

APPLICATION FOR OPENING ACCOUNT OF INDIVIDUALS / SOLE PROPRIETOR RETAIL

Branch		Account No:	
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I/We wish to open the following account(s) with I & M Bank (T) Limited as per the following details:

Child Deposit Account (This part to be filled only for minor account)

Guardian's Name			
Minor Guard Code	Mother <input type="checkbox"/>	Father <input type="checkbox"/>	Legal Guardian <input type="checkbox"/>

First Applicant

Mr/Mrs/Ms	First Name	Middle Name	Last Name
Trading as (T/A)			
ID/Passport No./Birth Certificate No.		Marital Status (√):	Single <input type="checkbox"/> Married <input type="checkbox"/>
		TIN No	
Nationality	VAT No		
Date of Birth	D D M M Y Y Y Y	Place of Birth	Resident <input type="checkbox"/> Non - Resident <input type="checkbox"/>
Residential Postal Address	P.O. Box	Town	
Location description of the residential address			
Telephone Office/Residence	Mobile		
Office Email		Personal Email	
Employer's / Company Name		Nature of Business	
Office Postal Address	P.O. Box	Town	
Monthly Gross Income	below 500,000 <input type="checkbox"/>	500,000 to 1,000,000 <input type="checkbox"/>	1,000,001 to 5,000,000 <input type="checkbox"/>
	above 5,000,001 <input type="checkbox"/>		

First Applicant
Photograph

First Name

Specimen Signature

Thumb Print

Other Account held currently with I&M Bank or other banks

Bank Name	Branch	Account Number

Second Applicant

Mr/Mrs/Ms	First Name	Middle Name	Last Name
Trading as (T/A)			
ID/Passport No./Birth Certificate No.		Marital Status (√):	Single <input type="checkbox"/> Married <input type="checkbox"/>
		TIN No	
Nationality	VAT No		
Date of Birth	D D M M Y Y Y Y	Place of Birth	Resident <input type="checkbox"/> Non - Resident <input type="checkbox"/>
Residential Postal Address	P.O. Box	Town	
Location description of the residential address			
Telephone Office/Residence	Mobile		
Office Email		Personal Email	
Employer's / Company Name		Nature of Business	
Office Postal Address	P.O. Box	Town	
Monthly Gross Income	below 500,000 <input type="checkbox"/>	500,000 to 1,000,000 <input type="checkbox"/>	1,000,001 to 5,000,000 <input type="checkbox"/>
	above 5,000,001 <input type="checkbox"/>		

Second Applicant
Photograph

First Name

Specimen Signature

Thumb Print

Other Account held currently with I&M Bank or other banks									
Bank Name				Branch			Account Number		

Third Applicant										
Mr/Mrs/Ms		First Name			Middle Name			Last Name		
Trading as (T/A)										
ID/Passport No./Birth Certificate No.					Marital Status (✓):		Single <input type="checkbox"/> Married <input type="checkbox"/>			
					TIN No					
Nationality					VAT No					
Date of Birth	D	D	M	M	Y	Y	Y	Y	Place of Birth	Resident <input type="checkbox"/> Non - Resident <input type="checkbox"/>
Residential Postal Address				P.O. Box		Town				
Location description of the residential address										
Telephone Office/Residence				Mobile						
Office Email					Personal Email					
Employer's / Company Name				Nature of Business						
Office Postal Address				P.O. Box		Town				
Monthly Gross Income		below 500,000 <input type="checkbox"/>		500,000 to 1,000,000 <input type="checkbox"/>		1,000,001 to 5,000,000 <input type="checkbox"/>		above 5,000,001 <input type="checkbox"/>		

Other Account held currently with I&M Bank or other banks									
Bank Name				Branch			Account Number		

