

Individual Account Opening Form (Multiple Persons)

General Account Information (Complete in block letters and tick where applicable)

Account Type <input type="checkbox"/> Savings Account <input type="checkbox"/> Current Account	Account Currency <input type="checkbox"/> ₺ <input type="checkbox"/> \$ <input type="checkbox"/> £ <input type="checkbox"/> €	FOR BANK USE ONLY Account Branch <input type="text"/> Account Name <input type="text"/> Account No. 1 <input type="text"/> Account No. 2 <input type="text"/> Date <input type="text" value="D D M M Y Y Y Y"/>
Purpose of Account (1): <input type="checkbox"/> Investment <input type="checkbox"/> Transactions <input type="checkbox"/> Personal Savings <input type="checkbox"/> Salaries <input type="checkbox"/> Other (specify) <input type="text"/>	Purpose of Account (2): <input type="checkbox"/> Investment <input type="checkbox"/> Transactions <input type="checkbox"/> Personal Savings <input type="checkbox"/> Salaries <input type="checkbox"/> Other (specify) <input type="text"/>	
Source of Funds (1): <input type="checkbox"/> Salary <input type="checkbox"/> Personal Savings <input type="checkbox"/> Investment <input type="checkbox"/> Other (specify) <input type="text"/>	Source of Funds (2): <input type="checkbox"/> Salary <input type="checkbox"/> Personal Savings <input type="checkbox"/> Investment <input type="checkbox"/> Other (specify) <input type="text"/>	

Personal Details (Applicant 1)

Title Dr. Mr. Mrs. Miss Other

Name
Surname First Name Other Name(s)

Maiden Name (if applicable) Mother's Maiden Name

Gender Male Female

Marital Status Single Married Divorced Separated Widowed

No. of Dependants Children Other Physically Challenged Status Yes No

Place of Birth Date of Birth Hometown

Nationality Country of Origin Country of Residence

Profession/Occupation Email

Educational Level Undergraduate Graduate Post Graduate Not literate

SSNIT Number TIN

Mobile No.(s) Telephone No.

Name of Spouse

Spouse Employment Mobile No.:

For Foreign Nationals Only

Resident/Work Permit No. Permit Issue Date

Place of Issue Permit Expiry Date

Valid Means of Identification (Please tick and provide relevant details)

ID Type	ID Number	Issue Date	Expiry Date
<input type="checkbox"/> National ID	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Others (specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact Details

Postal Address

Residential/Permanent Address

Res. Address Street Name

Nearest Landmark

City/Town Digital Address/Pincode

Metropolitan, Municipal and District Assembly

Title to Residence Self-owned Mortgaged Rented Family House Other (specify)

Proof of Address Electricity Bill Water Bill Tenancy Agreement Other (specify)

Proof of Address Serial Number Issue Date

Residential Address Abroad (for foreign nationals and Ghanaians living abroad)

House No. Street Name

City/Town Suburb

Post Code Country

Foreign Account Tax Compliance Act (FATCA) Requirement For US Nationals

Tax Identification No. Social Security No.

Common Reporting Standard (CRS) Certification (sign off is mandatory for all Customers)

Are you a Tax Resident of another Country? YES NO

Declaration of Tax Residency (other than Ghana)

I hereby confirm that I am, for tax purposes, resident in the following countries (indicate the tax reference number type and number applicable in each country).

Country/countries of tax residency	Tax reference number

Declaration and Undertakings

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be inaccurate or incomplete. Where legally obliged to do so, I hereby consent to the recipient sharing this information with the relevant tax information authorities.

I acknowledge that it is an offence to make a self-certification that is false in a material particular.

Customer Signature: Date

Details of Contact Person (In case of emergency)

Name:

Relationship to contact person: Occupation:

Residential Address:

Mobile No.

Employment Details

Employment Status Employed (Public) Employed (Private) Unemployed Student
 Self Employed Retired Other (specify)

Number of Years with Current Employer: Mode of Salary payment: Cash Cheque Direct Credit

Monthly Salary/ Income (GH₵): Less than 2,000 2,000 - 5,000 5,001 - 10,000 More than 10,000

Employer's Name

Nature of Business

Employer's Address

Nearest Landmark

Region City/Town

Office Phone No. Mobile No.

