



# **JOMORO**

## **RURAL BANK PLC.**

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### **ACCOUNT OPENING FORM - Entities (Incorporated and Non-Incorporated)**

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# JOMORO RURAL BANK PLC

## ACCOUNT OPENING FORM – Entities (Incorporated and Non-Incorporated)

(Please indicate the category and the type of account to be opened by ticking the applicable box below)

### Category of Business

Limited Liability Company ☐ Partnership ☐ Sole Proprietorship ☐ MMDA's ☐ Charities ☐  
Other (Specify)

### Account Type

Current Account ☐ Savings ☐

**ACCOUNT NO.** (For office use only)

**AGENCY/  
BRANCH  
STAMP**



## 1. COMPANY DETAILS (Please complete in BLOCK LETTERS and tick where necessary)

Company/Business Name



Certificate of Incorporation/Registration Number

Date of  
Incorporation/Registration

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Jurisdiction of  
Incorporation/Registration

Parent Company's Country of Incorporation

Type or Nature of Business

Sector/Industry

Operating Business Address 1

Operating Business Address 2

Corporate Business Address/Registered Office (If different from above)

Email Address

Website (if any)

Phone Number 1

Phone Number2

Tax Identification Number

Certificate to Commence Business Number

Other Reference Number

Please Specify

## 2. ANNUAL TURNOVER

a) GHS 0-9,999 ☐ GHS 10,000 – 49,999 ☐ GHS 50,000 – 99,999 ☐ GHS 100,000 and above ☐

b) Is your Company listed on the Ghana Stock Exchange? Yes ☐ No ☐ GSE Ref. No.

### 3. KEY CONTACT PERSON /PRINCIPAL OFFICER DETAILS

[illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y

☐ F ☐

[illegible][illegible]

RESIDENT PERMIT NO.							

[illegible][illegible]

D	D	M	M	Y	Y	Y	Y

D	D	M	M	Y	Y	Y	Y

[illegible][illegible]

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[illegible][illegible][illegible]

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

#### 4. ACCOUNT SIGNATORY'S DETAILS (1)

[illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y

☐ F ☐

[illegible][illegible]

RESIDENT PERMIT NO.							

[illegible][illegible]

D	D	M	M	Y	Y	Y	Y

D	D	M	M	Y	Y	Y	Y

[illegible][illegible]

\_\_\_\_\_

[illegible][illegible][illegible]

--	--

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

--

Date

D	D	M	M	Y	Y	Y	Y

[illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y

☐ F ☐

[illegible][illegible]

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[illegible][illegible]

D	D	M	M	Y	Y	Y	Y

D	D	M	M	Y	Y	Y	Y

[illegible][illegible]

\_\_\_\_\_

[illegible][illegible][illegible]

Metropolitan, Municipal District Assembly Area (MMDA)

Region

Phone Number1

Mobile Number

Phone Number2

Other Number

Email Address

Class of Signatory (please indicate class in the box provided)

Signature\_\_\_\_\_

Date

D	D	M	M	Y	Y	Y	Y

## 6. ACCOUNT SIGNATORY'S DETAILS (3)

Surname

First Name

Middle Name(s)

Date of Birth

D	D	M	M	Y	Y	Y	Y

Gender M ☐ F ☐

Mother's Maiden Name

Nationality

RESIDENT PERMIT NO.


Type of Identification

ID number

ID Issue Date

D	D	M	M	Y	Y	Y	Y

ID Expiry Date

D	D	M	M	Y	Y	Y	Y

Occupation

Job Title

Position

Residential Address

Nearest Landmark

City/Town

Metropolitan, Municipal District Assembly Area (MMDA)

Region

Phone Number1

Mobile Number

Phone Number2

Other Number

Email Address

Class of Signatory (please indicate class in the box provided)

Signature\_\_\_\_\_

Date

D	D	M	M	Y	Y	Y	Y

## 7. DETAILS OF THE DIRECTORS/EXECUTIVES/TRUSTEE/PROMOTER/EXECUTORS/ADMINISTRATORS (1)

[illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y

F [illegible][illegible][illegible][illegible][illegible]

D	D	M	M	Y	Y	Y	Y

D	D	M	M	Y	Y	Y	Y

[illegible][illegible]

\_\_\_\_\_

Chairman ☐ Managing Director/Chief Executive Officer ☐ Executive Director ☐ Non-Executive Director ☐

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[illegible][illegible][illegible]

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

## 8. DETAILS OF THE DIRECTORS/EXECUTIVES/TRUSTEE/PROMOTER/EXECUTORS/ADMINISTRATORS ETC (2)

[illegible][illegible]

Middle Name(s)

Date of Birth 

D	D	M	M	Y	Y	Y	Y

 Gender M ☐ F ☐ Mother's Maiden Name

Nationality

ID number

ID Issue Date 

D	D	M	M	Y	Y	Y	Y

 ID Expiry Date 

D	D	M	M	Y	Y	Y	Y

Occupation

Job Title

**Status as a Director** (Pls tick as appropriate)  
Chairman ☐ Managing Director/Chief Executive Officer ☐ Executive Director ☐ Non-Executive Director ☐  
Chief Financial Officer ☐ Other (Pls Specify)

