විශාම වැටුප් චකුලේඛ අංක : 01/2018

මගේ අංකය- විවැ/වකුලේඛ/2018 විශාම වැටුප් දෙපාර්තමේන්තුව මාළිගාවත්ත කොළඹ 10 2018/06/20

විදේශ දූත මණ්ඩල කාර්යාල පුධානීන්, දිස්තික් ලේකම්වරුන්, පුාදේශීය ලේකම්වරුන්,

විදේශගත ශී ලාංකික විශාමිකයන් වෙත විශාම වැටුප් ගෙවීම

තම පෞද්ගලික හා රාජකාරි අවශාතාව මත විදේශගතව වාසය කරන ශී ලාංකික විශාමිකයන්හට, තම මාසික විශාම වැටුප, විශාම වැටුප් දිනයෙහි ම ලබා ගත හැකිවන අයුරින් හා මාසික විශාම වැටුප් ගෙවීමේ නිවැරදි හා විධිමත් කිුයාවලිය තව දුරටත් විධිමත් කිරීම සඳහා මෙම චකුලේඛය නිකුත් කෙරේ.

02. මෙම චකුලේඛය නිකුත් කිරීමත් සමහ,

- 1996.07.11 දිනැතිව නිකුත් කරන ලද විශුාම වැටුප් වකුලේඛ අංක 3/96
- 1997.12.26 දිනැතිව නිකුත් කරන ලද විශුාම වැටුප් චකුලේඛ අංක 3/96(1)
- 2007.01.22 දිනැතිව නිකුත් කරන ලද විශාම වැටුප් චකුලේඛ අංක 4/2007
- 2010.04.06 දිනැතිව නිකුත් කරන ලද විශාම වැටුප් චකුලේඛ අංක 16/2009 (පුතිශෝධන)
- 2011.06.30 දිනැතිව නිකුත් කරන ලද විශාම වැටුප් චකුලේඛ අංක 5/2011
- 2014.11.21 දිනැතිව නිකුත් කරන ලද විශුාම වැටුප් වකුලේඛ අංක 15/2014
- 2016.02.08 දිනැතිව නිකුත් කරන ලද විවැ/උපදෙස් ලිපි අංක 03/2016

යන වකුලේඛ / ලිපි අවලංගු කරනු ලැබේ.

03. විදේශගත විශාමිකයන් හට විශාම වැටුප් ගෙවීම සඳහා ද,

- විශුාම වැටුප් වාාවස්ථා සංගුහය,
- 1981 යුධ හමුදා විශාම වැටුප් හා පාරිතෝෂික සේවා සංගුහය,
- 1981 නාවික හමුදා විශුාම වැටුප් හා පාරිතෝෂික සේවා සංගුහය,
- 1981 ගුවන් හමුදා විශුාම වැටුප් හා පාරිතෝෂික සේවා සංගුහය,
- වැන්දඹු හා අනත්දරු විශාම වැටුප් ආඥා පනත/ වැන්දඹු පුරුෂ හා අනත්දරු විශාම වැටුප් ආඥා
 පනත
- සන්නාහ සන්නද්ධ හමුදා වැන්දඹු හා අනත්දරු විශාම වැටුප් පනත/ සන්නාහ සන්නද්ධ හමුදා වැන්දඹු පුරුෂ හා අනත්දරු විශාම වැටුප් පනත

යන විධිවිධාන වලංගු වන බව අවධාරණය කරමි.

04. විදේශගත විශාමිකයන්හට ද තම විශාම වැටුප වෙනත් කෙනෙකුට පැවරීම, ඇටෝර්නි බලපතු ලබා දීම හෝ වෙනත් ගිණුම් හිමියෙකුගේ නමින් ගිණුම්ගත කිරීමට අවස්ථාව ලබා දීම සිදුකරනු නොලැබේ.

විදේශගත විශාම වැටුප් ලෙස තම විශාම වැටුප ලබා ගත හැකි අවස්ථා

05. පුාදේශීය ලේකම් කාර්යාල හරහා තම විශුාම වැටුප් ලබා ගන්නා විශුාමිකයන් හා විශුාම වැටුප් දෙපාර්තමේන්තුවේ පුථම ගෙවීම් අංශයෙන් විශුාම වැටුප් ගෙවීම ආරම්භ කරන විශුාමිකයන් සදහා විදේශ විශුාම වැටුප් ගෙවීම සදහා විශුාමිකයාගේ පුරවැසිභාවය හා විදේශගතව සිටින කාලය පිළිබඳව සලකා බැලිය යුතුය. ඒ අනුව පහත I, II හා III හි දක්වා ඇති විශුාමිකයන් විදේශගත විශාමිකයන් ලෙස සැලකේ.

I. වෙනත් රටක පුරවැසිභාවය හිමි විශාමිකයන්

මෙම විශාමිකයන් දීර්ඝ කාලීනව විදේශගතව සිටිය ද, ශුී ලංකාවේ වාසය කළ ද , වරින් වර විදේශගතව සිට ශුී ලංකාවට පැමිණිය ද ඔවුන්ගේ විශාම වැටුප් ගෙවීම, විශාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශාම වැටුප් අංශය මහින් පමණක් සිදුකළ යුතුය.

II. ද්විත්ව පුරවැසිභාවය හිමි විශාමිකයන්

මෙම විශාමිකයන්ගේ විශාම වැටුප් ද විශාමිකයා විදේශ ගතව සිටින කාලය නොසලකා අනිවාර්යයෙන්ම විශාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශාම වැටුප් අංශය මඟින් පමණක් ගෙවීමට කටයුතු කළ යුතුය.

III. වසර දෙකකට වඩා වැඩි කාලයක් සඳහා විදේශගත වන ශී ලාංකික විශාමිකයන්

වසර දෙකකට වඩා වැඩි කාලයක් සඳහා විදේශගතවීමක දී, වර්තමානයේ දී විශුාම වැටුප් ලබන පුාදේශීය ලේකම් කාර්යාලය වෙත දැනුම් දී තම විශුාම වැටුප, විශුාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශුාම වැටුප් අංශයෙන් ලබා ගැනීම සඳහා කටයුතු කළ යුතුය.

- 06. I. සේවා අවශාතාව මත වසර දෙකකට වඩා අඩු කාලයක් සඳහා විදේශගත වන විශුාමිකයන් හා පෞද්ගලික අවශාතාව මත මාස හය (06) වසර දෙක (02) අතර කාලයක් සඳහා විදේශ ගතවන විශාමිකයන්
 - a) වසර දෙකක් හෝ ඊට අඩු කාලයක් සඳහා සේවා අවශානාව මත විදේශගත වන විශාමිකයන් හා පෞද්ගලික අවශානාව මත මාස හය (06) වසර දෙක (02) අතර කාලයක් සඳහා විදේශ ගතවන විශාමිකයන්ගේ හා ඔවුන්ගේ යැපෙන්නන්ගේ පහසුව සලකා විශාම වැටුප් ගෙවීම විශාමිකයා අයත් ප්‍රාදේශීය ලේකම් කාර්යාල මහින් සිදු කරනු ලැබේ.
 - b) මෙම විශාමිකයන් සඳහා විශාම වැටුප් ගෙවීම් සිදු කිරීමේදී විශාමිකයා විදේශගත වන දින සිට නැවත පැමිණෙන දින තෙක් ජීවන වියදම් දීමනාව රු.2000ක් හා වෙනත් දීමනා රු.3500ක් වන පරිදි ගෙවීම් සිදු කල යුතුය. මෙම විශාමිකයන් පිළිබඳ ලේඛනයක් පාදේශීය ලේකම් කාර්යාලය මහින් පවත්වාගෙන යායුතු අතර එම තොරතුරු සෑම වසරකම ජූනි 31 දින හා දෙසැම්බර් 31 දින විශාම වැටුප් දෙපාර්තමේන්තුව වෙත ලැබීමට සැලැස්විය යුතුය.

II. පෞද්ගලික අවශාතාවය මත මාස හයක් (06) හෝ ඊට අඩු කාලයක් සඳහා විදේශගත වන විශාමිකයන්

මෙම විශාම වැටුප් විදේශ විශාම වැටුප් ලෙස නොසැලකේ. ඒ අනුව තම පෞද්ගලික අවශානාවය මත හෝ විනෝද චාරිකා හෝ වන්දනා ගමන් හෝ පෞද්ගලික ගමන් සදහා මාස හයක් (06) හෝ ඊට අඩු කාල සීමාවක් සදහා විදේශ ගතවන විශාමිකයන් හට විශාම වැටුප් ගෙවීම සාමානා පරිදි පුාදේශීය ලේකම් කාර්යාල හරහා සිදු කල යුතුය.

07. I. පුධාන කාර්යාලයෙන් ගෙවීම් කරන ඉහත 05 (I, II, III) හි දැක්වෙන විශුාමිකයන් සඳහා විශුාම වැටුපට අදාල විශුාම වැටුප් ගොනුව නඩත්තු කිරීම, යාවත්කාලීන කිරීම හා විශුාම වැටුප් ආරම්භ කිරීම ද පුධාන කාර්යාලයෙහි විදේශ විශුාම වැටුප් අංශය මගින් සිදු කෙරේ.

II. පුාදේශීය ලේකම් කාර්යාල මහින් ගෙවනු ලබන ඉහත 06 (I) කාණ්ඩයට අයත් විශාම වැටුප් ගෙවීම, තානාපති කාර්යාල මගින් සහතික කරන ලද ජීවිත සහතික ලබා ගැනීම, විශාම වැටුප් ගොනු නඩත්තු කිරීම හා යාවත්කාලීන කිරීම විශාමිකයා අයත් පුාදේශීය ලේකම් කාර්යාලය මහින් සිදු කළ යුතුය.