Employer's Email

Personal Details (Applicant 2)

Title Dr. Mr. Mrs. Miss Other

Name
Surname First Name Other Name(s)

Maiden Name (if applicable) Mother's Maiden Name

Gender Male Female

Marital Status Single Married Divorced Separated Widowed

No. of Dependants Children Other Physically Challenged Status Yes No

Place of Birth Date of Birth Hometown

Nationality Country of Origin Country of Residence

Profession/Occupation Email

Educational Level Undergraduate Graduate Post Graduate Not literate

SSNIT Number TIN

Mobile No.(s) Telephone No.

Name of Spouse

Spouse Employment Mobile No.:

For Foreign Nationals Only

Resident/Work Permit No. Permit Issue Date

Place of Issue Permit Expiry Date

Valid Means of Identification (Please tick and provide relevant details)

ID Type	ID Number	Issue Date	Expiry Date
<input type="checkbox"/> National ID	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Others (specify) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact Details

Postal Address

Residential/Permanent Address

Res. Address Street Name

Nearest Landmark

City/Town Digital Address/Pincode

Metropolitan, Municipal and District Assembly

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Monthly Salary/ Income (GH₵): Less than 2,000 2,000 - 5,000 5,001 - 10,000 More than 10,000

Employer's Name

Nature of Business

Employer's Address

Nearest Landmark

Region City/Town

Office Phone No. Mobile No.

Employer's Email

Account Service(s) required (Please tick applicable option below)

Card Preference: ReadyCash Card Mastercard Standard VISA Card Classic
 Prepaid card Mastercard Gold Other (specify)

Online Purchase: mastercard Secure Code Verified by VISA

Electronic Banking Preference: Internet Banking Mobile Banking

Transaction Alert Preference: E-Alert SMS Alert

Complete a separate form if you ticked any of the E-Banking services above

Statement Preference: Email Postal Collection at Branch

Cheque/Savings Withdrawal Book Requisition Yes No

Beneficial Owner(s) Details (If Applicable)

(Beneficial owner is a person who enjoys the benefit of ownership even though title is in another name)

Title Dr. Mr. Mrs. Miss. Other

Full Name

Relationship to customer

ID Type ID Number

Mobile No. Date of Birth

House No. Street Name

Landmark City/Town

Occupation Region

Spouse Name

Spouse Address

Expected Account Activity

Transaction Type	Expected No. of Transactions Per Month	Expected Amount Per Month
Deposits (Funds inflow)		
Account (1)	<input type="checkbox"/> 1-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21 & Above	<input type="checkbox"/> 1-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> 100,001 plus
Account (2)	<input type="checkbox"/> 1-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21 & Above	<input type="checkbox"/> 1-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> 100,001 plus
Withdrawals (Funds outflow)		
Account (1)	<input type="checkbox"/> 1-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21 & Above	<input type="checkbox"/> 1-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> 100,001 plus
Account (2)	<input type="checkbox"/> 1-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21 & Above	<input type="checkbox"/> 1-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> 100,001 plus

Name of Associated Bus. (If Applicable)

Type of Associated Business Business Line

Associated Business Address % Holding

To Be Completed By All Parties

Account Opening Mandate

Either to Sign
 Both to Sign
 All to Sign
 Others (*specify*)

Name Signature..... Date

Name Signature..... Date

Name Signature..... Date

Name Signature..... Date

Terms and Conditions

Survivorship Clause: Any money for the time being, standing to the credit of our joint account shall be held to the order of the survivor(s).

Joint and Several Liability Clause: Any liability incurred by joint account holders to the Bank, whether in the form of borrowing or otherwise shall be joint and several.

Name Signature..... Date

Name Signature..... Date

Name Signature..... Date

Name Signature..... Date

Jurat (*Where applicant is not literate or is visually impaired and the form is completed by a third party*)

I/We agree to abide by the content of this agreement and acknowledge that it has been truly and audibly read over and/or explained to me/us by a reader/interpreter. The language of interpretation is

Customer's Name Signature

Interpreter's Name Signature

Address of Reader/Interpreter

.....

Mobile No.: Date

Customer's Name Signature

Interpreter's Name Signature

Address of Reader/Interpreter

.....

Mobile No.: Date

Customer's Specimen Signature (Sign three times in the box below)

SIGNATURE	RECENT PASSPORT-SIZED PHOTOGRAPH

Declaration

We hereby apply for opening of account(s) with GCB Bank PLC branch. We understand that the information given herein and the documents supplied are the basis for opening such account(s) and we therefore warrant that such information is correct.

