

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:

Branch	
Type of Busir	ness (√ where applicable)
Sole Proprie	torship Partnership Society / Association / Club Limited Company Others (Specify)

 Nature of business

 Business / Entity Name

 Trading Name

Date of Incorporation / Registration		D	D	М	М	Y	Y	Y		Y	PIN	l Nu	ımb	er:																
Registration Certificate Number																														
Mailing Postal Address												Post	t Co	ode						Точ	/n									
Drivery Context	Ema	ail Ao	ddre	ss																										
Primary Contact	Mol	bile I	Nun	nber													¢	Oth	er N	lum	ber									
Physical Address																														
Country of Operation	1.										2.											3.								
	Ema	ail Ao	ddre	ss																										
Alternative Contact	Mol	bile I	Nun	nber													0	the	r Nı	ımb	er									
Number of Employees						Les	ss th	nan 1	00										_1	00 (or m	nore								
Annual Turnover]к	Shs.	50	0 mi	llior	n an	d at	oov	e			
Balance Sheet Size (Total Assets)						Les	s th	nan I	(Sh	s. 5	00 I	milli	ion]ĸ	Shs.	50	0 mi	llior	n an	d at	oov	e			

Other Accounts held with I&M Bank or othe	r banks	
Bank Name	Account Number	

Account Type (√ where ap	plicable)		
	Sapphire	Foreign Common Transactional	
	Biashara	Foreign Currency Transactional	Sapphire
Business	Alpha		
Transactional	Savannah	Term Deposit	
	Noble		
	Diplomatic	Call Deposit	
	iMinVest Chama		
	Others		

Currency (√ where app	licable)				
KSHS USD	GBP	EUR	Other (Name)		
Initial Deposit Details				Period (in case of Term Deposit)	
Purpose of Account					

Account Facilities	
Cheque Book Ag	ent Authority (Fill in Agent Mandate Form) Debit Card (Subject to Account Mandate)
I&M On the Go (Mobile)	App and Web Internet Banking)
Notify me by SMS (charges ma	y apply as per prevailing tariff) for transactions of the following amount and above (in KShs) minimum KShs. 5,000.
Debit (KShs)	Credit (KShs)
Request for email statements:	
Frequency (√ only one option)*	Daily Weekly Fortnightly Monthly Quarterly Bi-Annually Annually

PEP Declarations for Directors Is any of the Directors entrusted with a prominent p or close associates? Yes No If yes, kindly ask for a detailed questionnaire and co		e locally o	r in a foreiş	gn country	, including any member of your immediate f	amily		
FATCA DECLARATION (Foreign Account Tax Cor On an annual basis, the Bank will report informa fail to provide the appropriate documentation the	tion on fir	nancial ac						
Do you have any income from the US?	Y (√)		N (√)		Does the entity have US Partners / Signatories / Directors?	Y (√)	N (√)	

How did you get to know about	I&M Bank?			
Sales Activation Site				
Social Media: Please indicate whi	ch one]	
Billboards and Print Advert		Radio		
Campaign run by the bank		Social Ever	ıt	
Referred by a Customer	Customer's Name		Contact Details	
Other				

Particulars of Significant Stakeholders

Please indicate below the names of significant shareholder(s) (10% and above) of individuals who are the ultimate beneficial owners in cases where a shareholder is a corporate body.

Stakeholder('s) Name (Individual(s) or Registered Entity)	Stakeholder Type (Director, Shareholder, Sole Proprietor, etc.)	Ultimate Beneficial Owner's Name (This information is required if shareholder is a corporate body.)	ID No. for Individuals or Registration No. for Entities	Shareholding (%)	Nationality

Authorized	Signa	tory	Inf	orm	nat	tion	۱F	or	n																														
First Signate	ory /	Direc	:tor	•																																			
Mr / Mrs / Ms	First	Name	è										м	idd	le N	lan	ne										Las	it Na	ame										
Nationality	nality Identification Type																10	den	ntific	atio	n Nı	umb	ber																
	National ID Passport No. Other																																						
Gender		F (√)				м	(√))				PI	N									Τ					Dat	e of	Birt	h	D	D	Ν	1	М	Y	Y	Υ	Y
Resident	Y (√)			N	(√)					Po	osta	al Ao	ddr	ess											Ро	stal	Cod	e										
Email Address	imail Address															Γ					Mot	bile	N	ımb	er														
Position in the	Comp	any /	Org	anisa	atic	on																																	
Occupation																																							

