable documents which can be submitted-

- Birth certificate issued by State of Local Authority.
- Passport held in the name of the minor.

**Note:** 1. Bank may request for any further specific / additional documents as may be required.



Acc	ount Num	ber	(For Ba	nk use (	oniy)					<b>•</b> •					
										Custom	ier ID I	<u>NO.</u>			
							_								
(To be filled by applicant only) Date D M M Y Y Y Y															
Please fill the form in BLOCK LETTERS with Black/Blue Ink only and tick boxes where applicable. Do not leave any field blank, instead mention Not applicable (N.A.)															
I/We hereby request SC I	I/We hereby request SC Brokerage Branch to open my/ our account. Denominated Currency of														
the Account		HKD		GBP	E	URO		USD							
Type of Account Resident RESIDENT FOREIGNER															
Details of Account - Sole / First Applicant:															
1. Title	Mr.	Mrs.	Ms.	C	Others (	(please	e spec	cify)							
2. Full Name		F i i	r s t			a s	t	M	i d	d I	е				
3. Other common name former name if any	s used /														
4. Reason for using othe	er name														
5. Date of Birth	D M M	YY	ΥΥ	6. Ger	nder	M	lale		Female	e 🗌	Third (	Gender			
7. Nationality / Citizensh	ip														
8. Minor Account	Yes	No	C		9. Sen	ior Cit	izen		Yes	No					
If yes, Name of Parent /	Guardian														
Relationship with minor	Fathe	er	Mother	As	per Co	ourt Oi	rder	Oth	ers						
11. Communication De	tails:														
Permanent / Residential Address															
City															
State															
Pin Code / Zip Code			Co	ountry											
Tel: Residence															
Correspondence / Mailing Address															
City															
State															
Pin Code / Zip Code			Co	ountry											
Contact Details	· · · ·			1 1				1		1			1		
Primary Phone															
Secondary Phone															
Tel : Office										Extn.					
Primary Email															
Secondary Email															



12. Personsal Details:													
Educational Qualification	dergraduate Graduate Postgraduate												
Ot	ners (Please specify)												
Marital Status	married Married Others (Please specify)												
Number of Dependents	Adults Children												
Annual Income (in USD)													
13. Occupation Details:													
Salaried Self-em	ployed Business Retired												
Housewife Student													
In case of Salaried (Please provide Employer details, Designation, Job Profile and Nature of Work)													
In case of Self-employed													
Chartered Accountant / CPA	Doctor Engineer												
Lawyer / Notary	Consultant / Professional Other (please specify)												
Please mention briefly nature of profe													
· · ·													
In case of Business													
Manufacturing	Retailer / Stockist												
Finance / Investment	Wholesaler												
Export / Import	Commission Agent / Broker												
Service Provider													
Trading	Arms and Ammunition												
Antique Dealer	Dealer in precious metals / stones												
Bar / Night Club / Casino	Money exchanger												
Real Estate Agent	Others ( please specify )												
Please mention briefly nature of busir	ess activities undertaken												
-													
Nature of Industry:													
Engineering / Architectural Firm	Food Products Power / Electricity												
IT Software / Hardware	Gems / Jewellery Retailing												
Commodities	Hotel / Restaurant Shipping												
Construction / Real Estate	Chemicals Textile												
Electronic Goods	Leather Timber												
Financial Services	Metals Transport / Logistics												
Others (Please specify)													



# **Details of Account**

1.	Title	Mr.		Mrs.		Ms.		С	ther	s (pl	eas	e sp	ecif	y)							
2.	Full Name			Fi	r	S	t								$\mathbb{N}$	i	d	d	е		
3.	Other common names former name if any	s used /								L	а	S	t								
4.	Reason for using othe	r name											1								
5.	Date of Birth																		 		
	D     M     M     Y     Y     Y     6. Gender     Male     Female     Third Gender															r					
7.	Nationality / Citizensh	ip						_													
8	8 Senior Citizen Yes No																				
9.	9 .Relationship with first applicant (if any)																				
	Documents submitted for establishing relationship																				

## 11. Communication Details:

Permanent / Residential Address																				
City																				
State																				
Pin Code / Zip Code						Cc	ountry	<b>y</b> [												
Tel: Residence																				
Contact Details																				
Primary Phone																				
Secondary Phone																				
Tel : Office															E	ktn.				
Primary Email																				
Secondary Email																				
14. Details of Acco	ount H	olde	r(s):																	
				Kir	ndly	/ S	ign	in	the	e b	ох	bel	ow		 			] [		
Paste your passport photo here																			pa	ste sspo oto
	Kindly Sign in the box below													1						
																		L		