We have read, understood and agree to be bound by the terms and conditions governing the operation of the account(s). We further undertake to indemnify the Bank for any loss suffered as a result of any false information or error in the information provided.

Disclosure to Credit Reference Bureaux

The Bank will obtain information about you from the Credit Reference Bureau to check your credit status and identity. The bureau will record our enquiries which may be seen by other institutions that make their own credit enquiries about you.

The Bank shall also disclose your credit transaction to Credit Reference Bureaux in accordance with credit reporting ACT, 2007 (ACT 726)

Name Signature..... Date

Name Signature..... Date

Name Signature..... Date

Name Signature..... Date

Terms and Conditions for GCB Bank PLC customers

These terms and conditions are applicable to all accounts.

Please read this page carefully. It provides you (The Customer(s)) with important information about GCB Bank PLC (GCB) Current, Savings and other Accounts.

1. The Bank

The information on this page (and any further instructions and conditions that may be prescribed by the Bank from time to time) are the terms of the agreement between you and GCB. When you sign the Account Opening Form you accept these terms as binding on you.

2. The Account

- 2.1 The hours of business will be advertised from time to time.
- 2.2 You assume full responsibility for the genuineness, correctness and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments and receipts or others deposited in the account.
- 2.3 The account may be debited for any service charge that is set by the Bank from time to time.
- 2.4 All notices or letters will be delivered to the address / email supplied by you and will be considered duly delivered and received at the time it is posted. Notices in the press will be deemed sufficient for this purpose.
- 2.5 The Bank will not be liable for funds handed over to any person other than the Bank's Cashier / Teller for the credit of your account. Any anomaly in the entries on your Bank statement must be brought to the attention of the Bank within 30 days of the date thereof and you agree that failure to give such notice absolves the Bank from all liabilities arising there from. The Bank may exercise its general lien or any similar right it is entitled to by or consolidate all or any of my / our accounts with any liabilities to the Bank and set off or transfer any sum or sums standing to the credit of any one or more of such accounts or any other credit.

3. Instructions

- 3.1 The Bank may rely on the authority of each person designated (in a form acceptable to the Bank) by the Customer to send Instructions or do any other thing until the Bank has received written notice or other notice acceptable to it of any change from a duly authorized person and the Bank has had a reasonable time to act (after which time it may rely on the change).
- 3.2 The Bank is not responsible for errors or omissions made by the Customer or the duplication of any Instruction by the Customer and may act on any Instruction by reference to an account number only, even if an account name is provided.
- 3.3 The Bank may act on an instruction if it reasonably believes it contains sufficient information.
- 3.4 The Bank may decide not to act on an Instruction where it reasonably doubts its contents, authorization or origination and will promptly notify the Customer (by telephone if appropriate) of its decision.
- 3.5 If the Customer informs the Bank that it wishes to recall, cancel or amend an Instruction, the Bank will use its reasonable efforts to comply. If the Bank acts on any Instruction sent by any means requiring manual intervention (such as telephone, telex, telefax, electronic mail or disks sent by messenger) then, the Customer will be responsible for any loss the Bank may incur in connection with that Instruction.

4. Statements and Advice

- 4.1 Where requested, the Bank may provide statements and advice to the Customer either physically by post or electronically via e-alert / SMS Alerts or other similar service to provide information on transactions.
- 4.2 The service is provided 'As Available' and without any warranty of fitness for a specific purpose.
- 4.3 The Bank does not warrant that this service will always be uninterrupted, or that any information provided is accurate and current as at the time it is received.
- 4.4 The Bank disclaims responsibility for any defect, corruption, virus or related problems attributed to your telecom equipment or the service provided by any network provider.
- 4.5 Irrespective of the channel used to deliver the statement or advice, the Customer will notify the Bank in writing of anything incorrect in a statement or advice promptly and in any case within thirty (30) days from the date on which the statement or advice is sent to the customer.

5. Savings Account

- 5.1 Request to open a Savings Account will be granted on proper completion of the Bank's Account Opening form.
- 5.2 Deposits will be received up to any amount.
- 5.3 One account only may be opened for any one person either in his own name or jointly with another or others to receive deposits. Depositors should note that the form of Application includes a certificate that the applicant has no Savings Account at any other branch of GCB Bank Limited.
- 5.4 Money may be deposited in joint names of two or more persons to be payable to both, or all of them, or to any one or more of them, or to the survivors.
- 5.5 Collection and clearance of cheques, drafts, dividend warrants and other instruments on Savings Accounts will be allowed. However personal savings account must not be used for business purposes.
- 5.6 Interest will be calculated on the balance on account set by the Bank from time to time and applied on monthly basis.
- 5.7 In the event of the Savings Withdrawal booklet being lost or spoiled the Bank may on receiving a satisfactory explanation, and sufficient indemnity, issue a new Savings Withdrawal booklet.
- 5.8 The Bank reserves to itself the right to alter or add to these rules at any time and to alter the rate of interest allowed from time to time.

