CORPORATE ACCOUNT OPENING FORM



Please complete form and tick where necessary. (CAUTION - Kindly note that the use of correction fluid renders this form invalid)					
Category of Business: Limited Liability Company Partnership Sole Proprietorship Public Organisations Clubs/Societies					
Account Type Current Easy Savers Currency: ¢\$ f € Account Number (for official use only)					
For foreign currencies, kindly provide explicit source of funds					
1. COMPANY DETAILS					
Company/Business Name					
Incorporation/Registration Number					
Date of Incorporation/Registration D M M Y Y Jurisdiction of Incorporation/Registration /Registration					
Parent Company's Type/Nature of Business					
Sector/Industry					
Operating Business Address					
Registered Office (if differnt from above)					
E-mail address					
Website (if any)					
Mobile Number Telephone Number					
Tax Identification Number (TIN)					
Name of Affiliated Company/Body					
2. ANNUAL TURNOVER					
a) GH¢ 0 - 9,999 GH¢ 10,000 - 49,999 GH¢ 50,000 - 99,000 GH¢ 100,000 above					
b) Is your Company quoted on the Ghana Stock Exchange? Yes No GSE Ref No.					
3. ACCOUNT SERVICE(S) (Please tick as applicable)					
Card Preferences: MasterCard Corporate Purchasing Visa Others Others					
Cheque Book 🔄 Internet Banking 🔽 🛛 Bank *737# 🔄 E-mail Alert (free) 🔽 SMS Alert 🔽 GAPS 🔽					
Statement Preference: Email Hold Statement Frequency: Monthly Quarterly Semi Annually Annually					
Link Mobile Money Wallet Yes No Mobile Money Number					
4. ACCOUNT SIGNATORY'S DETAILS (1)					
Title Surname Surname					
Surname Middle Name Middle Name					
First Name Date of Birth D M Y Gender Mother's Maiden Name Nationality					
First Name Date of Birth D Middle Name Middle Name Middle Name					
First Name First Name Date of Birth D M M Y Gender M F Mother's Maiden Name Nationality Permit Issue D M M Y Permit Expiry D M M Y Permit Expiry D M M Y D M Means of Identification Identificati					
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5. ACCOUNT SIGNATORY'S DETAILS (2)																	
Title Surna	ne																
First Name						Midd	lle Name										
Date of Birth D D M	MYY	Gender M	F		Mot	her's Mai	den Nam	e									
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ID Issue D D M M	Y Y ID Da	Expiry D	DM	Μ	ΥY		ion/Office e Officer	e									
Residential Address																	
City/Town Nearest Landmark																	
Metropolitan, Municipal D	istrict Asseml	bly Area (MN	NDA)							Re	gion						
Mobile Number				Te	lephone	Number									\perp		
E-mail address																	
6. DETAILS OF DIRECTO	RS / EXECUTI	VES / TRUS	TEES /	PROI	MOTER	/ EXECU1	ORS / AI	OMIN	ISTRAT	ORS	5 ETC	: (1)					
Title Surna	ne																
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ID Issue D D M M	Y Y ID	Expiry D	DM	Μ	ΥY		upation		-			•	•			•	
Job Title			I	-		osition/C											
Status as a Director (Pls tick	(as appropriate)	Chairman				ng Direct		Execu	tive Off	îcer			Exe	cutive	e Dire	ctor	
Non-Executive Director	Chief	f Financial O	fficer			Others (S	pecify)					1					
Residential Address			L														
City/Town							Re	gion									
Mobile Number				Te	lephone	Number											$\overline{\top}$
E-mail address																	\pm
7. DETAILS OF DIRECTO	RS / EXECUTI	VES / TRUS	TEES /	PROI	MOTER	/ EXECUT	ORS / AI	OMIN	ISTRAT	ORS	S ETC	(2)				- 1	
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Nationality				Re	sidence	Permit N	O (for Non-	Ghana	ians)								
Means of Identification							ID Numl	_					1				
L		Expiry	DM	ЪЛ	V V		г										
Date:																	
of the Officer																	
Status as a Director (Pls tick as appropriate) Chairman Managing Director/Chief Executive Officer Executive Director																	
Non-Executive Director Chief Financial Officer Others (Specify)																	
Residential Address																	
City/Town Region																	
Mobile Number				_ Tel	lephone	Number							+				\square
E-mail address																	
8. EXPECTED MONTHLY	ACCOUNT A	CTIVITY															
Transaction Types		ed No. of Tr					nticipate							_		_	
Deposits Withdrawals	0 - 10 🗆	11 - 50 🗆	abov				- 5,000 🗌 - 5,000 🗌		001 - 50		_	above					
Withdrawals	0 - 10 🗌	11 - 50 🗆	abov	9 20		0	- ว,000 🗌	5,0	001 - 50	,000		above	: 50,0				

