



CIF Number

REF Number

## APPLICATION FOR OPENING A BUSINESS / CORPORATE ACCOUNT

(Form should be filled in CAPS)

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

<b>Branch</b>	<input type="text"/>
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<b>Type of Business (✓ where applicable)</b>	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Society / Association / Club <input type="checkbox"/> Limited Company <input type="checkbox"/> Others (Specify)	
Nature of business	<input type="text"/>

<b>Business / Entity Name</b>		<input type="text"/>	
Trading Name		<input type="text"/>	
Date of Incorporation / Registration	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	PIN Number:	<input type="text"/>
Registration Certificate Number	<input type="text"/>		
Mailing Postal Address	<input type="text"/>	Post Code	<input type="text"/>
Primary Contact	Email Address	<input type="text"/>	
	Mobile Number	<input type="text"/>	Other Number <input type="text"/>
Physical Address	<input type="text"/>		
Country of Operation	1. <input type="text"/>	2. <input type="text"/>	3. <input type="text"/>
Alternative Contact	Email Address	<input type="text"/>	
	Mobile Number	<input type="text"/>	Other Number <input type="text"/>
Number of Employees	<input type="checkbox"/> Less than 100 <input type="checkbox"/> 100 or more		
Annual Turnover	<input type="checkbox"/> Less than KShs. 500 million <input type="checkbox"/> KShs. 500 million and above		
Balance Sheet Size (Total Assets)	<input type="checkbox"/> Less than KShs. 500 million <input type="checkbox"/> KShs. 500 million and above		

<b>Other Accounts held with I&amp;M Bank or other banks</b>		
Bank Name	Branch	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>Account Type (✓ where applicable)</b>			
Business Transactional	Sapphire <input type="checkbox"/>	Foreign Currency Transactional	<input type="checkbox"/> Sapphire
	Biashara <input type="checkbox"/>		
	Alpha <input type="checkbox"/>	<input type="checkbox"/> Term Deposit	
	Savannah <input type="checkbox"/>		
	Noble <input type="checkbox"/>		
	Diplomatic <input type="checkbox"/>		<input type="checkbox"/> Call Deposit
	iMinVest Chama <input type="checkbox"/>		
Others <input type="text"/>			



Authorized Signatory Information Form																									
First Signatory / Director																									
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 <input type="text"/>																							
Gender		F (√)		M (√)		PIN		Date of Birth		D		D		M		M		Y		Y		Y		Y	
Resident		Y (√)		N (√)		Postal Address				Postal Code															
Email Address												Mobile Number													
Position in the Company / Organisation																									
Occupation																									

Second Signatory / Director																									
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 <input type="text"/>																							
Gender		F (√)		M (√)		PIN		Date of Birth		D		D		M		M		Y		Y		Y		Y	
Resident		Y (√)		N (√)		Postal Address				Postal Code															
Email Address												Mobile Number													
Position in the Company / Organisation																									
Occupation																									

Third Signatory / Director																									
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 <input type="text"/>																							
Gender		F (√)		M (√)		PIN		Date of Birth		D		D		M		M		Y		Y		Y		Y	
Resident		Y (√)		N (√)		Postal Address				Postal Code															
Email Address												Mobile Number													
Position in the Company / Organisation																									
Occupation																									

Fourth Signatory / Director																									
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 <input type="text"/>																							
Gender		F (√)		M (√)		PIN		Date of Birth		D		D		M		M		Y		Y		Y		Y	
Resident		Y (√)		N (√)		Postal Address				Postal Code															
Email Address												Mobile Number													
Position in the Company / Organisation																									
Occupation																									

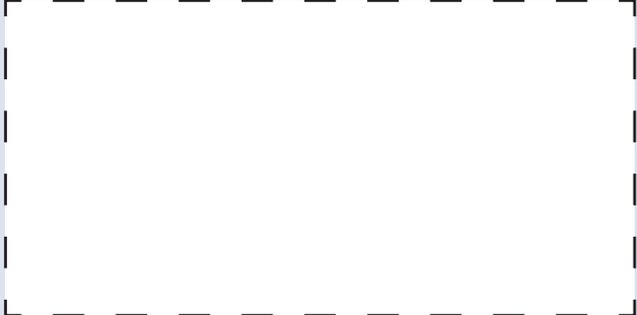
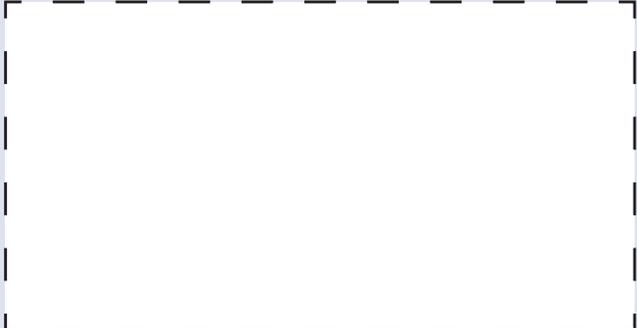
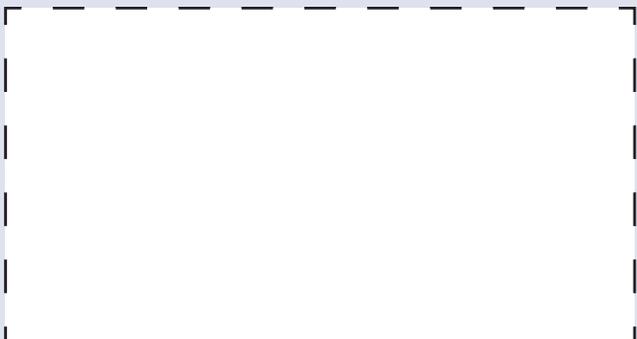
I / We the undersigned request you to open an account or accounts as detailed above and at any time subsequently to open such further account(s) of whatever nature as I / We may direct. I / We confirm that all of the above details are correct and that I / We have read, understood and agree to the I&M 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.