Position/Office of the Officer

Residential Address

Nearest Landmark

City/Town

Metropolitan, Municipal District Assembly Area (MMDA)

Phone Number1

Phone Number2

Email Address

Mobile Number

Other Number

## 9. DETAILS OF THE DIRECTORS/EXECUTIVES/TRUSTEE/PROMOTER/EXECUTORS/ADMINISTRATORS ETC (3)

Surname

First Name

Middle Name(s)

Date of Birth 

D	D	M	M	Y	Y	Y	Y

 Gender M ☐ F ☐ Mother's Maiden Name

Nationality



Type of Identification

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

ID number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

ID Issue Date

D	D	M	M	Y	Y	Y	Y

ID Expiring Date

D	D	M	M	Y	Y	Y	Y

Occupation

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Job Title

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Position

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Status as a Director** (Pls tick as appropriate)

Chairman ☐ Managing Director/Chief Executive Officer ☐ Executive Director ☐ Non-Executive Director ☐

Chief Financial Officer ☐ Other (Pls Specify)

Position/Office of the Officer

Residential Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Nearest Landmark

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City/Town

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Metropolitan, Municipal District Assembly Area (MMDA)

Region

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone Number1

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mobile Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone Number2

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Other Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

#### 10. DETAILS OF THE DIRECTORS/EXECUTIVES/TRUSTEE/PROMOTER/EXECUTORS/ADMINISTRATORS (4)

Surname

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

First Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Other Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of Birth

D	D	M	M	Y	Y	Y	Y

Gender M ☐ F ☐

Mother's Maiden Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Nationality

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

RESIDENT PERMIT NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Type of Identification

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

ID number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

ID Issue Date

D	D	M	M	Y	Y	Y	Y

ID Expiry Date

D	D	M	M	Y	Y	Y	Y

[illegible][illegible]

\_\_\_\_\_

Chairman ☐ Managing Director/Chief Executive Officer ☐ Executive Director ☐  
 Chief Financial Officer ☐ Other (Pls Specify) ☐

[illegible][illegible][illegible]

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

Percentage Holding

Mobile Number																Nationality															
Email Address																															
Registration Certificate (If a shareholder)																															
Country of Incorporation (if a corporate shareholder)																															
Name(s) of Beneficial owner(s) (if any)																															

c). Full Name of Shareholder

Address																															
Status																Percentage Holding															
Mobile Number																Nationality															
Email Address																															
Registration Certificate (If a shareholder)																															
Country of Incorporation (if a corporate shareholder)																															
Name(s) of Beneficial owner(s) (if any)																															

d). Full Name of Shareholder

Address																															
Status																Percentage Holding															
Mobile Number																Nationality															
Email Address																															
Registration Certificate (If a shareholder)																															
Country of Incorporation (if a corporate shareholder)																															
Names of Beneficial owner(s) (if any)																															

e). Full Name of Shareholder

Address																															
Status																Percentage Holding															

Mobile Number															Nationality														
Email Address																													
Registration Certificate (If a shareholder)																													
Country of Incorporation (if a corporate shareholder)																													
Names of Beneficial owner(s) (if any)																													

f). Full Name of Shareholder

Address																													
Status															Percentage Holding														
Mobile Number															Nationality														
Email Address																													
Registration Certificate (If a shareholder)																													
Country of Incorporation (if a corporate shareholder)																													
Names of Beneficial owner(s) (if any)																													

**12. DETAILS OF ACCOUNT HELD WITH OTHER BANKS BY THE PROSPECTIVE CUSTOMER**

NO.	NAME AND ADDRESS OF BANK/BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	STATUS: ACTIVE/DORMANT
1.				
2.				
3.				
4.				
5.				

**13. ACCOUNTS SERVICE(S) REQUIRED (Please tick any 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 ☐

## 14. LETTER OF SET-OFF

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## LETTER OF SET-OFF

Authorized Signature of the Customer/Representative & Date

## 15. LETTER OF INDEMNITY

## 16. ACCOUNT OPENING MANDATE

## 16. ACCOUNT OPENING MANDATE

a) Account Type

Current Account ☐ Savings Account ☐ Other Types of Account

[illegible][illegible]

Sole Signatory ☐ Two or more ☐

d) Signatories

13.21

Surname

Other Na

Class of Sign

Identification Type

Identification No.

