



CIF Number

REF Number

## APPLICATION FOR OPENING ACCOUNT FOR INDIVIDUALS

(Form should be filled in CAPS)

<b>Branch</b>	<input type="text"/>
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Single Holder  Joint Account  Number of Holders (if Joint) \_\_\_\_\_

I / We wish to open the following account(s) with I&M Bank Limited as per the following details:

First Applicant																						
Mr / Mrs / Ms / Minor	First Name				Middle Name				Last Name													
Nationality	Identification Type							Identification Number														
	<input type="checkbox"/> National ID <input type="checkbox"/> Passport No. <input type="checkbox"/> Birth Certificate (minors only) <input type="checkbox"/> Other _____																					
Gender	F (✓)	M (✓)	Marital Status		Single	Married	Date of Birth				D	D	M	M	Y	Y	Y	Y				
PIN Number																						
Mailing Postal Address								Post Code				Town										
Permanent Address (If different from above)								Post Code				Town										
Physical Address																						
Primary Contact*	Email Address																					
	Mobile Number				Other Number																	
Occupation & Nature of Business																						

Declaration of Source of Funds														
<p>As part of the account opening requirements for transactional account(s) at I&amp;M Bank Ltd., I / We understand that I / We am / are required to declare the source of the funds that I / We will be depositing into the account(s) including future deposits whether in cash, cheque, EFT, RTGS, SWIFT or any other method. I / We further confirm that these funds are derived from legitimate sources as stated below and that I / We will also provide appropriate documentation as evidence of the source of funds if / when required. I / We declare the following details to be true. Accordingly, I / We wish to hereby declare that the source of funds that I / We shall be depositing into my / our I&amp;M Bank account is / are (✓ as appropriate):</p>														
<input type="checkbox"/> Salary <input type="checkbox"/> Business Income <input type="checkbox"/> Savings <input type="checkbox"/> Interest/Dividend <input type="checkbox"/> Others (Specify) _____														
Purpose of Account <input type="text"/>														
Business / Employer's Details <input type="text"/>														
Office Postal Address								Post Code				Town		
Office Email										Office Phone Number				
Monthly Gross Income KShs (✓) <input type="checkbox"/> Less than 50,000 <input type="checkbox"/> 50,000 – 250,000 <input type="checkbox"/> Above 250,000 – 500,000 <input type="checkbox"/> Above 500,000														

Other Accounts held with I&M Bank or other banks (for first applicant(s) only)		
Bank Name	Branch	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Second Applicant / Guardian in the case of a Young Savers Account																			
Mr / Mrs / Ms		First Name			Middle Name			Last Name											
Nationality		Identification Type						Identification Number											
		<input type="checkbox"/> National ID		<input type="checkbox"/> Passport Number		<input type="checkbox"/> Other _____													
Gender	F(√)	M(√)	Marital Status	Single	Married	PIN					Date of Birth	D	D	M	M	Y	Y	Y	Y
Resident	Y(√)		N(√)		Debit Card Required?	Y(√)				N(√)		Mobile Number							
Postal Address			Email Address																
Physical Residence Location Address			Occupation & Nature of Business																

Third Applicant / Guardian in the case of a Young Savers Account																			
Mr / Mrs / Ms		First Name			Middle Name			Last Name											
Nationality		Identification Type						Identification Number											
		<input type="checkbox"/> National ID		<input type="checkbox"/> Passport Number		<input type="checkbox"/> Other _____													
Gender	F(√)	M(√)	Marital Status	Single	Married	PIN					Date of Birth	D	D	M	M	Y	Y	Y	Y
Resident	Y(√)		N(√)		Debit Card Required?	Y(√)				N(√)		Mobile Number							
Postal Address			Email Address																
Physical Residence Location Address			Occupation & Nature of Business																

Fourth Applicant																			
Mr / Mrs / Ms		First Name			Middle Name			Last Name											
Nationality		Identification Type						Identification Number											
		<input type="checkbox"/> National ID		<input type="checkbox"/> Passport No.		<input type="checkbox"/> Other _____													
Gender	F(√)	M(√)	Marital Status	Single	Married	PIN					Date of Birth	D	D	M	M	Y	Y	Y	Y
Resident	Y(√)		N(√)		Debit Card Required?	Y(√)				N(√)		Mobile Number							
Postal Address			Email Address																
Physical Residence Location Address			Occupation & Nature of Business																