විදේශ විශාම වැටුප ලබා ගැනීම සඳහා ඉදිරිපත් කළ යුතු ලේඛන

08. ඉදිරියේ දී විදේශ විශාම වැටුප් ලබා ගැනීමට අපේක්ෂිත ඉහත 06 (I) හි දැක්වෙන විශාමිකයන් පහත සදහන් ලේඛන තමා අයත් පාදේශීය ලේකම් කාර්යාලය වෙත හා ඉහත 05 (I, II, III) හි දැක්වෙන විශාමිකයන් පහත සදහන් ලේඛන විශාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශාම වැටුප් අංශය වෙත විදේශගතවීමට මාස දෙකකට පෙර ඉදිරිපත් කළ යුතු වේ.

- a) නිවැරදිව සම්පූර්ණ කරන ලද ජීව දත්ත පතිකාව (www.pensions.gov.lk වෙබ් අඩවියෙන් බාගත කරන ලද)
- b) විදේශ විශාම වැටුප් ලබා ගැනීම සඳහා වන ඉල්ලීම් ලිපිය
- c) මෑතක දී (මාස 6 ක් ඇතුළත දී) ලබා ගත් 3.5cmx4.5cm පුමාණයේ වර්ණ ඡායාරූප දෙකක්
- d) විදේශගත වීම සනාථ කරන වීසා බලපතුය හෝ ස්ථීර පදිංචිය ලබාගත් සහතික හෝ පුරවැසිභාවය ලබාගත් සහතිකය හෝ කොන්තුාත් / තාවකාලික / අනියම් සේවා පදනම මත විදේශගත වේ නම් විශාමිකයා වීසින් සහතික කරන ලද සේවා ගිවිසුමෙහි ඡායාපිටපත
- e) ශුී ලංකා රජයෙන් නිකුත් කරන ලද වලංගු විදේශ ගමන් බලපතුයේ හෝ විදේශ රටකින් නිකුත් කරන ලද වලංගු විදේශ ගමන් බලපතුයේ පිටපතක්
- f) අදාළ වර්ෂය සඳහා ලබා දෙන ජීවිත සහතිකය

- 09. උක්ත (a) සිට (f) දක්වා ලේඛන ඉදිරිපත් කිරීමේදී ඉහත 06 (l) හි දැක්වෙන විශාමිකයන් සෘජුවම පාදේශීය ලේකම් කාර්යාල වෙත හා ඉහත 05 (l, ll, lll) හි දැක්වෙන විශාමිකයන් විශාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශාම වැටුප් අංශය වෙත පෙනී නොසිටින්නේ නම් එම ලේඛන තමන් විදේශගතව සිටින රටෙහි ශී ලංකාවේ තානාපති කාර්යාල/ මහ කොමසාරිස් කාර්යාල හෝ විදේශ දූත මණ්ඩලයෙහි බලයලත් නිලධාරියෙකු වෙතින් පමණක් සහතික කර යොමු කිරීමට කටයුතු කළ යුතුය. (වෙනත් කිසිදු නිලධාරියෙකු හෝ පුද්ගලයෙක්/ආයතනයක් මගින් සහතික කරනු ලබන ලේඛන පිළිගනු නොලැබේ.)
- 10. නිවැරදිව සම්පූර්ණ කළ ලේඛන බාර දුන් අවස්ථාවේදී ම විශාම වැටුප් දෙපාර්තමේන්තු නිලධාරීන්/ පුාදේශීය ලේකම් කාර්යාල නිලධාරීන් විසින් පරීක්ෂා කරනු ලබන අතර අසම්පූර්ණ අයදුම්පත් එම අවස්ථාවේදී ම පුතික්ෂේප කරනු ලැබේ. නිවැරදිව සම්පූර්ණ කළ අයදුම්පත් සඳහා කඩිනමින් විදේශ විශාම වැටුප් ගෙවීම ආරම්භ කිරීමට අවශා ඉදිරි කටයුතු කරනු ලැබේ.

විදේශගත විශාමිකයන් සඳහා විශාම වැටුප් ගෙවීම් ආරම්භ කිරීම

- 11. වෙනත් රටක පුරවැසිභාවය හිමි විශාමිකයන්, ද්විත්ව පුරවැසිභාවය හිමි විශාමිකයන් හා වසර දෙකකට වඩා වැඩි කාලයක් සදහා විදේශගත වන ශ්‍රී ලාංකික විශාමිකයන් සදහා ගෙවීම් කිරීම විශාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශාම වැටුප් අංශය මහින් පහත සදහන් බැංකු ශාඛාවන්හි පවත්වා ගෙන යනු ලබන විශේෂිත බැංකු ගිණුම් මහින් පමණක් සිදු කෙරේ.
 - a) ලංකා බැංකුව අගනුවර ශාඛාව
 - b) මහජන බැංකුව රැජින ශාඛාව
 - c) පැත් ඒෂියා බැංකුව බොරැල්ල ශාඛාව
 - d) හැටන් නැෂනල් බැංකුව මාළිගාවන්ත ශාඛාව
- 12. විශාමිකයා විසින් ඉහත බැංකුවලින් ඕනෑම එක් බැංකුවක **තනි පුද්ගල ඉතිරිකිරීමේ ගිණුමක්** විවෘත කළ යුතුය. ඒ සඳහා,
 - 💠 අදාළ බැංකුවෙහි ගිණුම් විවෘත කිරීමේ ආකෘති පතුය
 - letter of consent
 - 🌣 KYC (Know Your Customer) ආකෘති පතුය

යන ලේඛන නිසි පරිදි සම්පූර්ණ කර විශුාම වැටුප් දෙපාර්තමේන්තුවෙහි විදේශ විශුාම වැටුප් අංශය වෙත පෙනී සිට විදේශ විශුාම වැටුප් අංශයෙන් අනුමැතිය ලබා ගෙන අදාළ බැංකුව වෙත ඉදිරිපත් කළ යුතු වේ. නැතහොත් විදේශගතව සිටින රටෙහි ශ්‍රී ලංකාවේ තානාපති කාර්යාල/ මහ කොමසාරිස් කාර්යාල හෝ විදේශ දූත මණ්ඩලයෙහි බලයලත් නිලධාරියෙකු වෙතින් සහතික කර, විදේශ විශාම වැටුප් අංශය වෙත ඉදිරිපත් කළ යුතු අතර, එම අයදුම්පත් විදේශ විශුාම වැටුප් අංශය මගින් අදාළ බැංකුව වෙත යොමුකර හිණුම් විවෘත කිරීමට කටයුතු කරනු ලැබේ.

(ඉහත ලේඛන www.pensions.gov.lk වෙබ් අඩවියෙන් ලබාගත හැක)

- 13. විශාමිකයන්ගේ පහසුව සඳහා විශාම වැටුප් අදාළ විශේෂිත බැංකු ගිණුමේ සිට ,
 - එම බැංකුවෙහිම වෙනත් බැංකු ශාඛාවක විශුාමිකයාගේ නමින්ම පවත්වාගෙන යනු ලබන තනි පුද්ගල ඉතිරිකිරීමේ ගිණුමකට

ගන්

විශාමිකයාගේ නමින් විදේශ බැංකුවක පවත්වාගෙන යනු ලබන තනි පුද්ගල ඉතිරිකිරීමේ
 ගිණුමකට

මාරුකර ගැනීමේ අවස්ථාව ලබා දෙනු ලැබේ. එලෙස මුදල් මාරුකිරීමේ දී විශාමිකයාට අදාළ රටෙහි මුදල් ඒකකයට සරිලන විනිමය අනුපාතිකයට අනුව මුදල් ලබා ගැනීමේ අවස්ථාව හිමිවනු ඇත. විශාමිකයා මුදල් හුවමාරු කර ගන්නා සෑම අවස්ථාවකදී ම මුදල් හුවමාරු කර ගැනීමේ පතිකාව සමහ ජීවිත සහතිකය බැංකුව වෙත ලබා දිය යුතු වේ.

- 14. එලෙස බැංකු ගිණුම් අතර මුදල් හුවමාරු කිරීමට බලාපොරොත්තු වන විශාමිකයන් තම ඉල්ලීම අදාල බැංකුව වෙත සෘජුව ඉදිරිපත් කළ යුතු අතර, බැංකුව විසින් දෙපාර්තමේන්තු වෙබ් අඩවිය පරීක්ෂා කිරීමෙන් විශාමිකයාගේ අනනානාව තහවුරු කර ගත යුතු වේ. අනනානාව තහවුරු කිරීම පිළිබඳ ව තවදුරටත් ගැටළු පවතී නම් බැංකුව විසින් විශාම වැටුප් දෙපාර්තමේන්තුවෙන් විමසීමට කටයුතු කළ යුතුය.
- 15. සේවා අවශානාව මත වසර දෙකකට වඩා අඩු කාලයක් සඳහා වන විදේශගත වීමක දී, විශාම වැටුප විශාමිකයා අයත් පාදේශීය ලේකම් කාර්යාලයෙන් ලබා ගත හැකිය. එම විශාම වැටුප පිළිගත් ඕනෑම වාණිජ බැංකුවක විශාමිකයා නමින් පවත්වා ගෙන යනු ලබන තනි පුද්ගල බැංකු ගිණුමට ගෙවීමට කටයුතු කරන අතර එම ගිණුම් සඳහා ATM කාඩ්පත් භාවිත කිරීම අවුරා තබනු ලැබේ.
- 16. එසේම, විදේශ දූත මණ්ඩල කාර්යාල / මහ කොමසාරිස් කාර්යාල හරහා විදේශ විශාම වැටුප් ගෙවීම මින් ඉදිරියට තව දූරටත් සීමා කරනු ලැබේ. එසේම අලුතින් ආරම්භ කරනු ලබන විදේශ විශාම වැටුප් විශාමිකයන්ගේ පහසුව සඳහා මින් ඉදිරියට විදේශ විශාම වැටුප් අංශයේ මග පෙන්වීම මත පවත්වා ගෙන යනු ලබන බැංකු ගිණුම් මහින් පමණක් සිදු කෙරේ.
- 17. එක්සත් රාජධානිය, ඇමරිකා එක්සත් ජනපදය, ඕස්ටේලියාව, කැනඩාව හා ඉන්දියාව යන රටවල්වල මහ කොමසාරිස් කාර්යාල මහින් දැනටමත් විදේශ විශුාම වැටුප් ලබන විශුාමිකයන් සඳහා පමණක් මහ කොමසාරිස් කාර්යාල හරහා මාසික විශුාම වැටුප් ගෙවීමට කටයුතු කරනු ලැබේ.
- 18. විදේශගත විශාමිකයන් සදහා බැංකු ගිණුම් විවෘත කිරීම, පවත්වාගෙන යාම, මුදල් හුවමාරු කිරීම ද ඇතුළු බැංකු ගිණුම් පිළිබඳ සියලු පරිපාලන කටයුතු ශී ලංකා මහ බැංකුවේ විධිවිධාන පරිදි අදාල වාණිජ බැංකු විසින් ඉටු කරනු ඇත.