Telephone Number

Signature and Date

PHOTO(S)

PHOTO(S)

FOR BANK USE ONLY

Name

Signature

FOR BANK USE ONLY

Name

AUTHORIZER

Signature

ii) Name:

Surname

Other Name

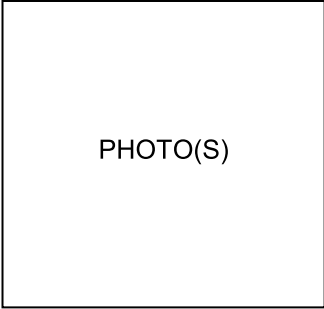
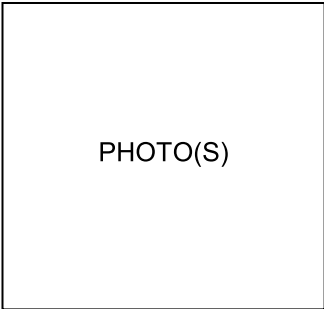
Class of Signatory

Identification Type

Identification No.

Telephone Number

Signature and Date



FOR BANK USE ONLY

Name

Signature

FOR BANK USE ONLY

Name

AUTHORIZER

Signature

iii) Name:

Surname

Other Name

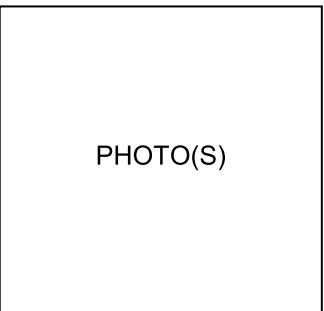
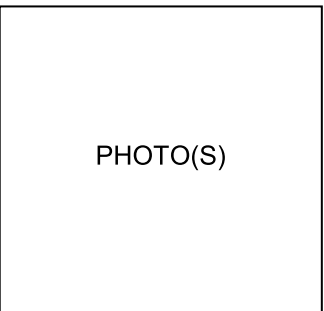
Class of Signatory

Identification Type

Identification No.

Telephone Number

Signature and Date



FOR BANK USE ONLY

Name

Signature

FOR BANK USE ONLY

Name

AUTHORIZER

Signature

## DECLARATION

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.

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

Name

[illegible]

Signature: \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

[illegible]

Signature: \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

COMPANY SEAL/STAMP HERE

In the presence of

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

Signature: \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

13

**FOR BANK USE ONLY**

**1. REQUIREMENTS CHECKLISTS**

NO.	DOCUMENTS REQUIRED	CHECKED	DEFERRED	WAIVED	N/A
1.	Account opening form duly completed				
2.	Specimen signature card duly completed				
3.	Certificate of Incorporation				
4.	Certificate of Registration				
5.	Form A details of Ownership showing registration of Business name, Registration receipt (Current year)				
6.	Copy of constitution rules of the prospective Club, Society or Charity				
7.	Certificate to Commence Business				
8.	Board Resolution to Open Account				
9.	Memorandum and Article of Association				
10.	Tax Clearance Certificate				
11.	Tax Identification Number (TIN)				
12.	Partnership Deed (where applicable)				
13.	Approval Letter (MMDAs)				
14.	Trust Deed				
15.	Act / Gazette (for Government Agency) (where applicable)				
16.	Two (2) passport sized photographs of each signatory to the account with name written on the reverse side				
17.	Introduction letter (where applicable)				
18.	Banker's Opinion				
19.	Resident Permit (for non-Ghanaians)				
20.	Evidence of Registration with Ghana Investment Promotion Centre (where applicable)				
21.	Evidence of Registration with other Government Agency/Agencies				
22.	Search Report (Registrar General's Department)				
23.	Power of Attorney (where applicable)				
24.	Letter of indemnity				
25.	Proof of Company Address				
26.	Business Premises visitation certificate				
27.	Proof of Identity of all Signatories and Directors/Officers whose names appear on the account opening forms/documents – Passport, National ID Card, National Driver's License and Voter's ID Card.				
28.	Proof of Identity of all Signatories and Directors/Officers whose names appear on the account opening forms/documents – Utility bill (Certified true copy is acceptable if original is not held)				
29.	Two completed satisfactory reference forms				
30.	Copy of the audited Financial statements/statement of affairs				
31.	Others (please specify)				

**\*Note**

Originals and photocopies of documents mentioned above must be provided.

**2. KYC RISK PROFILE**

Please tick appropriate risk profile

Low ☐

Medium ☐

High ☐

Please refer the AML/CFT Handbook

Indicate which Director, Executive, Trustee, Promoter, Executor or Administrator is a Politically Exposed Person (PEP)

Name

\_\_\_\_\_  
\_\_\_\_\_

Position

\_\_\_\_\_  
\_\_\_\_\_



**FOR BANK USE ONLY****A. ACCOUNT OPENED BY:**

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

**B. DEFFERAL / WAIVER OF DOCUMENTS (IF ANY) AUTHORIZED BY:**

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

**C. ADDRESS VERIFICATION CARRIED OUT BY:**

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

Name

[illegible]

Signature: \_\_\_\_\_

Date

D	D	M	M	Y	Y	Y	Y

**COMMENT(S):** (Address description and Result Findings)

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.....

**D. ACCOUNT OPENING AUTHORIZED/APPROVED BY:**

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y

Name

[illegible]

Signature: \_\_\_\_\_

Date \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y