Know Your Customer	(KYC)	) Details:
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Know rour oustome												
	Document submitted for Proof of Identity / Address	Document Identification No. (If any)	Place of Issue	Date of Issue	Date of Expiry							
First Applicant												
Second Applicant												
Third Applicant												
1. Purpose of Accou	int Opening:											
Salary		Loan	Repayment									
Business		Basic	Household Expenses	6								
Investment		Othe	rs ( please specify )									
2. Expected Source	of Funds:											
Salary Receipts		Renta	al Income									
Business Income		Intere	est / Dividend Income									
Income from Invest	tments	Inher	itance									
Consultation / Prof	essional Fees	Othe	rs ( please specify )									
Savings												
3. Expected Accoun	t Turnover (USD):	4. Expec	ted Number of Transa	actions per ye	ar:							
5. Types of Account	:											
Individual Offshore Ac	count (Current & Savings)											
<ol> <li>Low Interest Margin</li> <li>No Limit on Deposit</li> <li>No Limit on Withdrawal</li> <li>Opening Deposit require</li> </ol>	d											
Corporate Offshore A	ccount (Current, Savings and	l Brokerage)										
<ol> <li>Reduced Taxation</li> <li>Average Interest Margin</li> <li>No Limit on Deposit</li> <li>No Limit on Withdrawal</li> <li>Opening Deposit require</li> </ol>	d											
High Yeild Interest Offs	shore Deposit Account (HYID	)										
<ol> <li>Reduced Taxation</li> <li>High Interest Margin</li> <li>No Limit on Deposit</li> <li>No Limit on Withdrawal</li> <li>Opening Deposit require</li> </ol>	d											
		NOTE:										
All international customers are required to submit their account opening request through a registered law firm or attorney in the UK												
6. Whether existing	account holder											
Yes No	If yes, Customer ID		Account Number _									
7. Whether Letter of	Authority/Power of A	ttorney given to anoth	ner person Ye	es 📄 No								
If yes, please provide F	POA Holder's name		_ Date of Birth	D M M N								

Address \_

Identification document (for confirmation of name, date of birth and address)



#### Foreign Exchange Management Act, 1999 (FEMA)

I/We hereby declare that the transactions relating to foreign exchange routed through your Bank do not involve, and are not designed for the purpose of any contravention or evasion of the provisions of the aforesaid Act or of any rule, regulation, direction, or order made here under. I/We also hereby agree and undertake to give such information/ documents as will reasonably satisfy you about the transactions in terms of the above declaration.

#### Authority For Collection of Cheque/Drafts/Documents

I/We may have occasion from time-to-time to hand over to you for collection or negotiation Cheques, Drafts or Bills of Exchange (with or without documents attached) and I/we hereby agree to your forwarding the same to your agents for the time being for collection or negotiation. In the event of your having no independent collecting agent at any centre, I/ we hereby authorize you to send cheques, drafts, etc. by mail directly to the drawee bank itself.

I/We agree and undertake to hold you harmless, free from any responsibility and indemnified for any loss suffered by you in handling this business or transactions due to any cause whatsoever including delay in transit presentation, payment or default by your agent.

In addition to your ordinary rights as holder of such Cheques, Drafts or Bill of Exchange, you are authorized to accept in payment thereof a banker's cheque or banker's cheques payable at your station or at other places and in the event of such cheque(s) not being paid on presentation to debit the amount to our account with all charges incurred thereon. I/We confirm that you can present Bills and receive the amount in respect thereof in accordance with the usage of the place where the Bills are made payable. It is understood that these transactions are in all respects at my/our entire risk and responsibility.

#### **Customer Declaration**

I/We hereby acknowledge that I/we have received, read and understood the Bank's prevailing Terms, Conditions and Rules Governing Deposit Account and Schedule of Fees and Charges relating to the above account being opened by me/ us.

I/We agree to abide by the same as amended from time-to-time and further agree to abide by any additional terms and conditions governing any facilities, products and/or services offered by the Bank as I/we may apply for and/or utilize from time to time.

I/We hereby confirm and declare that in relation to

any Transaction, Dealing(s), Credit including advise or confirmation of the same, the obligations of the Bank shall be subject to the condition that the terms thereof including any document or drafts do not contain state or mention, including without limitation:

- (i) Any countries, organizations, entities, or individuals (under any law) relating to any sanction parties listed under United Nation, European Union, United States of America, Japan, Hong Kong and other authorities;
- (ii) Any goods of origin from sanction countries listed under United Nation, European Union, United States of America, Japan, Hong Kong and other authorities;
- (iii) Any prohibited goods under the list of United Nation, European Union, United States of America, Japan, Hong Kong and other authorities;
- (iv) Any place or loading, place of discharge, or place of transhipment under the list of United Nation, European Union, United States of America, Japan, Hong Kong and other authorities; and/or
- (v) Any vessel or carrier relating to any sanction parties listed under United Nation, European Union, United States of America, Japan, Hong Kong and other authorities.

# *I/We shall maintain the minimum balance requirement as applicable at all times and the Bank shall levy prescribed charges in case of non-maintenance of minimum balance. In case of change of mailing address and other contact details, the same shall be communicated to the Bank in writing.*

It is understood that the above account will be opened on the basis of the statements, declarations made by me/us and I/We represent that the information provided by me/us in this application form and in any other document(s) provided by me/us to the Bank is true, accurate and complete.

I/We acknowledge that the Bank may decline my/our application without providing any reason in which event no contractual relationship will arise between the Bank and me/us.