එකතු වූ විශුාම වැටුප් ගෙවීම

- 19. 2009 වර්ෂයට පෙර විදේශගත විශාමිකයන් නැවත ශී ලංකාවට පැමිණි පසු එකතු වන ලද විශාම වැටුප ගෙවීම් කරන ලදී. නමුත් විදේශගත විශාමිකයන් වෙත ද විශාම වැටුප් දිනයේදී ම මාසික විශාම වැටුප් ලබා ගැනීමේ අවස්ථාව උදා වන පරිදි 2009 වර්ෂයේදී විදේශ විශාම වැටුප් අංශය පිහිටුවන ලදී. එබැවින් වර්තමානය වන විට හිහ විශාම වැටුප් ගෙවීමේ අවශාතාවය අවම වී ඇත. එසේ නමුත්,
 - 2009 වර්ෂයට පෙර විශුාම වැටුප් ගෙවීම නතර කළ විශුාමිකයන්
 - විධිමත් විශුාම වැටුප් ගොනු නොමැති විශුාමිකයන්
 - ගෙවීම් ලේඛන නොමැති/ ලේඛන දිරාපත් වූ විශාමිකයන්
 - තාවකාලිකව විශාම වැටුප් ගෙවීම් අත්හිටවූ විශාමිකයන්

සඳහා එකතු වූ විශුාම වැටුප් ලබාගැනීමට ඉල්ලීම් ඉදිරිපත් වේ. එවැනි ඉල්ලීම් සලකා බැලීම හා ඉදිරි කටයුතු කිරීම සඳහා විශුාමිකයා විසින් පහත සඳහන් ලේඛන ඉදිරිපත් කල යුතු වේ.

- a) අදාළ කාලය තුළ විශුාම වැටුප් නොගෙවූ බවට පුාදේශීය ලේකම් විසින් කරනු ලබන සහතිකය
- b) අදාළ විශුාම වැටුප ලබා නොගත් බවට දිවුරුම් පුකාශයක්
- c) අදාළ වර්ෂය සඳහා ලබා දෙන ජීවිත සහතිකය

20. මීට අමතරව

- a) විධිමත් ව සකස් කරන ලද විශාම වැටුප් ගොනුව
- b) විශාම වැටුප් දෙපාර්තමේන්තුවෙහි දත්ත පද්ධතිය තුළ විශාම වැටුප් නොගෙවූ බවට සටහන් වීම යන කරුණු සම්පූර්ණ වීම මත එකතු වූ විශාම වැටුප් ගෙවීම සඳහා ඉදිරි කටයුතු සිදු කරනු ලැබේ.

ඉහත ලේඛන අසම්පූර්ණ විශුාමිකයන්ගේ එකතු වූ විශුාම වැටුප් පිළිබඳ ඉල්ලීම් සලකා බැලිය නොහැකි අතර ඉදිරි මාසික විශුාම වැටුප් ගෙවීම් කිරීම පමණක් සළකා බලතු ලැබේ.

ජීවිත සහතික ලබා දීම

- 21. සෑම වසරකදීම දෙසැම්බර් මස 01 දින සිට ඊළඟ වර්ෂයේ මාර්තු මස 31 දක්වා කාලය තුළ සියලුම විදේශගත විශාමිකයන් සිය ජීවිත සහතික ලබා දිය යුතුය. පුධාන කාර්යාලයෙන් ගෙවීම් කරන වෙනත් රටක පුරවැසිභාවය හිමි විශාමිකයන්, ද්විත්ව පුරවැසිභාවය හිමි විශාමිකයන් හා වසර තුනකට වඩා වැඩි කාලයක් සදහා විදේශගත වන ශී ලාංකික විශාමිකයන් විශාම වැටුප් දෙපාර්තමේන්තුවෙහි ඉදිරි මෙහෙයුම් කවුළුව වෙත පැමිණ හෝ විදේශ දූත මණ්ඩල කාර්යාල මහින් පුධාන කාර්යාලය වෙත තම ජීවිත සහතික ලබා දිය යුතුය.
- 22. පුාදේශීය ලේකම් කාර්යාල මහින් ගෙවීම් කරන සේවා අවශානාවය මත විදේශගත වන විශාමිකයන් විදේශ දූත මණ්ඩල කාර්යාල හරහා ලබා ගත් ජීවිත සහතික පුාදේශීය ලේකම් කාර්යාල වෙත ලබා දිය යුතුය.

- 23. පෞද්ගලික අවශානාව මත මාස 06ක් හෝ ඊට අඩු කාලයක් සඳහා විදේශ ගතවන විශාමිකයන්ගේ විශාම වැටුප් විදේශ විශාම වැටුප් ලෙස නොසැලකේ. එම විශාමිකයන් ජීවිත සහතික ලබාදීම සාමානා පරිදි ශාම නිලධාරීන් මහින් පුාදේශීය ලේකම් කාර්යාල හරහා සිදු කළ යුතුය.
- 24. වයස්ගත බව හෝ රෝගී බව මත තාතාපති කාර්යාලයට යාමට තොහැකි විශුාමිකයන් හට අදාල රටෙහි පිළිගත් වෛදාාවරයෙක් මහිත් ලබා ගත්තා ලද ජීවිත සහතිකය තාතාපති කාර්යාලය මහිත් සහතික කර ලබා දිය හැකිය. තාතාපති කාර්යාල විසින් සහතික තොකළ ජීවිත සහතික පුතික්ෂේප කරනු ලැබේ.
- 25. විදේශගත විශාමිකයන් නිසි පරිදි සම්පූර්ණ කර සහතික කරන ලද ජීවිත සහතික තමන් විසින් හෝ විදේශ දූත මණ්ඩල කාර්යාල හරහා පමණක් දෙපාර්තමේන්තුව වෙත ලබාදිය යුතු අතර දොතීන්, නියෝජිතයන් හෝ ඇටෝර්නි බලපතුකරුවන් මහින් දෙපාර්තමේන්තුව වෙත ජීවිත සහතික ලබාදීමේ බලය මෙම වකුලේඛය කියාත්මක වීමත් සමහ අවලංගු කරනු ලැබේ.
- 26. ජීවිත සහතික ලබාදීම සම්බන්ධයෙන් වූ උපදෙස් අදාල වර්ෂයන්හිදී විශාම වැටුප් දෙපාර්තමේන්තු වෙබ් අඩවියෙහි යාවත්කාලීන කරනු ලැබේ.
- 27. විදේශ දූතමණ්ඩල කාර්යාල හරහා ලබා දෙන ජීවිත සහතික විදේශ දූත මණ්ඩල කාර්යාල මහින් ද, විශාම වැටුප් දෙපාර්තමේන්තුව වෙත ලබා දෙන ජීවිත සහතික විදේශ විශාම වැටුප් අංශය මගින් ද දත්ත පද්ධතියට ඇතුළත් කළ යුතුය.
- 28. විදේශගත විශාමිකයන් විසින් ලබා දෙන ජීවිත සහතික , සහතික කිරීමේ බලය පහත සදහන් නිලධාරීන් වෙත පමණක් ලබා දේ.
 - a) විශාම වැටුප් අධානක්ෂ ජනරාල්
 - b) විදේශ දූත මණ්ඩල කාර්යාලයන්හි බලයලත් නිලධාරීන්
 - c) විශුාම වැටුප් අධාාක්ෂ
 - d) විශුාම වැටුප් සහකාර අධානේෂ
 - e) ශාඛා පුධානී (විදේශ විශාම වැටුප්)

අත්සත සහතික කරන තැනැත්තා විසින් තමන්ගේ නම, තනතුර හා කාර්යාලයීය ලිපිනය සදහන් නිල මුදාව තැබීම අතාවශා වන අතර අසම්පූර්ණ ජීවිත සහතික පුතික්ෂේප කරනු ලැබේ. එමෙන්ම ඉහත පුද්ගලයන්ගෙන් බාහිරව සහතික කරන ලද ජීවිත සහතික ද පුතික්ෂේප කරනු ලැබේ.(මෙම කරුණු උක්ත 09 හි අනුමැතිය සදහා ද ඒ අයුරින්ම බල පැවැත්වේ.)

29. ජීවිත සහතික පුතික්ෂේප වූ විශුාමිකයන්ගේ ලේඛනය අදාල වර්ෂයේ අපේල් 01 සිට අපේල් 30 දක්වා දෙපාර්තමේන්තු වෙබ අඩවිය මහින් ලඛාගත හැකිය. එසේ පුතික්ෂේපිත ජීවිත සහතික සදහා පමණක් නැවත ජීවිත සහතික ලඛාදීමට සහන කාලයක් එම වර්ෂයේම අපේල් 01 සිට අපේල් 30 දක්වා ලඛාදේ. මාර්තු 31 වන දිනට ජීවිත සහතික ලඛා නොදුන් හා අපේල් 30 වන විට අසම්පූර්ණ ජීවිත සහතික වෙනුවෙන් නිවැරදි ජීවිත සහතික ඉදිරිපත් නොකළ විශුාමිකයන්ගේ විශුාම වැටුප් ගෙවීම එම වර්ෂයේ මැයි මස සිට තාවකාලිකව නතර කිරීමට කටයුතු කරනු ලැබේ.