Shareholder's / Director's Signature \_\_\_\_\_ Shareholder's / Director's Signature \_\_\_\_\_

**Account Mandate**

Singly     Jointly All     Jointly Any \_\_\_\_\_  Special Mandate (Specify) \_\_\_\_\_  Anyone to Sign Solely

Other Signing Instructions \_\_\_\_\_

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

**Resolution for Appointment of Banker**

At a meeting of the Directors / Members / Trustees / Partners of (Insert Full Name of Entity) \_\_\_\_\_

duly convened and held at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

The meeting being quorate:

- 1. The Chairman reported that arrangements were being proposed with I & M Bank Limited ("the Bank") whereby the company would open and operate an account or accounts with the Bank on the Terms and Conditions of the Mandate endorsed on the "Application to Open a Corporate Account" Form now produced at the meeting for inspection.
  - 2. It was a term of the arrangements that the company would complete the "Application" to Open a Corporate Account" Form and execute the Mandate endorsed thereon specifying the persons authorised to operate the account(s) on behalf of the company and appending their respective specimen signatures.
- All present having unanimously agreed to and confirmed the above arrangements **IT WAS RESOLVED** as follows:-

- 1. **THAT** the company opens and operates an account or accounts with the bank on the Terms and Conditions of the Mandate endorsed on the "Application to Open a corporate Account" Form.
- 2. **THAT** The "Application to Open a Corporate Account" Form be and the same is hereby approved and that the Directors complete the Form, execute the Mandate endorsed thereon and deliver the same forthwith to the Bank.
- 3. **THAT** the persons whose names appear below be and are duly authorised to open and operate the account(s) on behalf of the Company and their specimen signatures be appended to the Mandate:

**Name of Authorised Signatory**

**Position**

.....  
 .....  
 .....

.....  
 .....  
 .....

**Operating Mandate:**

We, the undersigned persons, on behalf of ..... (the "Company") hereby declare that the Company has been incorporated in conformity with the provisions of the Companies Act, No. 17 of 2015 and that the Company: (To choose one of the options below)

- has been incorporated with its own articles of association; or
- has adopted the model Articles of Association as provided for in the Companies Act 2015; or
- has been incorporated with part of its own Articles of Association and adopted part of the model Articles of Association provided in the Companies Act 2015.

The secretary reported that under the articles of association of the company, the Directors present were empowered to pass the necessary approvals to ratify the resolutions above. The Company shall indemnify the Bank against any actions, proceedings, claims, demands, losses, costs, damages, liabilities or expenses whatsoever which the Bank may at any time incur, sustain or suffer as a result of its acting upon or refraining from acting upon this declaration.

**IT IS HEREBY CERTIFIED THAT** the foregoing is a true extract from the minutes of the meeting of the Board of Directors of the company, that a quorum of the Directors was present throughout the meeting, that the resolutions set forth above were duly passed in accordance and comply with the Memorandum, Articles of Association and Regulations of the of company.

Dated \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Signed:

Name \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Director \_\_\_\_\_

Director / Company Secretary \_\_\_\_\_

Documents Required			
ID / Passport Copy / PIN card copy of all authorised signatories (of all applicants)	<input type="checkbox"/>	Recent colour passport photographs of all authorised signatories	<input type="checkbox"/>
Certified copy of latest annual returns or Letter from auditor / Co. Secretary certifying names of existing Directors	<input type="checkbox"/>	Memorandum & Articles of Association of company / by-laws or constitution of organisation (certified copy) / Partnership Deed / CR 1, 2 & 8	<input type="checkbox"/>
Copy of PIN card of Company / Organisation	<input type="checkbox"/>	Copy of Certificate of Incorporation / Registration	<input type="checkbox"/>
Audited financial statements in case of companies	<input type="checkbox"/>	Board Resolution / Extracts of committee meeting signed by Chairman and Secretary / Partner's Resolution	<input type="checkbox"/>

P.S. An independent search will be carried out by the Bank at a cost of approximately KShs. 1,000 to be borne by the company or organisation

**FOR OFFICIAL USE ONLY**

Information Data Input			
<b>Industry:</b> Manufacturing <input type="checkbox"/> Banking and Insurance <input type="checkbox"/> Trading <input type="checkbox"/> Services (Professional) <input type="checkbox"/> Tourism <input type="checkbox"/> Others <input type="text"/>		Bank Director related (Y/N)	
		RM Code	
		Segment Code	
Specific line		Sub-Segment Code	

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	