Fourth Applicant										
Mr/Mrs/Ms		First Name			Middle Name			Last Name		
Trading as (T/A)										
ID/Passport No./Birth Certificate No.					Marital Status (✓):		Single <input type="checkbox"/> Married <input type="checkbox"/>			
					TIN No					
Nationality					VAT No					
Date of Birth	D	D	M	M	Y	Y	Y	Y	Place of Birth	Resident <input type="checkbox"/> Non - Resident <input type="checkbox"/>
Residential Postal Address				P.O. Box		Town				
Location description of the residential address										
Telephone Office/Residence				Mobile						
Office Email					Personal Email					
Employer's / Company Name				Nature of Business						
Office Postal Address				P.O. Box		Town				
Monthly Gross Income		below 500,000 <input type="checkbox"/>		500,000 to 1,000,000 <input type="checkbox"/>		1,000,001 to 5,000,000 <input type="checkbox"/>		above 5,000,001 <input type="checkbox"/>		

Other Account held currently with I&M Bank or other banks									
Bank Name				Branch			Account Number		

Account Type (✓ where applicable)									
Fixed Deposit <input type="checkbox"/>		Recurring Deposit <input type="checkbox"/>		Children Deposit <input type="checkbox"/>		Others <input type="checkbox"/>			
Call Deposit <input type="checkbox"/>		Savings Account <input type="checkbox"/>		Current Account <input type="checkbox"/>		(please specify) <input type="text"/>			

Third Applicant
Photograph

First Name

Specimen Signature

Thumb Print

Fourth Applicant
Photograph

First Name

Specimen Signature

Thumb Print

Currency (✓ where applicable)			
TZS <input type="checkbox"/>	USD <input type="checkbox"/>	GBP <input type="checkbox"/>	EUR <input type="checkbox"/> Other (Specify) <input type="text"/>
Initial Deposit Details		Source of Funds	
Purpose of Account			

Account Mandate	
Signing Instructions (✓as applicable)	Singly <input type="checkbox"/> Jointly, any <input type="checkbox"/> Either or survivor <input type="checkbox"/> Any Other <input type="text"/>
Other Signing Instructions:	

Account Facilities (✓as needed)*		
Cheque Book <input type="checkbox"/>	Third Party Operation* <input type="checkbox"/>	Email Banking* <input type="checkbox"/>
* Please sign separate Third Party Mandate or Email Banking indemnity		

Request for Next Generation Facility (informal)	
Statement frequency D,W,M,Q,H/Y,Y <input type="checkbox"/>	Email Address: <input type="text"/>

*Please read crefully the Terms and Conditions governing the use of I&M Bank (T) Limited Next Generation Banking Facility

Request for Alerts (If Joint Account, Contact Info provided should be as stated for First Applicant)	
Kindly provide your mobile number and E-mail ID to receive alerts for your account	
Mobile Number for alerts	E-mail ID for alerts
<input type="text"/>	<input type="text"/>

*Transactional alerts may be chargeable

Request for iClick Services (If Joint Account, Contact Info provided should be as stated for First Applicant)	
Please confirm whether you would like to be registered with iClick services	
No <input type="checkbox"/>	Yes <input type="checkbox"/> If yes, Please fill in the iClick registration form
Mobile Number for iClick services	E-mail ID for iClick services
<input type="text"/>	<input type="text"/>

Request for Visa Debit Card (✓as needed)*	
First Applicant Only <input type="checkbox"/>	Second Applicant <input type="checkbox"/> Third Applicant <input type="checkbox"/> Forth Applicant <input type="checkbox"/> All Applicants <input type="checkbox"/>

*Please read carefully the Terms and Conditions of use of the I&M Bank (T) Limited Debit Card. Only available If account operating mandate is "singly" or "any one to sign or as indicated on board resolution".

