

ACCOUNT OPENING APPLICATION FOR MONEY MARKET SAVINGS ACCOUNT (PARTNERSHIP)

The Manager
Hatton National Bank Plc

Date :

Account No :

CIF No :

We the undersigned *Names of Partners*

being the individual partners of the firm *Name of the Partnership* request you to open a Money Market Savings Account in the name of the Partnership.

Registered Address

Registration No

Telephone No Fax No

E-mail Address

Communication Address (if different from the permanent address)

COMMUNICATION DETAILS

REQUIREMENT FOR ACCOUNT S

Please forward Account Statement as indicated.

Mode of Collection E-mail Post E-mail Address

- We confirm having received a booklet containing the General Terms and Conditions applicable for Customer Account, 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 my/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 having accepted a floating interest rate subject to change weekly, for the Money Market Savings Account.

| | | | |
|--------------|--------------|--------------|--------------|
| Partner | Partner | Partner | Partner |
| Name | Name | Name | Name |
| NIC No | NIC No | NIC No | NIC No |

INSTRUCTIONS

The following additional documents need to be submitted (if not already available with the Bank)
 Partnership - Certificate of Registration of Partnership
 All partners to a Partnership are required to authenticate the account Mandate
 KYC form (AML - 1B) duly completed / signed by all partners (if not already available with the Bank)
 KYC form (AML -2) duly completed / signed individually by each partners / or proprietor (as applicable) (if not already available with the Bank)

| BANK USE ONLY | | Account No | |
|---|---------------------------|------------|--|
| MIS CODES (For Quarterly Survey) | Data Input Name | | |
| Sector Code <input style="width: 80px;" type="text"/> | EPF No | | |
| Subsector Code <input style="width: 80px;" type="text"/> | Data Authorized Name | | |
| Industry Code <input style="width: 80px;" type="text"/> | Signature & EPF No | | |
| Occupation Code <input style="width: 80px;" type="text"/> | Audited Name | | |
| | Signature & EPF No | | |