6. Cheques

- 6.1 All cheques or orders signed by you (or either or both or all of you if a joint account) will be honoured by the Bank and your account will be debited for such cheques or orders whether such account be for the time being in credit or overdrawn or may become over-drawn in consequence of such debit.
- 6.2 The Bank is under no obligation to honour any cheque drawn on your account unless there are sufficient funds in the account to cover the value of the said cheques and such cheques may be returned to you unpaid. It is an offence punishable by law to issue dud cheques.
- 6.3 The Bank may exercise discretion in allowing withdrawals against uncleared cheque(s). Where the cheques are returned unpaid thereafter the Bank shall have the right to hold on to the returned cheque and take further action it deems appropriate to recover the value of the cheque from you. The Bank shall have the right whenever it deems appropriate to confirm the issuance of a cheque drawn on the current account failing which the cheque may be returned with "Drawer's Confirmation Required" endorsed thereon.
- 6.4 Customers must ensure that their cheque books are kept under lock and key and at a secured place to prevent unauthorised persons from gaining access to same and neglect of this precaution may be a ground for any consequential loss being charged to your account.

6.5 If your cheque book gets lost, missing or stolen you must notify the Bank immediately. The Bank shall not be held liable for any unauthorised use of your cheque book where the loss or otherwise of same has not been notified immediately.

7. ATMS/E-Banking/Mobile Banking/Internet Banking

Kindly note that the Bank has different terms and conditions applying to our digital channels, mobile banking or use of an ATM and you will be required to agree separately to these terms before usage.

8. Overdrawn Account

Overdrafts may be available to customers upon arrangement with the Bank. If you do not have such arrangement and your account becomes overdrawn, the Bank may charge you an extra fee and interest at our current rate for unauthorised borrowing. If your account does not have enough cleared funds to cover an amount you want to withdraw the Bank may return your cheque unpaid. The Bank reserves the right to use credit balance on your current account to set off any outstanding exposures on any of your accounts.

9. Fees/Charges/Commissions/Interests

Customer will be liable for the payment of interest charges at the rate fixed by the Bank from time to time for any sum(s) standing to the debit of the current account. The current account may also be debited for the Bank's usual banking charges, interest, commissions, etc. Until it is otherwise provided by the Bank, all fees, charges, commissions and interests charged are non-refundable. The Bank may change its fees/charges from time to time and will advise you of this by giving you notice of the changes within a reasonable time before the increase/decrease takes effect.

10. Dormant Accounts

If you do not operate your account for a period of 2 years, your account will be classified as dormant. If you wish to use a dormant account, you must write/speak to the Bank and you will be taken through the steps to take in getting your account re-activated.

11. Termination of Agreement

- 11.1 Either party may terminate this agreement at any time by notifying the other in writing.
- 11.2 Where customer is terminating the agreement, the termination becomes effective where any cheques and amounts carried on the account have been paid and all cheque books and cards issued to customer are returned to the Bank. Where the Bank is terminating agreement and the account is overdrawn, customer must pay all sums outstanding on the account otherwise the Bank may take appropriate legal action for recovery.
- 11.3 All mandatory documentation should be completed within (2) months of opening the account. If you do not provide the required documents within two (2) months, written notice would be given to you after which your account will be automatically closed.

12. Changes to Mandate

In the event of death, incapacitation or resignation of a signatory to a multiple signature mandate, it is required of the customer to **immediately** inform the bank in writing of the event, to be followed by any changes to the mandate accompanied by appropriate Resolution from those in charge of governance.

