



ACCOUNT OPENING APPLICATION
PERSONAL/ JOINT
DOMESTIC/ FOREIGN CURRENCY

Bank use only

A/C No.

Approved by

CIF 1

CIF 2

Manager

Ref. No.



The Manager, Bank of Ceylon: _____

Please open an Individual/ Joint account as per details provided by me/us

Select Account Type (Mark in the selected box)

Current Account

Personal

Prestige Plus

Passbook Savings **SmartGen (Statement) Savings**

Regular Senior Citizens'

18+ Kantha Ran Ginum

Ran Ulpatha Other _____

Foreign Currency Account	Currency Type
<input type="checkbox"/> PFC	<input type="checkbox"/> USD <input type="checkbox"/> AUD
<input type="checkbox"/> BFC	<input type="checkbox"/> GBP <input type="checkbox"/> JPY
<input type="checkbox"/> Other _____	<input type="checkbox"/> EUR <input type="checkbox"/> _____

Basic Information Applicant 1

Name with Initials _____

NIC No. (Passport for Foreign Nationals) _____

Applicant 2

To be filled by Existing Customers - to update previously submitted information (If any)

Mobile Phone No. _____

Email Address _____

Residential Status Sri Lanka Other (Specify) _____

Sri Lanka Other (Specify) _____

Account Related Information

Online Banking¹ Yes No

Debit Card¹ Yes No

Link to Existing Card Apply for a New Card

Card No. _____

SMS Alerts Yes No

All Credits All Debits

Yes No

Yes No

Link to Existing Card Apply for a New Card

Yes No

Debit Card Transactions only

1. For Joint AC's - Online banking & Debit cards will be available only for accounts with operating instructions with **Either of us OR Anyone**

Mailing Address (If differs from Primary Applicant's Permanent Address)

Postal Code _____

Statement type (Current/ Foreign Currency Accounts only)

Printed E-Statement

Statement Frequency (Current/ Foreign Currency Accounts only)

Monthly Weekly Daily

Name to appear on Cheque book (for Current AC's) _____

Other Information

Purpose of Opening the Account & Usage

Business Transactions Employment/Professional Income Loan Repayment/Bill Payment

Remittances Share Transactions/ Investments Savings

Social/Charity work Upkeep of Family/ Person Other (Specify) _____

Anticipated Volumes per month (in LKR)

Less than 100,000 100,000 - 500,000 500,000 - 1,000,000 1,000,000 - 2,000,000

2,000,000 - 3,000,000 3,000,000 - 5,000,000 Above 5,000,000

Expected Mode of Transactions Cash Cheque Fund Transfers Inward Remittances

Are you a US Person under the Foreign Account Tax Compliance Act (FATCA) of the US? Yes² No **2. Submit FATCA declaration**

Declaration

Operating Instructions for Joint Accounts

We hereby authorize you to act on instruction given by **Either of us / Both / Anyone / All** relating to this account. In the event of the death of anyone of us the balance at credit of the account will be payable to the survivor without reference to the representatives of the deceased.

I / We agree to comply with and to be bound by the rules of the bank governing the conduct of this Account and Other services including Debit card; Internet & Mobile banking; Mobile App; SMS alerts & E-statements which I / We have read and understood. I / We acknowledge the receipt of a copy of the Terms and conditions governing the above facilities.

In the event if I become a US Person under the Foreign Account Tax Compliance Act (FATCA) of US. I do hereby undertake to inform the said fact to the bank immediately

For foreign currency accounts: I / We agree to comply with and to be bound by the Exchange Control Regulations & Rules of the Bank governing the conduct of this account.

Applicant 1
Signature

Date

Applicant 2
Signature

Date

Nomination (Except for Current Account) Yes No (Cross out the section)

Nominee 1

Nominee 2

Full Name of Nominee

Address of Nominee

NIC/Passport No.

