

JOMORO

RURAL BANK PLC.

ACCOUNT OPENING FORM - INDIVIDUAL / JOINT ACCOUNT





JOMORO RURAL BANK PLC

ACCOUNT OPENING FORM – INDIVIDUAL/JOINT ACCOUNT

ACCOUNT TYPE Savings ☐ Current ☐ Joint ☐ Other Specify

AGENCY/
BRANCH
STAMP

Affix
Passport
Photograph
Here

ACCOUNT NO. (For office use only)

1A PERSONAL INFORMATION

Title Surname

First Name

Middle Name(s)

Former Name

Marital Status (Please tick as appropriate) Single ☐ Married ☐ Other (Pls Specify) Gender M ☐ F ☐

Date of Birth Place of Birth

Mother's Maiden Name

Nationality Resident Permit No.

Permit Issue Date Permit Expiry Date

Tax Identification Number (TIN) Region

Purpose of Account (Please Tick) Salary ☐ Savings ☐ Business ☐ Other, Specify

1B PERSONAL INFORMATION

Title Surname

First Name

Middle Name(s)

Former Name

Marital Status (Please tick as appropriate) Single ☐ Married ☐ Other (Pls Specify) Gender M ☐ F ☐

D	D	M	M	Y	Y	Y	Y

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[illegible]

D	D	M	M	Y	Y	Y	Y

D	D	M	M	Y	Y	Y	Y

[illegible]

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Salary

9

Savings ☐

Business

11

Others (Specify)

[illegible][illegible]

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[illegible][illegible][illegible][illegible]

11

11

11

7

[illegible]

D	D	M	M	Y	Y	Y	Y

D	D	M	M	Y	Y	Y	Y

Employed ☐

Self

employed ☐

Unemployed ☐Retired ☐

Student Others (Pls Specify)

)) _____

D	D	M	M	Y	Y	Y	Y

Annual Salary

Less than GHC5,000

☐ GHC5,001 – 10,000

☐ GHC10,001 – 20,000

More than GHC20,000

[illegible][illegible][illegible][illegible]

[illegible][illegible][illegible]

5 DETAILS OF NEXT OF KIN

Gender F ☐ M ☐

[illegible][illegible]

Middle Name:									
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[illegible]

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[illegible][illegible][illegible][illegible]

6 ADDITIONAL DETAILS

[illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y

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[illegible][illegible]

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[illegible][illegible][illegible][illegible][illegible]

7 ACCOUNTS WITH OTHER BANKS

[illegible]

8 ACCOUNT MANDATE

Sole Signatory ☐ Either to Sign ☐ Both to Sign ☐

Signature and Date

[illegible]

PHOTO(S)

Name _____

Signature

Name

Signature

9 ACCOUNT SERVICES(S) REQUIRED (Please tick the applicable option below)

Card Preferences ATM Card ☐ GH Link ☐ Others (Please specify)

Electronic Banking Preferences Internet Banking Mobile Banking ☐ Others (Please specify)

Transaction Alert Preferences Email Alert ☐ SMS Alert ☐

Statement Preference

Statements to be collected at the Branch/Agency

Statement Frequency:

Semi-Annually Annually

☐☐**10 DECLARATION / DISCLOSURE****DECLARATION**

I/We hereby apply for the opening of account(s) withBank. I/We understand that the information given herein and the documents supplied are the basis for opening such account(s) I/We therefore confirm that such information is correct.

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

DISCLOSURE TO CREDIT REFERENCE BUREAUX

The Bank will obtain any information about you from the credit reference bureaux to check your credit status and identity. The bureaux will record our enquiries which may be seen by other institutions that make their own credit enquiries about you.

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

Name..... Signature..... Date.....

Name..... Signature..... Date.....

11 (THIS SHOULD BE ADOPTED WHERE THE APPLICANT IS NOT LITERATE AND THE FORM IS READ TO HIM OR HER BY A THIRD PARTY)

I agree to abide by the content of this agreement and acknowledge that it has been truly and audibly read over and explained to me by an interpreter.

MARK/ THUMBPRINT OF
CUSTOMER

WITNESSED BY OFFICER
OPENING THE ACCOUNT

Date

D	D	M	M	Y	Y	Y	Y

NAME AND ADDRESS OF INTERPRETER

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LANGUAGE OF INTERPRETATION

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1 REQUIREMENT CHECKLIST**Savings Account**

NO.	DOCUMENTS REQUIRED	CHECKED	DEFERRED	WAIVED
1.	Duly completed Account opening form.			
2.	Specimen signature card duly completed			
3.	Recent passport photograph			
4.	Proof of identity: International passport, Driver's license or National Health card, Valid Ghanaian Voters ID (original must be signed)			
5.	Resident Permit (for non-Ghanaian)			
6.	Proof of Address: Utility bills etc. (Certified true copy is acceptable if the original is not held)			
7.	Letter from Employer / School (for salary account and or student only)			

Fixed/Current/Fixed Investment/Other Types of Account

NO.	DOCUMENTS REQUIRED	CHECKED	DEFERRED	WAIVED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

2 AUTHENTICATION FOR FINANCIAL INCLUSION

i. Is the customer socially or financially disadvantaged? Yes ☐ No ☐

ii. if answer to the question (i) above is YES, state other documents obtained in line with the Bank's policy on social/financially disadvantaged customer in compliance with paragraph.....of AML/CFT Regulation,

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iii. Does the Customer enjoy tiered KYC requirement? Yes ☐ No ☐

iv. If answer to question (iii) above is YES, identify the customer risk category

Low Risk ☐ Medium Risk ☐ High Risk ☐

3 AUTHENTICATION FOR POLITICALLY EXPOSED PERSONS

Is the Applicant a Politically Exposed Person? Yes ☐ No ☐

A. ACCOUNT OPENED BY:

Name

[illegible]

Signature:

D	D	M	M	Y	Y	Y	Y

B. DEFERRAL/WAIVER OF DOCUMENT (IF ANY) AUTHORISED BY:

Name

[illegible]

Signature:

D	D	M	M	Y	Y	Y	Y

C. ADDRESS VERIFICATION CARRIED OUT BY:

Name

[illegible]

Signature:

D	D	M	M	Y	Y	Y	Y

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D. ACCOUNT OPENING AUTHORIZED BY:

[illegible]

D	D	M	M	Y	Y	Y	Y

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[illegible]

D	D	M	M	Y	Y	Y	Y

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