



CIF Number

REF Number

APPLICATION FOR OPENING ACCOUNT FOR INDIVIDUALS

(Form should be filled in CAPS)

I/we wish to open the following account(s) with I&M Bank Limited as per details herein.

Preferred Account Type (Tick as Applicable ✓)	
Transactional Accounts (KES)	<input type="checkbox"/> Club Account <input type="checkbox"/> PayGo Account <input type="checkbox"/> Others (Specify) <input type="text"/>
Savings Accounts (KES)	<input type="checkbox"/> I&M Savers Account <input type="checkbox"/> Young Savers Account (for minors)
Foreign Currency Transactional Accounts	Currency <input type="checkbox"/> USD <input type="checkbox"/> GBP <input type="checkbox"/> EUR <input type="checkbox"/> Others (Specify) <input type="text"/>

First Applicant*			
Mr/Mrs/Ms/Minor	First Name	Middle Name	Last Name
Nationality	Identification Document Type	Identification Document Number	
	<input type="checkbox"/> National ID		
KRA PIN	<input type="checkbox"/> Passport		
	<input type="checkbox"/> Birth Certificate (Minors Only)		
Country of Residence	<input type="checkbox"/> Kenya <input type="checkbox"/> Other (Specify) <input type="text"/>		
Postal Address (Optional)		Postal Code	Town
Physical Address (Required)			
Primary Contact (Required)	Email Address		
	Mobile Number	Other Number	
Occupation / Nature of Business			

*Only the First Applicant is eligible for AMREF Maisha Bronze cover in case of joint account holders for the Club Account

DECLARATION OF SOURCE(S) OF FUNDS
As part of the account opening requirements for transactional account(s) at I&M Bank Ltd., I / We understand that I / We am / are required to declare the source(s) of the funds that shall be deposited into the account(s) whether in cash, cheque, EFT, RTGS, SWIFT or any other method. I / We further confirm that these funds are derived from legitimate source(s) as stated below and that I / We shall also provide appropriate documentation as evidence of the source(s) of funds if / when required. I / We declare the following details to be true.
Accordingly, I / We wish to hereby declare that the source(s) of funds that shall be deposited into my / our I&M Bank account(s) is / are (Tick as Applicable ✓):
<input type="checkbox"/> Salary <input type="checkbox"/> Business Income <input type="checkbox"/> Savings <input type="checkbox"/> Interest/Dividend <input type="checkbox"/> Others (Specify) <input type="text"/>

Purpose of the Account			
Business Name/Name of Employer			
Postal Address	Postal Code	Town	
Office Email	Phone Number		
Expected Monthly Income (KES)	<input type="checkbox"/> Less than 50,000	<input type="checkbox"/> 50,000 - 250,000	<input type="checkbox"/> Above 250,000 -1 Million <input type="checkbox"/> Above 1 Million

ACCOUNT FACILITIES
Debit Card (for Transactional Accounts) <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Debit Card Delivery via courier <input type="checkbox"/> Collect Debit Card from branch: Preferred collection Branch Name <input type="text"/>

Cheque Book: Yes No

Cheque book Delivery via courier Collect Cheque book from branch: Preferred collection Branch Name

Preferred name format on Debit Card/Cheque Book

(should be related to full name, part of the name may be abbreviated)

Mobile and Internet Banking: Tick here to opt out. Do NOT sign me up

Mobile Number for Dual Authorisation in case account is operated jointly.

Notify me by SMS for transactions of the following amount and above (in KES)

Debit Credit

Request for email statements (Free)
 Frequency (Tick (✓) only one option) Daily Weekly Monthly Quarterly Semi-Annually Annually

PEP DECLARATION (Individuals with prominent public functions)
 Are you or any of the applicants entrusted with prominent public office locally or in foreign country, including any of your immediate family or close associate(s)?
 Yes No

FATCA DECLARATION (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.

Are you living in the US? Yes No

Does any applicant have any income from US? Yes No

Are you a holder of US Green card or residence card? Yes No

Are you a US citizen? Yes No

Do you have a US residential address, phone number or mailing address? Yes No

A FATCA form will be required to be filled if a 'yes' response has been provided in the above section

OTHER ACCOUNT APPLICANTS

Second Applicant /Guardian in the case of a Young Savers account

Mr/Mrs/Ms/Minor	First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nationality	Identification Document Type	Identification Document Number	
<input type="text"/>	<input type="checkbox"/> National ID	<input type="text"/>	
KRA PIN	<input type="checkbox"/> Passport	<input type="text"/>	
<input type="text"/>	<input type="checkbox"/> Birth Certificate (Minors Only)	<input type="text"/>	
Country of Residence	<input type="checkbox"/> Kenya <input type="checkbox"/> Other (Specify) <input type="text"/>		
Postal Address (Optional)	Postal Code	Town	<input type="text"/>
Physical Address (Required)	<input type="text"/>		
Primary Contact (Required)	Email Address	<input type="text"/>	
	Mobile Number	Other Number	<input type="text"/>
Occupation / Nature of Business	<input type="text"/>		

Third Applicant /Guardian in the case of a Young Savers account

Mr/Mrs/Ms/Minor	First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Nationality	Identification Document Type	Identification Document Number
	<input type="checkbox"/> National ID	
KRA PIN	<input type="checkbox"/> Passport	
	<input type="checkbox"/> Birth Certificate (Minors Only)	
Country of Residence <input type="checkbox"/> Kenya	<input type="checkbox"/> Other (Specify) _____	
Postal Address (Optional)	Postal Code	Town
Physical Address (Required)		
Primary Contact (Required)	Email Address	
	Mobile Number	Other Number
Occupation / Nature of Business		

DECLARATION

Tick both for acceptance

TERMS AND CONDITIONS

I/We the undersigned request you to open an account(s) as detailed above and at any time subsequently to open 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 as amended from time to time and available at <https://www.imbankgroup.com/ke/terms-and-conditions/>

PRIVACY NOTICE

I/We hereby acknowledge that I/We have read, understood and do consent to the terms and conditions of the I&M Bank Limited Privacy Notice available at <https://www.imbankgroup.com/ke/information-security/privacy-notice/> and I/We hereby also explicitly authorize I&M Bank Limited and/or its affiliates to use my/our data as stipulated in the I&M Bank Limited Privacy Notice.

Account (s) operating instructions

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

Other signing instructions _____

Name of 1st Signatory	Date
1 ST SIGNATORY PASSPORT PHOTOGRAPH	Signature
Name of 2nd Signatory	Date
2 ND SIGNATORY PASSPORT PHOTOGRAPH	Signature

Name of 3rd Signatory		Date	
3 RD SIGNATORY PASSPORT PHOTOGRAPH	Signature		

FOR OFFICIAL USE ONLY

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

Information Data input			
RM Code		Director Related	<input type="checkbox"/> Yes <input type="checkbox"/> No
Segment Code	<input type="checkbox"/> BL03 - Personal Banking	Sub-segment	<input type="checkbox"/> YPROF
			<input type="checkbox"/> RETAIL M
	<input type="checkbox"/> BL05 - Premium Banking	Sub-segment	<input type="checkbox"/> HNWI
			<input type="checkbox"/> PREM

Recommended Debit Card type <input type="checkbox"/> MC Platinum <input type="checkbox"/> MC World <input type="checkbox"/> MC World Elite <input type="checkbox"/> Not Applicable					
Branch Checklist		Initials		Initials	
Valid Identification Documents obtained and authenticated			Exception(Give reason)		
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	