Payment %

Payment %

I / We do hereby nominate the above named as my/our nominee/s to receive all monies lying in the account on my/our death subject to the provisions of Section 14 of Bank of Ceylon Ordinance. We are aware in the event of the death of any one of joint account holders the nomination becomes invalid.

Signatures:**Witness:**

Applicant 1

Date

Name

Address

Applicant 2

Date

Signature

Introduction (For Current Accounts / Cheque Deposit Saving Accounts only)

I am well acquainted with _____ whose signature/s appear overleaf and his/her/their signature/s was/were affixed in my presence. I certify that he/she/they is/are suitable person/s to open and maintain a Current/Savings Account with Bank of Ceylon.

Name & Designation: _____

Address: _____

Current Account No: _____

Date: _____

Signature
(Place Seal if available)**Bank use only:** Verified by**Funding using Existing A/C** Yes³ No

(Cross out the section)

3. Both Accounts should be in the same Currency

Debit from my Savings/ Current Account bearing number to fund this new Account

Declaration by Joint Account Holder/s for issuing Debit Card/ Internet Banking Facilities

I / We have no objections in giving Debit card / Internet banking facilities to

Mr/ Ms _____

Mr/ Ms _____

Declaration for Electronic Fund Transfer Cards (To: Director, Department of Foreign Exchange, Central Bank of Sri Lanka)

(To be filled by the Applicant/s to obtain foreign exchange against Debit or any other Electronic Fund Transfer Card [EFTC].)

I / We _____ (Applicant/ 1), _____ (Applicant 2), declare that all the details given above by me/us on this form are true and correct. I/We hereby confirm that I/We am/are aware of the conditions imposed under the provision of the Foreign Exchange Act, No. 12 of 2017 (the Act) on Electronic Fund Transfer Cards (EFTC) subject to which the card may be used for transactions in foreign exchange and I/we hereby undertake to abide by the said conditions. I/We further agree to provide any information on transactions carried out by me/us in foreign exchange on the card/s issued to me/us as The Bank of Ceylon may require for the purpose of the Act. I/We am/are aware that the Authorised Dealer (bank) is required to suspend availability of foreign exchange on EFTC if reasonable ground exists to suspect that unauthorised foreign exchange transactions are being carried out on the EFTC issued to me/us and report the matter to the Director, Department of Foreign Exchange. I/We also affirm that I/we undertake to surrender the Debit card/s to The Bank of Ceylon if I/We migrate or leave Sri Lanka for employment abroad.

Applicant 1 Signature _____

Applicant 2 Signature _____

Bank use only**Declaration for Electronic Fund Transfer Cards**

I _____ (Name of the officer) as the Authorised Officer have carefully examined the information together with relevant documents submitted by the applicant/s and satisfied with the bona-fide of these information and documents. I undertake to exercise due diligence on the transactions carried out by the cardholder on his/her EFTC in foreign exchange and to suspend the availability of foreign exchange on the EFTC if reasonable ground exists to suspect that unauthorised foreign exchange transactions are being carried out on the EFTC in violation of the undertaking and to bring the matter to the notice of the Director, Department of Foreign Exchange.

Any other remarks**Declaration of the Authorized Officer**

I have carefully examined the above information together with the relevant documents submitted by the customer and satisfied myself that the said information and documents are in conformity with the Financial Transaction Reporting Act No 6 of 2006 and the Internal Policies & circulars of the Bank. Further I have updated the CIF according to the information.

Date PF Number Signature **Acknowledgement – I/We have received the following**Passbook Yes NoInternet banking (Login & PIN) Yes NoDebit Card & PIN Yes NO

Applicants' Signatures _____



CUSTOMER REGISTRATION APPLICATION

FOR PERSONAL CUSTOMERS

CIF ID		Auth. by
Ref. No.		