Account Type (√ where applicable)				
Personal Transactional	Premium Select	<input type="checkbox"/>	Foreign Currency Transactional	Sapphire <input type="checkbox"/>
	Sapphire	<input type="checkbox"/>		
	Bahati	<input type="checkbox"/>		
	Young Savers	<input type="checkbox"/>	Term Deposit	<input type="checkbox"/>
	Malaika	<input type="checkbox"/>		
	Young Professionals	<input type="checkbox"/>	Call Deposit	<input type="checkbox"/>
	Tayari	<input type="checkbox"/>		
Others	<input type="text"/>			

Currency (√ where applicable)	
<input type="checkbox"/> KSHS	<input type="checkbox"/> USD
<input type="checkbox"/> GBP	<input type="checkbox"/> EUR
<input type="checkbox"/> Other (Name)	<input type="text"/>
Initial Deposit Details	
Period (in case of Term Deposit)	

Debit Card Required	Y(√)		N(√)	Type of Card	KSHS. <input type="checkbox"/> Platinum Card <input type="checkbox"/> Classic Card USD <input type="checkbox"/> USD Card *I&M Platinum Card is the default card for the Personal Sapphire and Premium Select Accounts	Preferred name format on Debit Card / Cheque Book

<b>Account Facilities</b>	
<input type="checkbox"/> Cheque Book	<input type="checkbox"/> Third Party Operation* (*Please sign separate Third Party Mandate)
<input type="checkbox"/> I&M On The Go (Mobile App & Web-Internet Banking)	<input type="checkbox"/> I&M Mobile Banking USSD
2 <sup>nd</sup> Mobile No. (For Dual Authorisation in case accounts are operated jointly)	
Notify me by SMS (charges may apply as per prevailing tariff) for transactions of the following amount and above (in KSh):	
Debit (KSh)	Credit (KSh)
Request for email statements: Frequency (√ only one option)*    Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/>	

<b>PEP Declarations</b>
Are you entrusted with a prominent public office locally or in a foreign country, including any member of your immediate family or close associates? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, kindly ask for a detailed questionnaire and complete it.

<b>FATCA DECLARATION</b> (Foreign Account Tax Compliance Act)							
On an annual basis, the Bank will report information on financial accounts held directly or indirectly by US Persons. In certain circumstances and where customers fail to provide the appropriate documentation, the Bank may be required to apply 30% US withholding tax on certain types of US income paid to such customers.							
Is any applicant a US Green Card Holder?	Y(√)		N(√)		Does any applicant have any income from US?	Y(√)	N(√)

<b>How did you get to know about I&amp;M Bank?</b>	
<input type="checkbox"/> Sales Activation Site	
<input type="checkbox"/> Social Media: Please advice which one <input type="text"/>	
<input type="checkbox"/> Billboards and Print Advert	<input type="checkbox"/> Radio
<input type="checkbox"/> Campaign run by the bank	<input type="checkbox"/> Social Event
<input type="checkbox"/> Referred by a Customer	Customer's Name <input type="text"/> Contact Details <input type="text"/>
<input type="checkbox"/> Other	