- 30. මැයි මස විශාම වැටුප් නතර කළ පසුව යම් විශාමිකයෙක් ජීවිත සහතික ලබා දුනහොත් ඔහුගේ විශාම වැටුප විශාම වැටුප් අධාක්ෂ ජනරාල්වරයාගේ අනුමැතිය මත ගෙවීම් කරනු ලැබේ. ජීවිත සහතික ලබා නොදීම මත අවුරන ලද විශාම වැටුප එකතු වූ විශාම වැටුපක් ලෙස ගෙවීමට කටයුතු කරනු ලැබේ. ඒ සඳහා ඉහත (19) ඡේදයෙහි පරිදි එකතු වූ විශාම වැටුප් ඉල්ලීමට කටයුතු කිරීම විශාමිකයා විසින් සිදු කළ යුතුය.
- 31. ජීවිත සහතික ලබා නොදීම මත තාවකාලිකව ගෙවීම අත්හිටුවනු ලබන තානාපති කාර්යාල/ මහ කොමසාරිස් කාර්යාල මහින් විශුාම වැටුප් ලබා ගන්නා විශාමිකයන්ගේ විශාම වැටුප් සක්‍රීය කිරීම ඉහත (11) ඡේදයෙහි දැක්වෙන ආකාරයට බැංකු ගිණුම් විවෘත කිරීමෙන් පසු පමණක් සිදු කරනු ලබන අතර මින් ඉදිරියට විශාම වැටුප් ගෙවීම අදාළ බැංකු ගිණුම් හරහා පමණක් සිදු කරනු ලැබේ.
- 32. මුදල් හුවමාරු කිරීම ඇතුළු බැංකු කටයුතු සඳහා ජීවිත සහතික ලබා දීමට ඉහත(26) ඡේදයෙහි පරිදි ම කටයුතු කළ යුතුය.
- 33. මෙම චකුලේඛය 2018.03.31 දින සිට බලාක්මක වේ.
- 34. විශාම වැටුප් වියදම් කළමනාකරණයේ දී ඔබ දක්වන සහය ඉතා අගය කොට සලකමි.
- 35. රාජාා පරිපාලන,කළමනාකරණ සහ නීතිය හා සාමය පිළිබඳ අමාතාහාංශ ලේකම්ගේ එකහතාව මත මෙම වකුලේඛය නිකුත් කෙරේ.

ඒ.ජගත් .ඩී. ඩයස්

විශුාම වැටුප් අධායක්ෂ ජනරාල්

 පිටපත් - ජනාධිපති ලේකම්
 - කරු.දැ.ගැ.ස

 අගුාමාතා ලේකම්
 - කරු.දැ.ගැ.ස

 අමාතා මණ්ඩල ලේකම්
 - කරු.දැ.ගැ.ස

ලේකම් , රාජාා පරිපාලන,කළමනාකරණ සහ නීතිය හා

සාමය පිළිබඳ අමාතාහංශය - කරු.දැ.ගැ.ස

ලේකම් , විදේශ කටයුතු අමාතාහංශය - කරු.දැ.ගැ.ස හා අ.ක.ස

ලේකම් , මුදල් හා ජනමාධා අමාතාහංශය - කරු.දැ.ගැ.ස

ලේකම් , ස්වදේශ කටයුතු අමාතහාංශය - කරු.දැ.ගැ.ස හා අ.ක.ස

ලේකම් , ආරක්ෂක අමාතහාංශය - කරු.දැ.ගැ.ස

අධාන්ෂ ජනරාල්,භාණ්ඩාගාර මෙහෙයුම් දෙපාර්තමේන්තුව - කරු.දැ.ගැ.ස හා අ.ක.ස

විගණකාධිපති - කරු.දැ.ගැ.ස

වාණිජ බැංකු, සාමානාහාධිකාරීවරුන් / සභාපතිවරුන් - කරු.දැ.ගැ.ස හා ඔබගේ සියළුම ශාඛා දැනුවත් කරමින් අ.ක.ස



Application for Foreign Pension

2 Certified
4.5cm x 3.5cm Size
Photographs

IDENTIFICATION INFORMATION

Name in Full:	
Address (Foreign):	
Town/City	
Postal Code ,	
Country	Pension No:
Email Web site	Civil
Telephone	Widow
Skype	Forces
Sex Male Female	Local Gvt
Date of Birth	Teachers (Piriven/Private)
NIC No. (SriLanka)	
Passport No.	Expiry Date
PERMANENT RESIDENT IN	FORMATION
Permanent Resident Card No. (If you have)	
Foreign Passport No.	
The Date of Migrated	
Whether you have dual citizenship Yes	No
Type of the visa	
Period of abroad resident	
SPOUSE INFORMATION (Please Fill wh	ere applicable)
Is he/she alive? Yes No Date o	f Birth
Name in full	
National Identity Card No. (Sri Lanka)	
Permanent Resident Card No. (If he/she has)	
If he/she is living in another place or another country /give details : Count	try
Address	

DETAILS OF DEPENDENTS

Lo	ast Nam	е			F	First	Name	Э	Date	of Birth		Se	ex		Civ	il St	atus			E/U/	D
1																					
2																		_			
3																					
4														_				_			
5																					
contact details ame & Addres		relatio			loyed Lank		U–Un	emp	loyed D -	Disable										1	
														-		1					
Telephone									Mobile Ph	one										Τ	
Email									Skype												
INB –Maligaw Month and Yea	ar of whi	ich th	ne pe						18				*								
a Entry Form shall be	s in 4.5cr passpor of citizens ferred Ba ank – Qu ropolitan	m × 3. t (pho ship o ank ac eens Bran	.5 cm otogra or peri ccoun Brand ch,	n aph a man nt ch,	affixed	page	e, visa	prov		alteration	ns pa	ge)				Attac			ieck		
Hatton Nati		nk – M Your (1aliga	watt			m				*						- - -				
If a Widows' /	Widower	rs' & C	Orpha	ans'	pensio	on, W	idows	'/W	dowers' form												
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Pensioners resident abroad are advised to furnish this form through Sri Lanka Mission abroad. This Application form must be furnished for all pension types. Failing to send this form will be caused to temporary hold of pension.

This Application can be downloaded by www.pensions.gov.lk



Life Certificate-2018



(Valid up to: 2018/01/01 to 2018/12/31)

Name of the Pensioner	:	
Present Address (abroad)		
No	:	
110	•	
Street	:	
State	:	
Country	:	
Pension Number	:	
W&O P Number		
Bank Account Number	:	
Passport Number	:	
Issuing Date	:	D D M M Y Y Y
Country	:	
Date of Expiry	:	D D M M Y Y Y
PR/Citizenship Card Number	er:	
Sri Lankan NIC Number	:	
Date of Birth	:	D D M M Y Y Y

E-mail Address	:				
Skype Address	:				
Phone Number	:				
I confirm and declare regard	ling 1	that informatio	on is true to t	he best of my knowle	dge and belief.
	•••••	••••••			
Signature of the Pensioner					
Date: D D M M	YY	YYY			
	•••••	(Office	use only)		
The above pensioner is place	ed his	s/her signature	in my preser	nce today.	
Signature				Stamp	
		and the official s r Foreign Pensio		testing officer onsular/Ambassador)	
Date : D D M M	M	Y Y Y Y]		

 $(To\ be\ submitted\ from\ 1^{st}\ January\ 2018-31^{st}\ March\ 2018)$ (Attach Passport copy or Sri Lankan National Identity Card copy as an attachment)

Letter Of Consent

This le	tter of consent is to be submi	tted by pensioners resident abroad regarding method of
drawir	ng pensions.	
1.	1.1 Full Name	:
140	1.2 Name using for pension	i
2.	Pension No	:- Civil
		Widow Forces
3.	3.1 Resident Country &	Lcl Gvt
	Address of pensioner	<u>*</u>
	Telephone No	:
	E- Mail address	!
4.	Address in Sri Lanka (If any)	!
5.	Bank Account Number	:=
1.5	nt number at Peoples' Bank – Qu Borella Branch/ Hatton Nationa	ueens Branch/ Bank Of Ceylon – Metropolitan Branch/ Pan Asia Bank - Maligawatta branch)
Conditi	ions	
 1. 2. 3. 4. 6. 	account to heirs of a deceased. This account will be used only for accepted. Instructions of Pension Circular another account. I bound with above conditions purpose in Peoples' Bank – Que	ector General Of Pensions Il of Pensions should be obtained to release money of the
	Date	Signature of the Pensioner
Recom	mendations Of Director General	of Pensions :-
***************************************	Date	Signature and Official Stamp

IN CASE OF WIDOW/WIDOWERS PENSION

PART I

AFFIDAVIT

Mrs/M	r	
		••••••
SPERENCERCUL		
HEREBY	SOLOMNLY SINCERELY AND TRULY MAKE OATH and state as fo	llows;
1.	My maiden name as per my birth certificate.	
2.	After my marriage I use my name as.	-
2	NA. othor names	***************************************
3.	My other names	
	I confirm and declare that the statement contained in this affida knowledge and belief.	vit is true to the best of my
Sworn	at	
On this		Signature
Before	me.	