9. ULTIMATE BENEFICIAL OWNER - SHAREHOLDING OF 5% AND ABOVE (1)							
Name of Percentage Percentage Holding							
Name of beneficial owner (if any)							
Mobile Number E-mail Address							
Nationality ID Type & Number							
f foreign National, provide foreign TIN or Bank Verification Number							
10. ULTIMATE BENEFICIAL OWNER - SHAREHOLDING OF 5% AND ABOVE (2)							
Name of Percentage Holding							
Name of beneficial owner (if any)							
Mobile Number E-mail Address							
Nationality ID Type & Number							
f foreign National, provide foreign TIN or Bank Verification Number							
11. ADDITIONAL DETAILS							
Purpose of Account: Savings Investment Transactional Others (Specify)							
Source of Funds: Investment Business Proceeds Others (Specify)							
12. MANDATE AND RESOLUTIONS							
Pursuant to this application, a meeting of the Board of Directors/Management Committee/AGM/Board of Trustees of the Company / Association / Trust was held on day of 20, it was resolved and declared that a current account be opened in the name of(Company Name) with Guaranty Trust Bank (Ghana) Ltd., ("the Bank") and the Bank is hereby authorized to honor the instructions of the persons whose signatures are contained in the specimen signature card delivered to the Bank.							
That the company hereby authorizes the bank to provide all the services requested by us in this form as may be determined from time to time by the authorized signatories indicated herein or as may change from time to time. It was further resolved that the bank may combine or consolidate all or any of the Company's accounts and set off or transfer any sums or assets standing to the credit of one or more of such accounts towards the Company's liabilities to the Bank. The persons whose signature appears below, one of whom is a director of the Company, have been duly authorized to mandate the account. The information provided for the opening of this account it true and correct in all material respects.							
Name: Signature: Designation Signature:							

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13 DECLADATION	1
13. DECLARATION	

I/We hereby apply for the opening of account(s) with Guaranty Trust Bank (Ghana) Limited. I/We understand that the information given herein and the document supplied are the basis for opening such account(s) and I/we therefore warrant that such information is correct.

Signature:

Designation _

I/We agree to be bound by the terms and conditions governing the operations of the account(s).

I/We further undertake to indemnify the Bank for any loss suffered as a result of any false information or error in the information provided to the Bank.

AUTHORITY TO DEBIT OUR CURRENT ACCOUNT FOR SEARCH FEE

I/We hereby authorize you to debit my/our account with the applicable charges for the legal search conducted on my/our account at the Registrar General's Department or relevant agency/aithority.

DISCLOSURE TO CREDIT REFERENCE BUREAUS

The Bank will obtain information about you from the credit reference bureaus to check your credit status and identity. The bureaus will record our enquiries to you.

The Bank shall also disclose your credit transactions to credit reference bureaus in accordance with the Credit Reporting Act, 2007 (Act 726).

Name:	Signature:	Date:	D	D	Μ	Μ	Y	Y
Name:	Signature:	Date:	D	D	Μ	Μ	Y	Y

14. DATA PROTECTION CONSENT

To enable Guaranty Trust Bank Ghana Limited. ("the Bank"), its affiliates and its contracted agents in managing and administering my/our account with the Bank, I/We hereby fully authorize the Bank and its affiliates and contracted agents, to share all information relating to me/us and my/our accounts, including, without limitation, any personal information, reference provided and other credit information maintained with or obtained by the Bank and its affiliates (including those obtained from credit reference agencies).

I/We further authorise the Bank, its affiliates and its contracted agents to use, store, process, share, disclose and transfer (whether within or outside the jurisdiction concerned) all information (including, without limitation, information relating to the debts), relating to me/us, as they shall consider necessary in connection with administering my account.

I/We acknowledge and agree that any such sharing or transfer of information will be on a confidential basis and that the Bank, its affiliates or other third party service providers, may disclose information if required or permitted by any law, rule or regulation or at the request of any public or regulatory authority or if such disclosure is required for the purposes of preventing fraud.