Second Sig	gnato	r <mark>y / Direct</mark>	or																															
Mr / Mrs / M	s	First Name											Mid	dle	Nar	me								L	ast N	Name								
Nationality				Ide	ntif	icati	ion	Тур	e														Ide	entifi	catio	n Nur	nber							
															Ot	her																		
Gender	F (√)		Mational ID Passport No. Other M (√) PIN														Τ		Dat	e of	Birth	D	D	1	М	Υ	Υ	Y	Y					
Resident				Y (√)				N	(√)					Ро	stal	Ad	dres	s							Post	al Co	ode						
Email Addres	Email Address																				Mobi	le N	lum	nber										
Position in th	he Com	pany / Orgai	nisa	ition																														
Occupation																																		

Third Signato	ry / I	Directo	r																															
Mr / Mrs / Ms	Fir	rst Name										Ν	1ide	dle	Nar	me									Last I	Name								
Nationality				Ide	ntif	icati	on 1	Гуре	è														Id	entil	icatio	on Nur	nber							
												t No	b . [Otł	her [
Gender F (v)		м	(√)			Τ	I ID Passport No. Other															Da	te of	Birth	D	D	1 1	Ч	Y	Y	Y	γ	
Resident				Y (·	√)				N	(√)					Ро	stal	Ad	Idres	s							Post	al Co	ode						
Email Address																						Mobile	Nu	nber										
Position in the Co	osition in the Company / Organisation																																	
Occupation																																		

Fourth Signatory / Director																																					
Mr / Mrs / Ms First Name				Middle Name									L	Last Name																							
																Т																					
Nationality Identification				ion	n Type Iden										ntific	tification Number																					
Nation			nal	al ID Passport No. Other																																	
Gender F	(√)		М	(√)					PI	N																Dat	e of I	Birth	D		D	М	Μ	Υ	Υ	γ	Ý
Resident Y ($$)				N (√)					Postal				stal Address								Pos	tal C	ode	e													
Email Address																	м	obile	e N	um	ber																
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 st Signatory		Date								
1 st Signatory Passport Photograph		Signature of	1 st Signatory / Director							
Name of 2 nd Signatory		Date								
2 ^{№D} SIGNATORY PASSPORT PHOTOGRAPH		Signature of	2 nd Signatory / Director							
Name of 3 rd Signatory		Date								
3 RD SIGNATORY PASSPORT PHOTOGRAPH		Signature of	3 rd Signatory / Director							
Name of 4 th Signatory		Date								
4 ^{тн} SIGNATORY PASSPORT PHOTOGRAPH		Signature of	4 th Signatory / Director							

	solution for Appointment of Banker								
	a meeting of the Directors / Members / Trustees / Partners of (Insert Full Name o								
duly	y convened and held at	on the	day of20						
	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 arrangem	ents IT WAS RESOLVED as follow	WS:-						
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							
Ор	erating Mandate:								
	, the undersigned persons, on behalf of formity with the provisions of the Companies Act, No. 17 of 2015 and that the								
	has been incorporated with its own articles of association; or								
	has adopted the model Articles of Association as provided for in the Companies	s Act 2015; or							
	has been incorporated with part of its own Articles of Association and adopted	part of the model Articles of Asso	ociation provided in the Companies Act 2015.						
the	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.									
Dat	Dated day of20								
Sigi	ned:								
Nar	ne	Name							
Sigi	nature	Signature							
Dire	ector	Director / Company Secretary	У						

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

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

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Information Data Input							
Industry: Manufacturing Banking and Insurance Trading Services (Professional) Tourism		Bank Director related (Y/N)					
Others		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)			
Authorised by (Name & Initials)		Exception approved by	

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