Personal Information

Title Mr Ms Mrs Dr Rev Other Gender Male Female

Last Name Initials

Name denoted by Initials

Other Names (If any)

NIC No ¹ Passport No. ¹

Date of birth DD/MM/YYYY Nationality Sri Lankan Other/Dual (Specify)

Civil Status Single Married Divorced Widowed No. of dependents

¹ Provide original NIC/ Passport

Contact Information

Permanent Address ²

Postal Code

Residential/ Foreign Address

Same as above

Postal Code

Country of Residence Sri Lanka Other (Specify)

Accommodation Type Own Lease/Rent Official Parent's Friends/Relatives Board/Lodgings

Residence Phone Mobile Phone

Office Phone Overseas Phone

Email

² Provide documentary proof if address differs from NIC;

Employment/ Income Information

Occupation/ Business Type

Name of Employer/ Business

Official Address

Postal Code

Employment Start date DD/MM/YYYY Monthly income (LKR)

Income Tax Payer? Yes No If Yes, Tax File No.

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Other Information

Sources of Income <i>Expected source & nature of credits in to accounts</i>	<input type="checkbox"/> Salary Income	<input type="checkbox"/> Business Profit	<input type="checkbox"/> Family Remittances	<input type="checkbox"/> Commission Income
	<input type="checkbox"/> Export Proceeds	<input type="checkbox"/> Contract Proceeds	<input type="checkbox"/> Investment Proceeds	<input type="checkbox"/> Donations/Charities
	<input type="checkbox"/> Sales of Property/Assets	<input type="checkbox"/> Member Contribution	<input type="checkbox"/> Gifts	<input type="checkbox"/> Other _____

Are you a US Person under the Foreign Account Tax Compliance Act (FATCA) of the US?³ Yes No
 3. Submit FATCA declaration if applicable

Do you have any third parties, acting on behalf of you? (E.g. Power of Attorney) Yes No

If Yes, Details of the Party:

Name	_____		
Address	_____		
NIC/PP No.	_____	Phone No.	_____
Power of Attorney No.	_____		

Declaration

I hereby request the bank to open accounts using the information declared above. I undertake to inform the bank immediately in the event of any change in any information provided by me.

Signature

In the event if I become a US Person under the Foreign Account Tax Compliance Act (FATCA) of the US, I do hereby undertake to inform the said fact to the bank immediately

Date _____ DD/MM/YYYY

For Bank Use Only

Name, Date of Birth & Nationality Verification	<input type="checkbox"/> NIC	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving License	<input type="checkbox"/> Birth Certificate (Minors)
	<input type="checkbox"/> Other (Specify) _____			
Address Verification	<input type="checkbox"/> NIC	<input type="checkbox"/> Other Bank Statement	<input type="checkbox"/> Letter – Public Authority	<input type="checkbox"/> Driving License
	<input type="checkbox"/> Employment Contract	<input type="checkbox"/> Tenancy/lease Agreement	<input type="checkbox"/> Income Tax Receipt/ Assesment Notice	<input type="checkbox"/> Other (Specify) _____
	<input type="checkbox"/> Utility Bill (Specify) _____			
Does the customer appear in Sanction Lists?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Sanction Screening Done	
Is the customer or any member of his immediate family, a Political Exposed Person (PEP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
If Yes, indicate Source of wealth	<input type="checkbox"/> Business ownership/income	<input type="checkbox"/> Profession/ Employment	<input type="checkbox"/> Inheritance	
	<input type="checkbox"/> Investments	<input type="checkbox"/> Other _____		
If any third parties act on behalf of the customer:				
Does he/she appear in sanction list?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Sanction Screening Done	
Is he/she a Politically Exposed Person (PEP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> PEP Screening Done	
Any other Details/ Remarks/ Notes:	-----			

Declaration of the Authorized Officer

I have carefully examined the above information together with the relevant documents submitted by the customer and satisfied myself that the said information and documents are in conformity with the Financial Transaction Reporting Act No 6 of 2006 and the Internal Policies & circulars of the Bank. Further I have updated the CIF according to the information.

Date	<input type="text"/>	PF Number	<input type="text"/>	Signature	<input type="text"/>
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