This consent does not limit any consent I/We have given (or may give) to the Bank to process or disclose my/our personal details.

I/We agree that the consent above is to be read in conjunction with the terms and conditions contained in the Bank's account opening form.

Name:	Signature:		Date:	DI	DM	Μ	Y	Y
15. JURAT (For non-literate and blind customers	s only)							
I agree to abide by the content of this agreement interpreter. Mark of Customer /Thumbprint	and acknowledge that Mark of Interpreter /Thumbprint	it has been truly and audibly re	ead over ar Date:		lained	I to m	ne by Y	y an
Name & Address of Interpreter		Language	of Interpre	tation				

TERMS AND CONDITIONS

Definitions

(a) "You" means the account holder named above, where two individuals are named, either or both of those individuals,

(d) "Accounts" means a current, savings or call account maintained with us at any of our branches in Ghana, (c) "Mailing Address" means your mailing address in our records. (d) "The Bank" refers to Guaranty Trust Bank (Ghana) Limited, (GTBank), a banking institution incorporated in Ghana and having its registered office at 25A Castle Road, Ambassadorial Area, Ridge. P.M.B CT 416, Cantonments, Accra, Ghana

Account Mandate

I/we (Customer) hereby request and authorize you to open account in my/our name and at any time subsequently to open further accounts as I/We may direct. I/we (Customer) hereby undertake: I. To guard against access to my account (s) by unauthorized person(s) II. To act as sole/co-signatory to the accourt II. To act as sole/co-signatory to the account (s) III. To notify the Bank immediately there is any change in my/our address and other relevant information for the smooth running of my/our account (s)

3.

All mandatory KYC documentation must be completed by the customer before the opening of the account. If you do not provide the required document during account opening, the account will be automatically restricted.

The customer shall assume full responsibility for the genuineness, correctness, and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments, receipts or other instructions deposited into account.

GTBank will not be responsible for any loss of funds deposited with it arising from any future government order, law, levy, tax, embargo, moratorium, exchange restriction or any other cause beyond its control

Foreign Currency/Foreign Exchange Account(s) cash withdrawal from my/our account shall be subject to availability.

4. Cheque Confirmation Policy

GTBank will subject to review from time to time confirm all cheques of Three Thousand Ghana Cedis (GHS 3,000.00) and above presented for payment. You may however confirm in advance through our Internet Banking Service or inform your Account Officers or Branch Managers when issuing cheques of Three Thousand Ghana and above as unconfirmed cheques may not be honoured or paid. This is to protect against the use of fake/forged cheques to withdraw money from your account(s).

Customer Responsibilities 5.

- To be responsible for the repayment of any overdraft with interest and to comply and be bound by the Bank's rules for the conduct of a current account receipt of which/we hereby acknowledge. b) That all funds standing to my/our credit are payable on demand only in such local currency as may be in circulation.
- To be bound by any notification of change in conditions governing the account directed to my/our last known address or e-mail address and any notice or letter sent to my/our last known address or e-mail address (s) shall be considered as duly delivered and received by me/us at the time it would be delivered in the ordinary course of post. c)
- d) That if a cheque credited to my/our individual current/easy savers/seniors, corporate account is returned dishonored, the same may be transmitted to me/us through my/our last known address
- either by bearer or by post. That I/We note that the Bank will accept no liability whatsoever for funds handed to members of its staff other than the cashiers/Tellers in the bank premises with the appropriate deposit slip That my/our attention has been drawn to the necessity of safe guarding my passwords, access codes, PINS and cheque book so that unauthorized persons are unable to gain access to it and to the fact that neglect of this precaution may be a ground for any consequential loss being charged to my/our account. That the Bank is under no obligation to honour any cheques(s) drawn on this account unless there are sufficient funds in the account to cover the value of the said cheques(s). f)
- q)
- Cheques may be returned to me/us unpaid but if paid, I am/we are obliged to repay the Bank on demand.
- That any disagreements with entries on my/our bank statements will be made by me/us within 15 days of receiving the bank statement failing receipts by the bank of a notice of disagreement of the entries within 15 days from the date of receipt of my/our bank statement, it will be assumed by the bank that the statement as rendered is correct. h)
- That I/we in respect of our easy savers accounts will make a maximum of four withdrawals per month. That if in any month I/we make more than four (4) withdrawals, commission on turnover i) charge shall be applied on transactions for the month.