PART II WIDOWS/WIDOWERS DECLERATION

1						
· · (fi	ull name)					
(a	ddress)			31		
do solem	nnly and sincerely declare	that I was b	orn on			
			(da	ate of birth)		
that I ma	arried the late					
	(full nam	e and designati	on of husband/wife)			<i>y</i>
	on		and I rema	iined his le	egal wife / husb	and
	(Date Of Ma					alluar
Until his	/her death on			and hav	e not since leg	ally of
	(Date Of Death	n) (Place	e Of Death)			
Customa	ary married and that my d	eceased hu	sband / wife has	s left the fo	ollowingber Of Children)	
Children	,the issue of this marriag	e.				
Namos	Of Children	Sex	Date Of Birth	Age	Date Of	If Deceased
ivallies (of Children	JCX	Dute of Direct	0-	Marriage	Date Of
						Death

	If the date unknown, Pleas To be filled in only if the c			red		
	ther had any previous mar					
THE PART OF THE PARTY	larriages : nildren :					
111000000 144000	uardians :					
	(A report should be attack					
	ce this solemn declaration		ously believing t	he same to	be true.	
Date :			*			
				(Signa	ature widow/w	idower)
Witnes	ses:-					
(1)	Signature		Name a		S	
	Designation					
(2)	Signature		Name a		s	
Ø√ ₹0	Designation		***********			
	THE RESIDENCE OF THE PARTY OF T					

Transfer of Pension of Overseas Pensions To Another Account

Manager, Peoples' Bank, Queens E	Branch, Colombo, Sri Lanka /
Bank of Ceylon, Metropolitan Bran	nch, Colombo, Sri Lanka /
Pan Asia Bank, Borella Branch, Col	ombo, Sri Lanka /
Hatton National Bank, Maligawatt	a Branch, Colombo, Sri Lanka.
01. Name of account holder	
02. Pension No	;
03. Account No	1
04. Bank Branch	
05. Overseas Address	.:-
06. Telephone no	-
07. E- mail address	i=
According to the provisions made	by Pension circular 01/2018,
Kindly requested to transfer	an amount of Rs:(numbers) , rupees
	(in words) from the
special account No	
account no	BranchBank.
A duly field Life certificate is subm	itted herewith.
Date	Signature of the Pensioner



APPLICATION

PERSONAL / JOINT ACCOUNT OPENING (DOMESTIC / FOREIGN CURRENCY)

The Manager Bank of Ceylon																						Aı	utho	rize	d b	У		:							
Please open an Individual / J	oini	t A	ACC(ou	nt	as	ре	er d	eta	ils	pro	ovi	ide	d b	elo	W.						M	ana	ger'	s Si	igna	ture)		·		Da	ate		
TYPE OF ACCOUNT																																			
Current			Sa	ıivi	าตูเ	s						K	RG	i									300	C P	res	stig	e F	Plus	3		[18-	+	
FCY (Specify currency)												0	the	rs	(Sp	ec	cify) .																	
PERSONAL INFORMATION								AP	PLI	CAI	NT ·	1													A	PPI	_IC/	ANT	2						
Title	L		Mr		L	_ [Mrs	3		M	liss	; <u> </u>		Dr	. [Re	ev			Mr			Mı	'S	L	N	liss	}	L	D	r		Re	V
Name in full																																			
Any other Names (Maiden name / others)																																			
Permanent Address in Sri Lanka with Postal Code																																			
Current / Foreign Address	lf	CUI	rreni	t a	ddre	ess	is	sam	e as	s at	DOVE	e, p	oleas	se ti	ick l	nere	e [If	CUI	ren	t ac	ldre	ss is	s sa	me	as a	abov	/e,	plea	ise i	tick	here		
Occupation & type of Business																																			
Employer's Name																																			
Official Address with Postal Code																																			
Official Telephone No.																																			
Monthly Income (LKR)		T																													T		T		
NIC No. ¹		I																	T										I						
Date of Birth	D)	VI	M	Υ	Υ	Υ	′ \												D	M	M	Υ	Υ	Υ	Υ								
Passport No.1																																			
Tax Payer / Tax File No.]Y	es/			N	o /														Yes	s		No) /										
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Tel No. (Overseas)																																			
Mobile No.																																			
Fax No.																																			
E-mail Address																																			
Nationality	Sri	i L	ank	kaı	n	`	Yes	3		No) If	f no), sp	eci	fy				5	Sri	Lar	nka	ลท		Ye	s []	No	If	no,	spe	cify.			
Country of residence																																			
Mailing Address		P	ern	na	ne	nt		С	ffic	ial			Cu	rre	nt/	Fo	rei	gn		F	er	ma	ne	nt		0	ffic	ial			Cι	ırre	:nt/	For	eigı
Civil Status		s	ing	le				M	larr	iec] k		Otl	nei	•						Sing	gle				M	arri	ied			Ot	her	,		
Are you a US person under the Account Tax Compliance Act					of tl	he	US	S ² ?					Υe	es			No)		\	es/	,		1	VО										

BOC e BANKING SE	RVICES (Mandato	ry - to be completed by all applicar	nts. Select "Yes" for e-banking	g services you	wish to avail and "No" for others)
Debit Card Link BOC	Yes / No Credit Cards	Other BOC accounts to be link	ed to debit card	A/C 1 A/C 2	
Internet Banking	Yes / No	Daily fund transfer limit for in	nternet banking (LKR)		
SMS Alerts Account Transactions	Yes / No	Debit only Cred	lit only		
Account Transactions		Mobile no. to be used for SM	1S Alerts Applicant	1 Ap	pplicant 2 Both
SMS Alerts ATM Transactions	Yes / No	Mobile no. to be used for SM	IS Alerts Applicant	1 Ap	oplicant 2 Both
Mobile Banking	Yes / No	Email Statement (only for cur	rrent/NRFC accounts)	Yes / No	
NOMINATION (EXCE	EPT FOR CURREN	T ACCOUNT) (If you do not wish	h to nominate, please cancel l	by crossing out	t this section)
		1	2		3
Full Name of Nomir	nee				
Address of Nomine	е				
ID Card No. / Passp No. If available.	oort				
Payment %					
	on 14 of Bank of	ve named as my/our nominee/ Ceylon Ordinance. We are aw			count on my/our death subject to the ne of joint account holders the
Signatures:			Witness:		
Applicant1		Date:	Name & Address		
Applicant 2		Date:	Signature		
OPERATING INST	RUCTIONS				
bank governing the and understood and and conditions of th In the event if I / Account Tax Comp undertake to inform	conduct of this and acknowledge the personal / joint we become a poliance Act (FAT) the said fact to the sai	to be bound by the rules of the account which I / We have real ne receipt of a copy of the rule accounts. US person under the Foreign CA) of US, I / We do herely the bank immediately	both/either of us/an In the event of the the account will be representatives of t For foreign curren	death of an payable to the deceased accounts	
For joint accounts		and but	Control Regulations		the Bank governing the conduct of
		ned by* act on instruction given b			
Applicant 1 Signature			Applicant 2 Signature		
Date:			Date:		
INTRODUCTION (FOR CURRENT	ACCOUNTS / CHEQUE DEP	POSIT SAVING ACCOUN	TS ONLY)	
	ear overleaf and h	is/her/their signature/s was/were a			e/they is/are suitable person/s to open and
A/C No.:			Signature:		
Tele No.:			Name & De	signation:	
For Office Use			Address:		
Verified by:					
Signature of the Office	r:		Date:		

CENTRAL BANK OF SRI LANKA - Declaration by the Applicant/s for Electronic Fund Transfer Cards

To: The Controller of Exchange

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

I/We(applicant /applicant1),(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 Exchange Control act in the Notice Published in the Extraordinary Gazette No: 1411/5 of 19th September 2005 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 Exchange Control Act.

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.

I/We am/are aware that the Authorised Dealer 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.

The Bank undertakes to exercise due diligence on the transactions carried out by the cardholder/s on his/her/their 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 given by the Cardholder/s and to bring the matter to the notice of the controller of exchange.

Date (DD/MM/YY) Signature of the Authorised Officer on behalf of the Bank

TERMS AND CONDITIONS

DEBIT CARD

- The BOC Debit Card shall at all times remain the property of Bank of Ceylon and shall be returned to the Bank unconditionally and immediately upon the Bank's request.
- BOC Debit Card is for my/our own personal use only. It is not transferable. It shall not be used for any purpose other than for transactions designated by the Bank.
- 3. I/We shall keep my/our personal Identification Number/s (PIN) strictly confidential and undertake not to reveal such number/s to any person at any time or under any circumstances. In respect of "BOC_Debit Card PIN" shall mean the original Personal Identification Number confidentially generated for me/us by the Bank and any substitution effected by me/us.
- I/We shall accept full responsibility for all transactions processed or effected by the use of the BOC Debit Card/s howsoever effected.
- I/We hereby authorize the bank to debit my/our account with the amount of any withdrawal/transfer payment made by the use of the BOC Debit Card/s.
- 6. I/We further authorize the bank to debit my/our account with all charges relating to transactions made internationally through BOC Debit Card/s or through any other Local Networks including the Bank's network, wherever applicable and also with any other liabilities inclusive of legal fee or other statutory charges if any, relating to the use of BOC Debit Card/s.
- If the account is a joint account, I/we shall be jointly and severally liable for all transactions arising from the use of the BOC Debit Card/s.
- 8. I/We shall accept the Bank's records and statements of all transactions processed by the BOC

Debit Card/s as conclusive and binding on me /us for all purposes.

- If the BOC Debit Card/s obtained by me/us is/are stolen or lost I/we shall notify the Bank immediately and I/we shall also give a written confirmation to the Bank. I/we shall not hold the Bank liable for any loss incurred by the use of the BOC Debit Card/s which is/are lost, stolen or used without my/our authority.
- 10. The use of the BOC Debit Card shall be subject to the Bank's prevailing rules, regulations and any terms and conditions governing all services, facilities and transactions covered by the BOC Debit Card or otherwise.
- 11. The Bank shall have the full discretion to cancel, withdraw or renew the BOC Debit Card without any prior notice or any reasons given to me/us. In the event that I/We decide to terminate the use of the BOC Debit Card, I/We shall give the Bank not less than 7 days prior notice in writing and forthwith return the BOC Debit Card and obtain a valid receipt thereof.
- 12. All replacements and renewals of the BOC Debit Card shall be subject to the terms and conditions which are in force.
- 13. The Bank will not be responsible for the card not being honoured for any reason what so ever.

