



ACCOUNT OPENING APPLICATION FORM – JOINT

Date

The Manager,
Hatton National Bank PLC,
 Branch.

For Bank Use Only	
Account No. 1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>
CIF No. 1.	<input type="text"/>
2.	<input type="text"/>
3.	<input type="text"/>

We the undersigned request you to open the following account in our names with your Bank (Please complete all details in CAPITAL LETTERS and (✓) where applicable. Strike off any cages which are not applicable).

TYPE OF ACCOUNTS

General Savings
 General Current Account
 Capital Savings
 HNB Salary Smart
 Savings +
 Money Market Savings

Personal Foreign Currency Account
 FC Advantage
 Other
 Specify
 Currency

EXISTING ACCOUNT HOLDERS

An existing account holder should complete the information pertaining to 'Personal Details' only if there is a change in the information submitted to the Bank previously. However the Name & NIC number should be indicated.

PERSONAL DETAILS (MAIN APPLICANT) (A)

Title Mr. Mrs. Miss Ms. Dr. Rev. Other

1. Name in Full

2. Nationality 3. Country of Residence

4. Country of Permanent Residence 5. Any other Citizenship/PR

6. NIC No. Date of Issue } (Please attach a copy) Date of Expiry

7. Passport / DL No. Date of Birth

9. Permanent Address

(Confirmation of Address Required if different from NIC)

10. Communication Address

(If different from the permanent address)

11. Contact Numbers Residence Office Mobile

Fax E-Mail

12. Occupation If Business state the nature of Business

13. Marital Status Single Married Divorced Widowed

14. Name of Employer

15. Address of Employer

16. Full name of Spouse

17. Employer of Spouse

(Name & address)

KYC DETAILS – (MAIN APPLICANT) (A)

Purpose of Opening the Account

Business Transactions
 Family Inward Remittance
 Loan Payment

Employment/Professional Income
 Savings/Investments
 Other

Source of funds: Expected source and nature of credits into the account

Donations/Charity (Local/Foreign)
 Salary/Profit Income
 Family Remittance

Sales and business turnover
 Sale of Property /Assets
 Other

Expected deposits to be routed through the account p.m.(in LKR)

Less than 100,000
 100,000 to 500,000
 Above 500,000 to 1 million
 Above 1 Million to 3 Million

Above 3 Million to 5 Million
 Above 5 Million to 10 Million
 Over 10 Million

Source of Wealth/Income generation
 Business Ownership Inheritance Investment Profession/Employment Other

Expected mode of transactions Expected type of Counter-parties (if applicable)

PERSONAL DETAILS (JOINT APPLICANT) (B)

Title Mr. Mrs. Miss. Ms. Dr. Rev. Other

1. Name in Full

2. Nationality 3. Country of Residence

4. Country of Permanent Residence 5. Any other Citizenship/PR

6. NIC No. Date of Issue Date of Expiry

7. Passport / DL No. (Please attach a copy)

Date of Birth

9. Permanent Address

(Confirmation of Address Required if different from NIC)

10. Communication Address

(If different from the permanent address)

11. Contact Numbers Residence Office Mobile

Fax E-Mail

12. Occupation If Business state the nature of Business

13. Marital Status Single Married Divorced Widowed

14. Name of Employer

15. Address of Employer

16. Full name of Spouse

17. Employer of Spouse

(Name & address)

KYC DETAILS – (JOINT APPLICANT) (B)

Purpose of Opening the Account
 Business Transactions Family Inward Remittance Loan Payment
 Employment/Professional Income Savings/Investments Other

Source of funds: Expected source and nature of credits into the account
 Donations/Charity (Local/Foreign) Salary/Profit Income Family Remittance
 Sales and business turnover Sale of Property /Assets Other

Expected deposits to be routed through the account p.m.(in LKR)
 Less than 100,000 100,000 to 500,000 Above 500,000 to 1 million Above 1 Million to 3 Million
 Above 3 Million to 5 Million Above 5 Million to 10 Million Over 10 Million

Source of Wealth/Income generation
 Business Ownership Inheritance Investment Profession/Employment Other

Expected mode of transactions Expected type of Counter-parties (if applicable)

PERSONAL DETAILS (JOINT APPLICANT) (C)

Title Mr. Mrs. Miss. Ms. Dr. Rev. Other

1. Name in Full

2. Nationality 3. Country of Residence

4. Country of Permanent Residence 5. Any other Citizenship/PR

6. NIC No. Date of Issue

DECLARATION BY THE APPLICANT FOR ELECTRONIC FUND TRANSFER CARD (EFTC)

We hereby confirm that we are aware of the conditions imposed under the provision of the Foreign Exchange Act, No. 12 of 2017 (As amended from time to time or replaced) on Electronic Fund Transfer Cards (EFTCs) subject to which the card may be used for transactions in foreign exchange and we hereby undertake to abide by the said conditions.

We further agree to provide any information on transactions carried out by us in foreign exchange on the Card issued to us as Hatton National Bank PLC may require for the purpose of the Act.