13. Foreign Account Tax Compliant Act (FATCA)/Common Reporting Standard (CRS)

- 13.1 The Customer hereby certifies that, unless otherwise disclosed to the Bank in writing, the Customer: does not have citizenship in the United States of America (USA)/ European Union (EU) countries; is not tax resident in the USA/ EU countries; is not a national of the USA/ EU countries; was not born in the USA/ EU countries; has no mailing or residential address in the USA/EU countries; does not have an "In-care-of" or "hold mail" address in the USA/ EU countries; does not hold a passport from the USA/ EU countries; has not provided any standing instructions to transfer funds to an account maintained in the USA/ E U countries; has not granted a power of attorney and/or mandate to any American person or person with an address in the USA or a EU national; has no telephone contact number in the USA or a country of the EU. " The Customer will advise the Bank promptly in writing should any of the above change.
- 13.2 Additionally, the Customer agrees to be bound by the Bank's foreign account policy as may be updated from time to time.

14. Disclaimer Clause

- 14.1 The Bank shall not be liable for any funds / assets deposited by customer which are subsequently found to have been derived from illegal sources or activities. Customer confirms that the funds / assets deposited are not derived from any illegal sources or activities.
- 14.2 The Bank will not be responsible for any loss or damage to funds deposited with the bank due to any further Government order, law, levy, tax, embargo, moratorium, exchange restriction or any other cause beyond our control.

15. Sharing of Information

You consent to the Bank making available information concerning your account including personal information to the Central Data Bank of Ghana Association of Bankers and Credit Reference Bureaux and Agencies where necessary.

16. Treatment of Personal Information

The Bank will treat your personal information as confidential and take all reasonable steps to protect your personal information. The Bank will only disclose your personal information if: the law requires us to do so; or it is in the public interest to do so; or our interests require disclosure; or you have given us your consent. In order to consider your application for any of the products or services of the Bank or to maintain a relationship with you, you agree that the Bank may - as part of our checking and account maintenance processes - do the following: get certain of your personal information from any other party (e.g. a credit bureau or a government agency); disclose some of your personal information to these parties in order to get the information the Bank needs. If the Bank does this, it will never disclose more information than it needs to and in the process protect your personal information by complying with the relevant Data Protection laws.

17. Electronic monitoring or recording

The Customer and the Bank consent to telephonic or electronic monitoring or recording for security and quality of service purposes and agree that either may produce telephonic recording or computer records as evidence in any proceedings brought in connection with these conditions or any local conditions.

18. Jurisdiction

These terms and conditions are governed by the laws of Ghana.

I acknowledge that I have read and that I accept the Terms and Conditions hereby stipulated and I agree to be legally bound by them.

Name:	Signature	Date.....
Name:	Signature	Date.....
Name:	Signature	Date.....

FOR BANK USE ONLY

1. Initial Deposit by Cash GCB Cheque GCB Draft Transfer Amount

2. Politically Exposed Persons (PEP) Status for Parties

Is Applicant (1) a PEP or associated with PEP ? Yes No

If Customer is closely associated with PEP, state relationship

Source of wealth (If a PEP or associated with a PEP)

Is Applicant (2) a PEP or associated with PEP ? Yes No

If Customer is closely associated with PEP, state relationship

Source of wealth (If a PEP or associated with a PEP)

Is Applicant (3) a PEP or associated with PEP ? Yes No

If Customer is closely associated with PEP, state relationship

Source of wealth (If a PEP or associated with a PEP)

3. KYC/Risk Profile Low Risk Medium Risk High Risk

4. Requirement Checklist

Documents Required <i>(Original IDs/Documents must be seen)</i>	CHECKED	DEFERRED	WAIVED	N/A
1. Duly completed account opening form				
2. Specimen signature duly captured				
3. Recent passport - sized photograph				
4. Proof of Identity				
5. Resident/Work Permit & Republic of Ghana Non-Citizen ID				
6. Proof of Address				
7. Confirmation of Mobile phone number				
8. Letter from Employer/School (Salary/Student)				
9. Copy of Letters of Administration/ Trust Deed/Probate				

MIS Details		
Classification	MIS Code	MIS Description
Industry Sector		
Market Segment		

5. Is Customer socially/financially disadvantaged? Yes No

6. If Yes, state other Document(s) obtained in line with Bank's policy on socially/financially disadvantaged customers

7. Account Opened By :

Name Signature..... Date

8. Deferral/Waiver Of Document (If Any) Authorized By :

Name Signature..... Date

9. Documents Verification Carried Out By :

Name Signature..... Date

Comments

10. Account Opening Authorized/Approved By :

Name Signature..... Date

11. For PEP and Other High Risk Customers, Refer to the Managing Director /Head of Business Unit for Approval

a) Name Designation

Signature Date

b) Name Designation

Signature Date