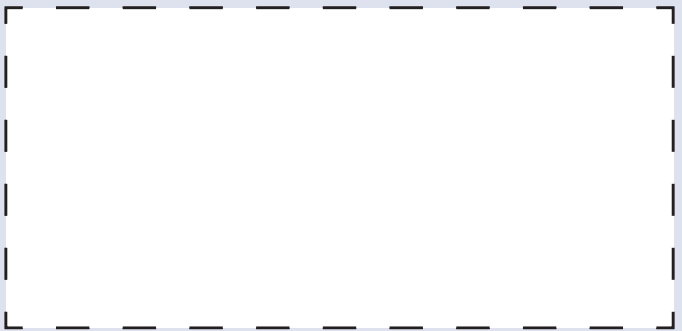
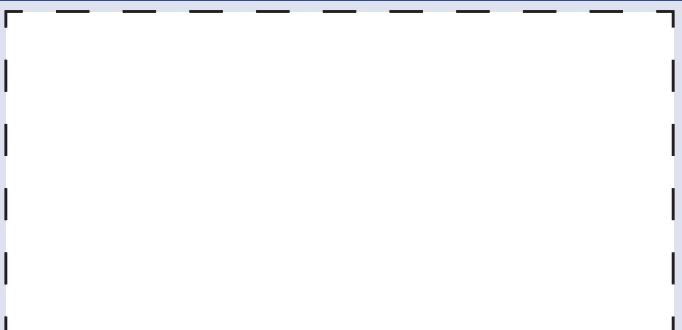


<b>Personal Accident Cover - Optional</b>			
I would like to avail the personal Accident (death only) cover for:	<input type="text"/> KShs. 500,000 at an annual premium of KShs. 500 <input type="text"/> KShs. 1,000,000 at an annual premium of KShs. 1,000		
Recover a premium of KShs. 500 <input type="checkbox"/> KShs. 1,000 <input type="checkbox"/> (√ one) renewable annually from my account opened in this application or from account below held at I&M Bank.			
Account Number: <input type="text"/>	Account Name: _____		
The beneficiary(ies) is / are			
Name	Mobile	Relationship to the insured	Portion or % Share
1. _____	_____	_____	_____
2. _____	_____	_____	_____
Have you ever sustained serious bodily injury / accident? YES <input type="checkbox"/> NO <input type="checkbox"/>			
This cover is effective from date of payment, subject to terms and conditions of the policy.			

I / We the undersigned request you to open an account or accounts as detailed above and at any time subsequently to open such further account(s) of whatever nature as I / We may direct. I / We confirm that all of the above details are correct and that I / We have read, understood and agree to the I&M Bank Limited General Terms and Conditions, the Terms and Conditions Governing the Use of I&M Next Generation Banking Facility, the Terms and Conditions Governing the Use of I&M Internet Banking and the Terms and Conditions of Use of the I&M Bank Limited Debit Card. I / We also consent to the terms of the I&M Bank Limited Privacy Notice.

**Account Mandate**

Singly  
  Either or Survivor  
  Jointly All  
  Jointly Any \_\_\_\_\_  
  Special Mandate (Specify) \_\_\_\_\_

Other Signing Instructions

Name of 1 <sup>st</sup> Signatory		Date	
1 <sup>ST</sup> SIGNATORY PASSPORT PHOTOGRAPH		Signature of 1 <sup>st</sup> Signatory	
2 <sup>ND</sup> SIGNATORY PASSPORT PHOTOGRAPH		Signature of 2 <sup>nd</sup> Signatory	
3 <sup>RD</sup> SIGNATORY PASSPORT PHOTOGRAPH		Signature of 3 <sup>rd</sup> Signatory	
4 <sup>TH</sup> SIGNATORY PASSPORT PHOTOGRAPH		Signature of 4 <sup>th</sup> Signatory	

Documents Required	
<input type="checkbox"/> Introduction Reference	<input type="checkbox"/> Copy of Work Permit (if applicable)
<input type="checkbox"/> ID / Passport Copy (of all applicants)	<input type="checkbox"/> PIN Certificate Copy (of all applicants)
<input type="checkbox"/> Recent Colour Passport Photograph (of all applicants)	<input type="checkbox"/> Birth Certificate (applicable for Young Savers)

**FOR OFFICIAL USE ONLY**

Information data input					
RM Code		Bank Director Related (Y/N)		Segment Code	BLO3 <input type="checkbox"/> BLO5 <input type="checkbox"/>
Branch Checklist		Initials	Initials		
Valid Identification Documents obtained & authenticated			Exception (Give reasons)		
Reference Confirmed					
Manager's Approval					
Account Opened by (Name & Initials)			Exception Approved By		
Authorised By (Name & Initials)					

STAFF DETAILS	
Name of Sales Staff / Agent	
Staff ID	
Branch Name	