We are aware that the Authorized Dealer (Bank) is required to suspend availability of foreign exchange on EFTC if reasonable grounds exist to suspect that unauthorized foreign exchange transactions are being carried out on the EFTC issued to me and to report the matter to the Director - Department of Foreign Exchange.

We also affirm that we undertake to surrender the EFTC to Hatton National Bank PLC, if we migrate or leave Sri Lanka for employment abroad, as applicable.

We are also aware that cash and/or cheques deposited by use of the Card will only be credited to our account after verification by the bank. Cheques will not be collected to savings accounts. The statement issued by the Automated Teller Machine at the time of deposit will only represent what we purport to have deposited and shall not be binding on the Bank. The Bank's count of the amount contained in the envelope shall be conclusive (will not apply to deposit machine equipped with online real time cash acceptance feature). Cheques will be accepted for collection only and proceeds will not be available for drawing until the cheques are cleared and realized.

Joint Account holders are inter alia jointly & severally bound by these Terms and Conditions and are liable for all transactions processed by the use of the Card. All rules and regulations governing the operation of Current, Savings or any other Account shall be applicable to card transaction relating to such accounts.

USE OF E-MAIL ADDRESS

"The bank will use your e-mail address to provide you with better customer services and marketing material on products, customer surveys etc. If at any time you wish us to cease sending you direct mailings, please send us an e-mail or contact our representative, to the e-mail address or on call centre telephone number indicated in the bank website. The Bank will then, at no cost to you, act on your request within 15 days and ensure that you are not included in our future direct marketing promotions."

OPERATING INSTRUCTIONS

The Accounts should be opened in the joint name of and the Operating instructions should be as follows.

Any one of us All of us Other/s (Specify)

- In the event of the demise of any one of us, the balance at the credit of the account will be payable to the survivor/survivors without reference to the representatives of the deceased.
- "We hereby confirm having received a booklet containing the General Terms and Conditions applicable for Customer Accounts, Dealings and Transactions of Hatton National Bank PLC applied for by this application form (which together with the terms and conditions of this application shall constitute our contract with the Bank) and having read and understood/explained and understood, signed this document in agreement thereof and in acceptance of all such Terms and Conditions."
- We confirm that we have read/were explained and understood the Terms and Conditions governing the Internet Banking/HNB Alerts and on the website : www.hnb.net and updated from time to time.
- We confirm having accepted a floating interest rate subject to change weekly / monthly for the money market account / FC Advantage account.
- We hereby authorize you to act on instructions given by us relating to this account/accounts and We hold ourself liable of any indebtedness to the Bank created by such actions.

(A) Signature of Main Applicant (B) Signature of Joint Applicant (C) Signature of Joint Applicant

TO BE COMPLETED BY THE INTRODUCER (CURRENT ACCOUNT ONLY)

I, the undersigned, confirm that the applicant of this Current Account whose signature appear above has been known to me for the past years and is suitable to operate a Current Account with Hatton National Bank PLC.

Name(Introducer)
 Address
 Occupation
 Account No.
 Mobile No.
 Land Line

Signature of the Introducer

FOR BANK USE ONLY

Documents for Address / Name verification NIC / Passport <input type="checkbox"/> Billing proof <input type="checkbox"/> Driving License <input type="checkbox"/> Other <input type="text"/>			Personalised debit card issued FATCA PEP Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>			Destruction of non personalised card (if personalised issued) 'B' Class Signature 'A' Class Signature		
Current Account type CAGEN <input type="checkbox"/> CASTF <input type="checkbox"/> CNRRA <input type="checkbox"/> Other <input type="text"/>			Savings Account type SAGEN <input type="checkbox"/> SACAP <input type="checkbox"/> SASTF <input type="checkbox"/> SACIT <input type="checkbox"/> IIA <input type="checkbox"/> Other <input type="text"/>					
MIS Codes (For Quarterly Survey) Sector code <input type="text"/> Sub Sector code <input type="text"/> Industry Code <input type="text"/> Occupation code <input type="text"/> Debit tax exempted <input type="checkbox"/> Y <input type="checkbox"/> N								

EFTC Declaration

We, as the Authorized Dealer have carefully examined the information together with the relevant documents given by the applicant/s and we are satisfied with the bona-fide of these information and documents. We undertake to exercise due diligence on the transactions carried out by the card holder on his/her EFTC in foreign exchange and to suspend the availability of foreign exchange on the EFTC if reasonable ground exists to suspect that unauthorized foreign exchange transactions are being carried out on the EFTC in violation of the undertaking and to bring the matter to the notice of the Director-Department of foreign exchange.

EFTC Declaration / Introducer signature verified/
 Mandate & required documents are in order.

Authorized Officer

Employee No.

Interviewed and authorized to open the Current Account.

Branch Manager/Designated A Class Officer

Employee No.

Head office use

Audited by

Employee No.

Data Checked by

Employee No.