I/we agree not to use the BOC Debit Card/s Overseas to purchase goods in commercial quantities and for transfer of capital out of Sri Lanka. I/We agree to be liable for all charges arising from the card/s issued to me/us and indemnify the Bank from any losses if incurred.

SMS ALERTS

- The Bank is not liable or responsible or accountable in any way whatsoever for any loss or damage howsoever arising out of any malfunction or failure of this alert service,
- 2. The Bank is not liable for any failure to perform its obligations under this arrangement due to the failure of any machine, computer system, or transmission link or delay in data processing or due to any industrial dispute or to anything beyond control of the Bank, and its employees and on any other failure or any fault of the mobile phone,
- The use of SMS Alert facility shall be subject to the Bank's prevailing laws, rules and regulations and/or any terms and conditions governing such services and/or facilities and/or transactions,
- 4. SMS alert deemed to be received by me/us when the Bank sends the SMS,
- The Bank shall have the full discretion to cancel, withdraw or discontinue the SMS Alert facility without any prior notice or any reasons given to me.
- 6. The Bank may terminate the service, for any reason including limitation inactivity, violation of
- terms & conditions of services or other policies that the Bank may establish from time to time. Upon termination of the services, I/We shall remain liable for all payment transactions I/we have incurred. Upon termination the bank has the right to prohibit the my/our access to the service,
- The Bank shall not be responsible for any loss or damage incurred by me/us as a result of using
 this facility and the bank is indemnified by me /us against all actions, liabilities, suits, claims,
 losses, damages, costs and expenses,
- 8. The Bank has the right to determine the information furnished through SMS alerts.
- I/We agree to assure the secrecy of all information furnished to me/us and further agree that the bank is not responsible for any matter arising over this information received, read or seen by any third party through the mobile phone.
- 10. If the mobile phone is stolen/lost/transferred or the number is changed, I/we agree to notify the bank immediately and the facility to that Mobile would be terminated thereafter.

INTERNET BANKING

1. TRANSACTIONS VIA BOC INTERNET BANKING FACILITY

- 1.1 I/We give my/our authority to accept and to act upon any instructions or messages received by the Bank through BOC Internet Banking Facility which comes from me/us and are authenticated in the way (if any) described in the User Documentation and accompanies by the Password's issued to me/us. Password shall mean the original Passwords confidentially generated by the Bank and/or subsequent passwords generated and issued to me/us by the Bank.
- 1.2 I/We agree to perform BOC Internet Banking Facility operations through the official web site www.boc.lk and use of specific menu options available therein .
- 1.3 I/We do provide data, information, instructions and messages at my/our own risk. I/We will ensure that all data transmitted to the Bank for or in connection with BOC Internet Banking Facility is correct and complete. I/We will let the Bank know immediately about any errors, discrepancies or omissions.
- 1.4 I/We shall accept full responsibility for all transactions processed or effected by the use of BOC Internet Banking Facility howsoever effected and the I/we further agree that the Bank is not responsible in any manner for the transactions processed or effected by me/us by the use of BOC Internet Banking Facility
- 1.5 I/We do hereby authorize the Bank to debit my/our account/s (existing at the time of this application or opened by me subsequently) with the amount of any transaction made by the use of the BOC Internet Banking Facility with or without the knowledge or any further authority by me/us.
- 1.6 I/We agree that at no time will I/we attempt to effect transactions executed through BOC Internet Banking Facility unless sufficient funds are available in my/our account/s. I/We agree that transactions scheduled for future date will be executed by the Bank only if sufficient funds are available in the account/s on the relevant date/s and further agree that the Bank is under no obligation to honour payment instructions unless there are sufficient funds in the designated account/s at the time of receiving the payment instructions and /or at the time such payments fall due.
- 1.7 I/We agree that some requests/instructions given by me/us are subject to authorization by officer/s of the Bank, and therefore may not be immediately and automatically effected. I/We further agree that the Bank reserves the right to allow or disable such requests at its discretion without notice to me/us.
- 1.8 I/We agree that when the Bank makes a payment on behalf of me/us the Bank is not acting as my/our agent or agent of the Biller to whom that payment is directed.

- 1.9 I/We agree and authorize the Bank, at its discretion to record by whatever means the transactions which are effected via BOC Internet Banking Facility by me/us and that such records may be used by the Bank for the purpose of, amongst other things, establishing or verifying that a particular transaction was effected through the use of authorized User ID and Passwords.
- 1.10 I/We shall accept that Bank's records and statements of all transactions processed by the use of the BOC Internet Banking Facility as conclusive and binding on me/us for all purposes.

2. RESPONSIBILITIES FOR SECURITY

- 2.1 I/We am/are aware that it is my/our responsibility to obtain and maintain any equipment, which may be necessary for using BOC Internet Banking Facility, in proper working condition and with adequate safeguards against malicious threats to such equipment or to BOC Internet Banking Facility
- 2.2 I/We undertake to access BOC Internet Banking Facility only through the link provided in Bank's official website www.boc.lk and not to access same using any other link.
- 2.3 I/We undertake not to access BOC Internet Banking Facility using defective or insecure equipment, or by any manner, which might adversely affect BOC Internet Banking Facility.
- 2.4 I/We do hereby agree to the change, from time to time the Password/s assigned to me/us.
- 2.5 I/We will set up and maintain adequate measures to safeguard the BOC Internet Banking Facility (including all information and data relating to payment beneficiaries) from disclosure to, and from access or use by, anyone who is not authorized to do so.
- 2.6 I/We shall inform the Bank immediately if I/we am/are aware of any unauthorized use of the User ID and Passwords by anyone.

. CONFIDENTIALITY OF BOC INTERNET BANKING FACILITY SERVICE INFORMATION

- 3.1 I/We shall keep my/our User ID and Password/s thereof strictly confidential and undertake not to reveal such numbers to any person at any time or under any circumstances.
- 3.2 I/We shall keep all information, techniques, data and designs relating to BOC Internet Banking Facility completely confidential. I/We shall not disclose any of them to any other party.
- 3.3 My/Our obligations in connection with confidentiality will continue indefinitely and will not end with the expiry or termination of the facility.

INTERNET BANKING

4. CHARGES AND PAYMENTS

4.1 I/We do hereby authorize the Bank to debit my/our account/s with all charges relating to transactions made through BOC Internet Banking Facility including joining fees, annual fees and also with any other liabilities inclusive of legal fees or other statutory charges, if any, relating to the use of BOC Internet Banking Facility.

5. LIABILITIES FOR LOSS, DELAY, ETC.

- 5.1 I/We shall not hold the Bank liable for any loss incurred by the use of User ID and password/s issued to me/us or any substitutes thereon used without my/our authority.
- 5.2 The Bank shall not be responsible for any loss or damage nor for any loss of profits, loss of contracts, financial losses and loss of data or loss of goodwill incurred or suffered by me/us as a result of non acceptance of and/or non adherence to instructions given on BOC Internet Banking Facility for any reason whatsoever.
- 5.3 I/We agree that in case of payments made for goods or services offered by third parties, the Bank cannot and does not take responsibility or liability on the quality, on time delivery or the availability of such goods or services such offered.

6. OPERATION OF BOC INTERNET BANKING FACILITY

- 6.1 I/We do hereby authorize the Bank to debit any of my/our account/s with the amount of any transaction performed by me/us.
- 6.2 I/We agree to pay any charges/payments due to the Bank on transactions/functions performed by me/us by using BOC Internet Banking Facility.
- 6.3 The Bank shall attach or detach any accounts opened in my/our name/s, subsequent to this application. I/We agree and acknowledge that such attachment or detachment can be due to prevailing rules and regulations of the Bank.
- 6.4 The Bank shall, from time to time introduce new facilities/options into BOC Internet Banking Facility. I/We do hereby agree to abide by the terms and conditions applicable to such newly

- added services, facilities/options though added subsequently to the activation of the User IDs whether or not, I/we have expressly registered to avail such services.
- 6.5 In case if the Bank requires to me/us to register for a specific service provided by BOC Internet Banking Facility, I/We undertake to adhere to such request for registration to avail such service. I/We agree that any such subsequent registration becomes an integral part of the terms and conditions specified herein.

7. CANCELLATION

7.1 The Bank shall have the full discretion to cancel or withdraw the BOC Internet Banking Facility without any prior notice or any reasons given to me/us. In the event that I/we decide to terminate the use of BOC Internet Banking Facility, I/we shall give the Bank not less than seven days prior notice in writing and forthwith return any document relating to BOC Internet Banking Facility which are given to me/us by the Bank and obtain a valid receipt thereof.

8. PROPRIETARY AND OTHER RIGHTS

8.1 I/We agree that the BOC Internet Banking Facility will remain the property of the Bank at all times and I/we will not copy the BOC Internet Banking Facility or any of the information, technique data or designs relating to them.

9. INDEMNITY

I/We do hereby agree and irrevocably hold the Bank indemnified and save harmless against any losses, charges, suit, claims, expenses and damages that the Bank shall or may be caused sustained, incurred or suffered by reasons of using BOC Internet Banking Facility by me/us in any manner whatsoever and for any loss and/or misdirection of data in transit electronically and by reasons of the Bank generating and/or issuing and /or dispatching the original password/s according to my/our request and/or subsequent passwords to my/our User ID at any written request and /or any substitution effected by me/us.

MOBILE BANKING

1. REGISTRATION FOR THE SERVICE

Valid mobile number/s provided by me/us in the application will be mapped by the Bank against my/our account as a payment instrument to make payment transactions and pay fees and other obligations arising from the use of the service by me/us. I/We hereby undertake to provide current, complete and accurate information and maintain it as current and accurate. The Bank may require me/us to provide additional information as a condition of continued use of the service. It is the sole responsibility of me/ours to ensure the accuracy of the mobile number/s provided to the bank. The Bank bears no responsibility or liability whatsoever in case the mobile number/s mentioned by me/us on the form is inaccurate or does/do not belong to me/us.