Foreign Account Tax Compliance Act (FATCA) Form - Personal Account	
Account Name	<input type="text"/>
Account No.	<input type="text"/>
<p>The Foreign Account Tax Compliance Act (FATCA) was signed into U.S. law on March 18th, 2010. It is aimed at preventing U.S. taxpayers from using accounts held outside of the U.S. to evade taxes. Any financial institution that fails to comply with FATCA will face a 30% withholding tax on a wide range of U.S. sourced payments to its clients. Under U.S. federal tax law, I&M Bank (Tanzania) Limited is required to request certain taxpayer information from U.S. nationals who maintain an account at I&M Bank (Tanzania) Limited (whether such persons are U.S. taxpayers or not). Information collected will be used solely to fulfill I&M Bank (Tanzania) Limited's requirements under U.S. federal tax Law and will not be used for any other purpose. In order to fulfill this requirement, we must immediately receive your completed W-9 or W-8BEN form and/or other forms of documentation that certifies your status (whether such persons are U.S. taxpayers or not), as applicable, declaring your tax status.</p> <p>Please note that a failure to submit your tax form may force us to turn over (withhold) 30% on their demand of any U.S. sourced transactions to / from your account on a monthly basis directly to the IRS and/or enforce closure of your account This process will continue until such a time that we receive your completed W-9 or W-8BEN form or other documentation to certify your status, as applicable.</p>	

Information of Authorised Signatory (FATCA U.S. Indication)	
Please confirm the signatory's FATCA status by ticking the relevant box:	
Are you a U.S. citizen or lawful permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were you born in the U.S. (U.S. Place of Birth)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there Power of Attorney or signatory authority granted to a person with a U.S. address?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will there be address on file which is "care of or "hold mail" or U.S. P.O. Box and/or U.S. telephone number:	<input type="checkbox"/> Yes <input type="checkbox"/> No

If **ANY** of the above answer is "YES" Please provide completed Form W-9 for our records
 If **ALL** of the above answers are "NO" Please provide completed Form W-8 BEN (for individual) for our records

I/We authorise I&M Bank (Tanzania) Limited to disclose relevant account and/or personal information to the U.S. tax authorities for the purpose of I&M Bank (Tanzania) Limited complying with its obligations under the U.S. Foreign Account Tax Compliance Act ("FATCA"). I/We undertake to fully cooperate with I&M Bank (Tanzania) Limited to ensure it meets its obligations under FATCA in connection with my/our account.

I/We will indemnify and hold harmless I&M Bank (Tanzania) Limited from any loss, action, cost, expense (including, but not limited to sums paid in settlement of claims, reasonable attorneys' fees, consultant fees and expert fees), claims, damages, or liability which arises or is incurred by I&M Bank (Tanzania) Limited in discharging its obligations under FATCA and/or as a result of disclosures to the US tax authorities.

Name _____ Signature _____

We the undersigned request you to open an account(s) as detailed above and at any time subsequently to open such further account(s) of what ever 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 (T) Ltd General Terms and Conditions, the Terms and Conditions Governing the use of I&M Next Generation Banking Facility and the Terms and Conditions of Use of the I&M Bank (T) Limited Debit Card. I/We further confirm that we have received a booklet of these terms and conditions above.

Signature of 1 st Signatory				Signature of 2 nd Signatory			
Name		Date		Name		Date	
Signature of 3 rd Signatory				Signature of 4 th Signatory			

Introducer			
Name			Bank Account No.
Certificate by Introducer I confirm that I have known the above account applicant for _____ years, I also confirm that I consider the applicant to be respectable and trustworthy to operate the Bank Account. Date _____ Signature _____			

Customer Relationship Manager (RM/BM)		Sales Officer (Where applicable)	
Name		Signature	

Documents Required			
Introduction Reference	<input type="checkbox"/>	One Passport Photo (of all applicants)	<input type="checkbox"/>
Address Proof (Eg. Utility Bill)	<input type="checkbox"/>	Copy of work permit / residence permit (if foreigners)	<input type="checkbox"/>
ID / Passport Copy (of all applicants)	<input type="checkbox"/>	TIN Certificate (optional)	<input type="checkbox"/>

For Official Use Only	NAME	DATE	SIGNATURE
BRANCH ONLY			
KYC Document Received & Submitted			
Manager's Approval			
CENTRALIZED ACCOUNT OPENING DEPT			
Account Vetted By			
Manager's Approval			
Account Opened By			
Account Authorised By			
Signature Maintained By			
Signature Verified By			