Right to set off 6.

I/We also agree that in addition to any general lien or similar right to which you as bankers may be entitled by law you may at any time and without notice to me/us combine or consolidate all or any of my/our accounts without liabilities to you and set off or transfer any sum or sums standing to the credit of any one or more of such accounts or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging to me/us with you in or towards satisfaction of any of my/our liabilities to you or any other account or in any other respect whether such liabilities be actual or contingent collateral and several or joint.

7. Bank *737#

You may link your mobile money wallet to your bank account by using the Bank's *737# short code subject to charges as may be determined by the Bank from time to time. You will be requested to change your PIN upon linking your mobile money wallet to your account. Your PIN is confidential and acts as your authorized signature. The Bank shall not be held liable for any losses flowing from your failure to preserve the secrecy of your PIN.

8. SMS, E-Statements, E- Alert

- Mode of Sending Monthly Statements of accounts is via e-mails.
 - You are responsible for any information given by means of your passcode. This means that the Bank would not be responsible for any information given by means of your passcode. This means that the Bank would not be responsible for any fraudulent, duplicate or erroneous instruction given to us by means of your passcode.
- The Bank will not be liable for any failure to provide the service or to comply with these terms and conditions for any reason that is beyond our control. The Bank may, for any valid reason, alter, suspend or terminate the service without giving you notice and shall not be liable for doing this. iii

Internet Banking 9.

You must understand that giving your Account Number/Passcode shall be sufficient confirmation of the authenticity of any instruction given or transaction initiated. Therefore, the Bank will assume that any instruction given with your Account Number/Passcode is originating from you. This means that we will not be responsible for any fraudulent, duplicate or erroneous instruction given to us or any such transaction initiated by means of your Account Number/passcode. Also note that the Bank shall not be liable for complying with instructions given with your passcode if it is disclosed to a third party.

10. Debit Cards

- /We understand that the GTBank Card remains the property of the Bank and I/we will surrender it unconditionally and without reservation upon demand by the Bank. a)
- b) I/We may increase the chances of fraud occurring on my/our account, and the Bank would not be responsible in anyway whatsoever for any unauthorised transactions on my/our account during this period.
- I/We recognize that I am or we are not allowed to give my/our card to anyone except those involved when doing a Point of Sale transaction. The card is owned by the Bank and has been given to me/us in trust and is therefore not transferable. c)
- d) I/We hereby authorize the Bank to debit my/our account directly with all transactions undertaken at the Point Of Sale Terminals or ATMs with my/our card and I/ we take full responsibility for these transactions. I/we also agree to accept the Bank's receipt of withdrawals and transactions as conclusive and binding.
- e)
- The Bank is authorized to debit my/our account with fees in respect of the Card, for issue, use, and renewal or for providing the service herein. The Bank reserves the right to terminate the services at any time without notice to me/us and without any liability whatsoever. f)
- The Bank and its agents reserve the right to ask for proof of a Cardholder's identity if the Card is presented at its teller counters or Merchant points. This measure maybe followed from time to time in order for the Bank to protect its esteemed customers against any possible fraud. g)
- h) I/We understand that if I/we fail to collect my/our card(s) after six months of issuance the Bank will destroy the card.

11. Termination

- Either party may terminate this agreement by giving seven days written notice to the other party. However, the Bank may terminate this agreement with or without notice if the circumstance so warrant. 12. Jurisdiction
- The operation of this account/relationship is subject to the laws and regulations at any time existing in the Republic of Ghana.
- 13. Disclaimer Clause

The Bank disclaims liability for any funds /assets deposited by you which are subsequently found to have been derived from illegal source or activities. You confirm that the funds/assets deposited or to be deposited are not derived from any illegal source or activities.

14. Amendments and Variations

GTBank reserves the right to vary these terms and conditions at its discretion without notice to the applicant.

FOR OFFICIAL USE ONLY	
Risk Level Assessment Score: Low Medium High	AML Manual Screening
Completed Mandate Card Passport Photograph Identification	Proof of Address Reference (if applicable)
D or Birth Certificate of Minor (if applicable) Residence Permit Others	
Account Opened by	
CIS Officer	Signature & Date
Approved by	
Name	Signature & Date