2. USER NAME & PASSWORD INFORMATION

I/We agree that it is my/our responsibility to maintain the confidentiality of the PIN number issued to me/us. I/we agree to notify the Bank immediately of any unauthorized use of the PIN or any other breach of security and further agree not to store/ save the PIN in the mobile phone and in addition, I/we agree to add a "Dynamic Alpha Code" to each and every transaction for added safety.

B. PERMISSIBLE PAYMENT TRANSACTIONS

I/we agree to use the service only to process a payment transaction to purchase a product, service or financial service from a merchant through a legitimate bona-fide sale of the product service or financial service. I/We agree not to purchase illegal items using this payment transaction. Failure to comply with these limitations may result in suspension or termination of the service.

4. PAYMENT TRANSACTION PROCESSING

The Bank will store information obtained from me/us and I/we authorize the Bank to charge or debit my/our account to complete the processing of payment.

5. LIMITATION ON THE USE OF SERVICE

The Bank reserves the rights to change, suspend or discontinue any aspect of the service at anytime. The Bank reserves the rights to impose certain limits on service features without notice and liability.

6. REFUNDS

I/We agree that the Bank is only a facilitator in making payments to the merchants. And the Bank cannot and does not take any responsibility or liability for any refunds related to non-delivery of items, which should be taken up with the merchant concerned..

7 DISCLAIMER OF WARRANTIES

Applicant 2

Signature

Date:

Yes / No

Yes / No

The Bank makes no representation or warranty of any kind whatsoever for the service or content and functions made accessible by the software used on or assessed through the service. The Bank shall not be responsible for any service interruption including system failures or other interruption that may affect the process of transactions or the service.

GENERAL TERMS AND CONDITIONS

- The Bank shall be at liberty to change/modify the service charges and any other charges at its sole discretion and shall debit the account nominated by me/us or any of my/our account/s held at any branch of the Bank.
- The Bank shall at any time be entitled to amend, supplement or vary any of these terms and conditions at its absolute discretion with notice to me/us and such amendments, supplements or variations shall be binding on me/us.
- The Bank shall determine the privileges attached to the use of the aforesaid facilities and shall have absolute discretion to change, vary add or amend these privileges and conditions attached thereto, from time to time, as the Bank deems fit.
- 4. To the fullest extent permissible by the Law, in no event shall the Bank be responsible or liable to me/us or any third party under any circumstances of direct or indirect losses/ damages. The Bank shall not have any liability for any failure or delay resulting from any conditions beyond its reasonable control
- The Bank may terminate the aforesaid service/s, for any reason including limitation inactivity, violation of terms & conditions of services or other policies that the Bank may establish from
- time to time. Upon termination of the services, I/we shall remain liable for all payment transactions I/we have incurred. Upon termination the Bank has the right to prohibit my/our access to the service/s.
- The Bank may communicate with me/us regarding the service/s by means of electronic communications. Electronic communication can be deemed to be received by me/us when the Bank sends the electronic communication through the mode, that I/we have provided to the Bank. (email, SMS)
- 7. I/We shall accept full responsibility for all transactions processed or effected by the use aforesaid Facilities and shall release the Bank and its employees from all claims, demands & damages arising out of or in any way connected with dispute(s).
- Any controversy arising under or relating to the terms and conditions hereof shall construed in accordance with the Laws of Sri Lanka and Courts in Sri Lanka shall have excusive jurisdiction to settle the disputes.

Internet banking (Login and PIN)

Internet banking

DECLARATION BY CUSTOMER

Applicant 1

I have received

Applicant Signature Passbook

I have seen the demonstration of

Yes / No

Signature

Date:

I / We confirm having read and understood the Terms & Conditions applicable for the above facilities, and agree to comply with and be bound by them.

DECLARATION	I BY JOINT ACCOUNT HOLDER (S)		
I / We have no o	bjections in giving Debit card / Internet banking facilities to Mr./ Ms		
Joint Holder	Name	NIC	Signature
1			
2			
3			
ACKNOWLEDG	REMENT		

Debit Card and PIN

Debit card

Yes / No

Yes / No

ගිණුම් විවෘත කිරීමේ අයදුම්පත ඉතිරිකිරීමේ ගිණුම් - ඒක පුද්ගල හා බද්ධ சேமிப்புக் கணக்கு – தனி நபர் மற்றும் கூட்டு கணக்கை ஆரம்பிப்பதற்கான படிவம் Savings Accounts - Individual & Joint THE PULSE OF THE PEOPLE ACCOUNT OPENING FORM இரு வை விருவர்க்கு விருவர்கள் வி දිනය திகதி Account Date කළමනාකරු/முகாமையாளர்/The Manager CIF Number මහජන බැංකුව/மக்கள் வங்கி/People's Bank 2. ඉතිරිකිරීමේ ගිණුමක් මගේ/අපගේ නමින්/නම්වලින් විවෘත කරන්න தயவு செய்து எனது/எமது பெயரில்/பெயர்களில் சேமிப்புக் கணக்கொன்றை ஆரம்பிக்கவும் 3. Manager's Intl. Please open a SAVINGS account in my/our name/s. ධනයෝජන ඉතුරුම්/முதலீட்டுச் சேமிப்பு ඒකපුද්ගල/தனி நபர் **පාස්පොත**/வைப்புப் புத்தகம் සාමානප/சாதாரண/Normal සිසු උදාන/අිය உதான/Sisu Udana Investment savings Individual Pass Book සාමා. බාලවයස්/சாதா. பாராயமடையாத ජනජය/ඉன ඉய/Janajaya Yes இனு / Yes கணக்கு / Yes Acc. Normal Minor ගිනුම් පුකාශන/விபரக் கூற்று മഭ്മ/കുட്ദു/Joint වනිතා වාසනා/ඛණිණ வாசனா ඉසුරු උදාන/இசுரு உதான **වෙනත්**/කාறු/Other Statement Vanitha Vasana Isuru Udana (නිශ්චිතව දක්වන්න/குறித்துரைக்க/Specify)) / முதல் எழுத்துக்களுடன் பெயர் (திரு/திருமதி/செல்வி/...... (1) මුලකුරු සමඟ නම (මහතා/මහත්මිය/මෙනවිය/..) / Name with Initials (Mr/Mrs./Miss/.... මුලකුරු වලින් හැඳින්වෙන නම්/முதல் எழுத்துக்களால் குறிக்கப்படும் பெயர்கள்/Names Denoted by Initials **හැඳුනුම්පතේ වර්ගය** /அடையாள அட்டையின் வகை/ID Type හැඳුනුම්පත් අංකය/அடையாள அட்டை இல. $/{ m ID}$ ${ m No}$. දුර.ක. අංකය/ලිනෑ. ඩෙම් இல./Tel. No. උපන් දිනය/ඛලුල්ල ඉියුම්/Date of Birth ස්ටීර ලිපිනය/நிரந்தர முகவரி/Permanent Address රැකියාව හෝ වෘත්තිය මලික තැන්පතුව ஆரம்ப வைப்பு (ரூ) Initial Deposit (Rs.) தொழில் அல்லது பதவி Occupation or Profession බාලවයස් ගිණුමක් හා ධනයෝජන ඉතුරුම් ගිණුමක් සඳහා පසුපිට බලන්න/பாராயமடையாதவர் கணக்கு, முதலீட்டுச் சேமிப்புக் கணக்கு விபரங்களை தயவுசெய்து மறுபக்கத்தில் பார்க்கவும் For Minor Account and Investment Savings Account please see overleaf **බද්ධ තිණුම්කරු පිළිබඳ විස්තර**/கூட்டுக் கணக்கு வைத்திருப்பவரின் விபரங்கள்/Joint Account Holder's Details (2) මුලකුරු සමඟ නම (මහතා/මහත්මිය/මෙනවිය/...) / முதல் எழுத்துக்களுடன் பெயர் (திரு/திருமதி/செல்வி/. (3) මුලකුරු සමඟ නම (මහතා/මහත්මිය/මෙනවිය/... ...) / முதல் எழுத்துக்களுடன் பெயர் (திரு/திருமதி/செல்வி/. Name with Initials (Mr/Mrs./Miss/. Name with Initials (Mr/Mrs./Miss/... මුලකුරු වලින් හැඳින්වෙන නම්/ගුතුන් எழுத்துக்களால் குறிக்கப்படும் பெயர்கள்/Names Denoted by Initials මුලකුරු වලින් හැඳින්වෙන නම්/முதல் எழுத்துக்களால் குறிக்கப்படும் பெயர்கள்/Names Denoted by Initials හැඳුනුම්පතේ වර්ගය හැඳුනුම්පතේ වර්ගය யாள அட்டையின் வகை _யாள அட்டையின் வகை ID Type ID Type උපන් දිනය/பிறந்த திகதி/Date of Birth උපන් දිනය/ඛාඛ්‍ය කියකි/Date of Birth හැඳුනුම්පත් අංකය/அடையாள அட்டை இல. $/{ m ID}$ ${ m No.}$ හැඳුනුම්පත් අංකය/அடையாள அட்டை இல. /ID No. ස්ටීර ලිපිනය/நிரந்தர முகவரி/Permanent Address ස්ටීර ලිපිනය/βημ்ρη முகவரி/Permanent Address රැකියාව හෝ වෘත්තිය රැකියාව හෝ වෘත්තිය நொழில் அல்லது பதவி Occupation or Profession தொழில் அல்லது பதவி Occupation or Profession මෙම ගිණුම පවත්වාගෙන යාම සම්බන්ධයෙන් බැංකු ගොඩනැගිල්ලේ පුදර්ශණය කර ඇති සත/තෝ පාස්පොතේ දක්වා ඇති වඅවස්ථා හා රෙගුලාසි මම/අපි කියවා තේරුම්ගත් බව මෙයින් සහතික කරන අතර, එම කොන්දේසි පිළිගැනීමට මම/අපි වකඟ වෙමි/වෙමු. எந்தவொரு பணத்தொகையும் * மீளப் பெறப்படலாம் என்பதுடன், எம்மில் எவரேனும் ஒருவர் இறப்பின், இறந்தவரின் பிரதிநிதிகளுக்கு அறிவிக்காமல் எம்மில் உயிர் வாழும் ஒருவருக்கு/பலருக்கு கணக்கின் வரவு நிலுவை செலுத்தப்படலாம். ு சேமிப்புக் கணக்கு தொடர்பான விதிகளையும், நிபந்தனைகளையும் நான்/நாம் வாசித்துப் பு∩ீந்து கொண்டதாகவும், கணக்கை ஆரம்பித்தல் மற்றும் நடைமுறைப்படுத்தல் தொடர்பான மக்கள் வங்கியின் நிபந்தனைகளுக்குக் கட்டுப்படுவதற்கு, நான்/நாம் இணங்குகின்றேன்/இணங்குகின்றோம் என்பதையும் இத்தால் அறிவிக்கின்றேன்/அறிவிக்கின்றோம். Withdrawals will be made by * In the event of the death of any one of us the balance in the account will be payable to the survivor/s of us, without reference to the representatives of the deceased one. I/We hereby certify that I/We have read & understood the Rules & Regulations of the Bank for the conduct of such Accounts displayed in the Bank Premises and / or included in the pass book agree to abide by them. * ஊடுமுடுவை உருமு உருக்குவிரும் உருக்குவிகள் இருவின் இருவரில் ஒருவாரல்" என இரும்பட்ட முறையில் என்னால்"/"எங்கள் இருவினால்"/"எங்கள் இருவின் ஒருவாரல்" என குறிப்பிட்டுக் கொள்ளவும்/Insert "Me personally"/"Both of us"/"Either of us"/"All of us" as appropriately

