

HATTON NATIONAL BANK PLC

## **SAVINGS ACCOUNT OPENING FORM**

(FOR MINOR)

Date The Manager

..... Branch Dear Sir / Madam



				SAV - 10
For Bank Use Only				
Account No.				
CIF No.				
School Unit Code No.				

Please open a Minor's Savings Account as follows : (PLEASE USE CAPITAL LETTERS) *Please ( ) the box as appropriate</th <th></th> <th>School Unit Code No.</th>		School Unit Code No.			
TYPE OF ACCOUNT					
Singithi Kirikatiyo Singithi TEEN	Singithi Surakum	Currency			
Full Name (Master/Miss)      Date of Birth (Attach a copy of the birth certificate)      Address					
1. Full Name (Dr/Mr/Mrs/Ms/)  2. Address (Confirmation of address is required if different from NIC)  3. NIC No. Passport No. Passport No. Any Other  5. Nationality 7. Country of permanent residence 9. Telephone Numbers: Residence Mobile  10. Occupation  11. Name & Address of the Employer	a copy  D D M M  Please Specify  6. Country of residence 8. Any other citizenship (Please state the colling)  Office  Email  If "Business" state the nature	o / PR untry)			
KYC DETAILS OF	THE PARENT / GUARDIAN				
Source of funds: Expected source and nature of credits into the account  Donations / Charities (Local / Foreign) Sales and Business Turn Over Sale of Proper	ncome	Family Remittance Others(Specify)			
Document obtained for address verification  Please open the account in the name of the above mentioned minor. I hereby agree to conform to the rules governing Minor Savings Accounts as detail I hereby confirm having received a booklet containing the General Terms and Con Bank PLC applied for by this application form (which together with the Terms and understood/explained and signed this document in agreement thereof and in accellation form that the contents of this mandate were read out to me and he same I have placed my signature.	ditions applicable for Customer Conditions of this application shotance of all such Terms and Cond I hold myself liable for any in wing understood the	Accounts, Dealings and Transactions of Hatton National all constitute our contract with the Bank) and having read and onditions.			
යෙදූ බවට සහතික කරමි.  இந்த விண்ணப்பத்தில் உள்ள நியதி நிபந்தனைகள் எனக்கு வாசித்துக்காட்டப்பட்டது நான் அதனை விளங்கிக்கொண்டு இதில் கைச்சாத்திட்டேன் என்றும் உறுதிப்படுத்துகி					

Minor savings passbook received Yes / No

Signature of the Parent / Guardian

INITIAL OF APPLICANT/S	OFFICER'S INITIAL

## STANDING ORDER INSTRUCTIONS - OPTIONAL

Applicable only if the parent/quardian maintains a Savings/Current Account at HNB. Please transfer from the following Account: Full name (Dr/Mr/Mrs/Ms/.....) Account No Date to be transferred on Commencing from D D M Transfer frequency (Please mark ( ✓ ) as appropriate) 5 Monthly Quarterly Half Yearly Daily Weekly Annually Transaction Value Currency Transaction Value in words I/We hereby request and authorize you, until you receive notice to the contrary in writing, to make the periodical payment stated above according to the instructions contained therein, to the debit of my/our indicated account with your bank and credit the Minor Saving account of...... In view of the bank undertaking to make the remittance, it is expressly agreed and understood that the bank is relieved from all liability and claims for loss or damage, which may arise through error, omission or delay or otherwise howsoever. It is also understood that in the event there being insufficient funds in my/our account to meet payment on dates specified, the bank cannot accept responsibility for ensuring that instructions are carried out when funds subsequently become available. The bank will also cancel this instruction without reference, in the event two payments are defaulted for lack of funds. It is also understood and agreed that standard bank commissions and charges including for setting up, effecting payments, cancellation, amendment and non availability of funds on the due date shall apply. Applicable only to Parent/Court Appointed Guardian obtaining the standing order guarantee insurance cover offered by the bank: (Please ( ) the boxes) I hereby agree to obtain the standing order guarantee insurance cover offered by the bank free of charge and applicable only to monthly standing orders given by the Parent/Court Appointed Guardian of the minor in whose name the account is opened. I hereby agree and understand that in the event I am not eligible to benefit from this standing order guarantee insurance cover the bank shall not be held responsible due to my non-eliaibility I hereby authorize the Bank to share personal information provided by me with HNB Assurance PLC ("Insurer") and I hereby state that I have no objection in the said Insurer contacting me for this purpose. I hereby agree and understand that the minor in whose name the account is opened will benefit from this standing order guarantee insurance cover in the event of my death or demise before the minor reaching the age of maturity and provided the Standing Order is effective Signature - Main Account Holder Signature - Joint Account Holder HATTON NATIONAL BANK PLC **RULES GOVERNING THE OPENING OF SAVINGS ACCOUNTS** (MINOR) A savings deposit account for a minor may be opened by persons acceptable to the Bank. 2. Accounts are not opened in joint names of two or more minors or when the parties involved include minors as well as adults. The minimum initial deposit which an account may be opened shall be Rs. 1000/- for "Singithi Kirikatiyo", Rs. 500/- for "Singithi Lama" and, for HNB Teen and each subsequent deposit shall be for an amount not less than Rs. 50/-The beneficiary of the Minor's account shall be the Minor who shall be termed as the account holder. In the event of incapacity of the minor the proceeds of the account 4. will be disbursed to the parent (s) / Guardian or the account will be converted into a normal Savings Account (Where the proceeds of the account are disbursed to the parent (s) / Guardian, a receipt signed by the parent (s) / Guardian will be obtained) The minor in whose name the account is opened will be the beneficiary of the deposits made to the account. Hence no withdrawals will generally be permitted from the account until the minor attains the age of maturity. On reaching the age of maturity, the beneficiary will be required to complete and submit to the Bank a new savings account opening form and thereafter the account will be continued as an adult / major savings account, under the same account number. 6. Balances lying in the minor account cannot be assigned to the bank as security for advances. A pass book will be issued free of charge for each account opened and no charge will be made for any book issued in continuation of the original pass book. However "Singithi Surekum" Account Holders, will receive only a bank statement. On opening a savings deposit account, the Account Holder will be required to adhere to the rules governing the conduct of savings account, embodied in the savings 8. pass book and in the booklet containing the general terms and conditions applicable for customer accounts dealings and transactions of Hatton National Bank PLC. 9. The Bank's Books, records and accounts shall be conclusive and binding. Any certificate, printout or statement of account issued by the Bank shall be final and conclusive evidence against customer of the correctness thereof in any legal proceeding or otherwise 10. The rate of interest payable on the Minor's Savings Account may be displayed by the Bank at its various branches in Sri Lanka and the said interest rate will be subject to change without prior notice to account holder or to the Parent (s) / Guardian named in the account opening form. Interest on the Minor's Savings Account will accrue, daily or as otherwise determined by the Bank (in its absolute discretion) and will be credited to the Minor's Savings Account monthly. On agreeing to obtain the standing order guarantee insurance cover offered by the bank free of charge, the Parent/Court Appointed Guardian of the minor will be required to adhere to the key terms and conditions governing the standing order guarantee insurance cover embodied in the Key Fact Document/s of Minor Savings Account/s of the Bank. FOR BANK USE ONLY Account opening form and required documents verified and found to be in order. Signature verification of standing order Sig. Ref. No. Sig. Ref. No. **Authorized Officer** Signature Signature Authorized officer

Date

Date