2. අත්සන/கையொப்பம்/Signature

3. අත්සන/கையொப்பம்/Signature

1. අත්සන/கையொப்பம்/Signature

තාරකරු පිළිබඳ විස්	ඉර (මාල	වයන්තා	ර ගිණු	<u>ම</u> කළුනා).	/பாதுக	ாவலர்	பற்றி	ய விபாங்) கள்	(пили	மடை	பாகவர்	5 600	க்குக	ளக்க)/De	tails	of (Guar	dian	(fo	r Mi	nor	Acco	unts	;)
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පාසැලේ නම (ශිෂපයන් ස) දිනා පමන) / LITL_#TESS	NUM GUUT	மாணவாகள	ளுககு ம	<u>-сую)/</u>	Name	e or send) 100 (F	or su	laent	Only)						ω/ «μ 	<u>њ</u> ш/	Teal	1		ලබන	ეთ/ _ტ ე	ш/ G.	raue
ඉහත සඳහන් නමින් බා ඔහුගේ/ඇයගේ අනනුපතා	ල වයස් (සි වය තහවුර	සිසු උදාන ෑ කොට	ා, ඉසුරු ගන සැති	උදාන, සා§ මට පත්වීේ	මානප, මන් අද	ධනයෙ ඉතුරුදි	භ්ජන) ව ගෙවි	ගිණුමක් වීම් කරන්	විවෲ න. ය	ත කර ම් හෙර	න්න. 3කින්	ගිණුම් ගිණුම්(නිමිය බිමියා)ගේ වැඩිහි	වයස 3ටි ඇ	සම්පූ වස්ථාව	ුර්ණවී වට එ(මෙන් පුඹීම:	අනෑ) පෙ	තුරුව ර/පස	ඔහු මිය	ගේ/අ ගිය ෙ	ැයලෙ නොත්	් ඉල් ගිණු	ලිම ජ මි ගෙ	පරිදි ඛ්ෂය
ගිණුම් හිමියාගේ නිතපානුව	තුල උරුමක්	කරුවන් ම	වෙත ගෙවි	ීමට කටයුෑ	තු කරන	ා්න.						_					(J		-,						
මහජන බැංකුවේ බාලවය																ຄ. ຕ. ຄ.ເຄ	i roui	െ		om i o	o r . o o	ഖർസി	r i'u o		III OO I	÷
கோரிக்கை விடுக்கப்படும்பே	ாது, அவரின்	ர் ஆளடை	_யாளம் கு	றித்து நீர் \$	<mark>நிருப்</mark> திய	டைந்	த பின்ல	ள் அவரு	க்கு ம	பணத்ெ	தாகை	செலுத்														
இறக்கும் பட்சத்தில், கணக் மக்கள் வங்கியின் பராயமடை		-			_			_					ம் நான்	இண	ாங்குகி	ன் றேன்	i.									
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request on his/her atta majority the balance in											nt ho	lder. I	in the	even	t of t	he Ao	ccoun	it Ho	lder'	s dei	nise	prior	to/a	ifter a	ittain	ung
I agree to comply and b	e bound b	y the op	erating r	ules & reg	ulatio	ns of	the Pe	ople's B	ank N	Minor	's Acc	count.														
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ධනයෝජන ඉතුරුම් ගි						II elili	jūsai/	Details	of I	nvest	meni	t Savi	ngs .	Acco	unt											
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வைப்புக் காலம் Deposit Frequency	மாதாந்தம் Monthly		காலாக Quai	ண்டு rterly		வேற Oth				த்துரைக் cify)	5		டையாத nor A			எனில்										
1 1	,		1			<u> </u>																		_	_	_
ඉහත සඳහන් කරුණුවල	ට අනුකුලව	මාගේ/අ	පගේ නමි	න් ධනයෝහ	ජන ඉපි	ාරි කි	රීමේ ර	ගිණුමක් දි	වීවෘත	කරන්	න. *				විසින්	මුදල	ූ ආප	සු ලබ	බාගන්	නවා	ඇත.					
තති ගිණුමක් නම්, මා මියගියවිටදී මා විසින්	සිවිල් නඩ	විධිවිධාන	ക്കുടുള	් 544 වැ <i>ති</i>	බී වැගුන්	කියට	ମନ୍ଧନ	නාමිකයෙ	ഷം ക	ත්කර (පැත්න	ඹි ගිර	ଅବସ୍ଥିତ ଓ	ശ്അന	@മ്പറ്) <i>[8</i> 7.09	ට කිමි	බවන -	ലുമ	ക്രങ്	മ്പരി	කයක	ലത്മ	മെ	ඛමැති	ർമ്മ
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බද්ධ ගිණුමක් නම්, අප සියළුදෙනා හෝ අප	අතරින් කෙ	ඉතක ඉහ	ത് തുടര് ര	ාබා ගන්නව)) ඇත.																					
අප අතරින් එක් අයෙකු ව	මියගියවිට (විති ශේෂ	ය ජිවත්ව	න ගිනුම් සි	බිමිකරු	ට හෙ									_											
ධන යෝජන ඉතිරිකිරීමේ කිරීමටත්, මම/අපි කැමැත්				න්ධයෙන් ද	අති බැ	ංකු නි	ති රීති	වලට අ	නුකුල	වීමටෑ	ත් නිති	රිති ව	වලින් (බැදි සි	පිටිමට	ත්, ඉ	නත ත	ැන්පෑ	ත් මුද	ල මා	ස 60	කස	෩ලයඃ	ත් තුල	තැන්	ා්පත්
மேலே தரப்பட்டுள்ள விடயங்க	_	. –		பெயரில் (மு	தலீட்டுச்	சேமிப்	புக் கல	ணக்கொன்	നൊ എ	ஆரம்பிக்.	கவும்.	இக்கன	ரக்கிலி(ரு <u>ந்</u> து	*				<u>ப</u> ண	ம் மீள	ப் பெற	றப்படுப	ċ.			
தனிப்பட்ட கணக்காயின், நா	ள் மரணம <u>ை</u>	டந்தால், சி	ிவில் நடை	முறைக் கே	ாவை பி	ிரிவு 54	14 இன்	பிரகாரம்	ஒரு 🖡	_ நியமன த	ளர ் நி	பமனம்	செய்யம	ப்பட்டி(ருந்தா	ல் கண	ாக்கு நி	இலுை	வ அ6	பருக்	த உரி	த்தாகு	ம். கூ			
இருந்தால், எம் அனைவரா வைத்திருப்பவர்களுக்கு உரி		நு எமமில்	ஒருவரா	ν பணம் மீ	்ளப டு	பறபபடு	ம. எம்	மைல ஒரு	வா ம	மரணம	லடந்தா	≀ல கன	எக்கு	நலுகை	ബ ഉ_	யாவ	பரும்	கண	க்கு 6	வைத்	ыருப்ப	வருக்	க ஆ	4லலது	5.00	1ககு
முதலீட்டுச் சேமிப்புக் கணக் நான் / நாங்கள் இணங்குகிறே			ன் நடைமு	றை சட்ட ∮	பெடங்க	ளின் ப	டி நடப்	ப்பதற்கும்,	அமை	மந்தொ ரு	ழகுவத	ற்கும் (மேற்குற	ிப்பிடப்	نابند	வைப்	புத் தெ	நாகை	யை 6	0 மாத	. கால _்	த்தில் ம	வைப்	µச் செ	ய்வதர்	்கும்
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Open an Investment Sa If an individual Acco	-	ount in m	ny/our n	ame. with	ıarawı	Will t	oe ma	ae by "					,													
In case of my death, if a	nominee l										f the C	Civil P	roced	ure C	Code,	he/s	he wi	ill be	entit	led to	o the	balar	nce ir	the A	Accou	ant.
If no such nominee is a If it's a Joint Account		my legal	l heirs w	III be entiti	led to t	the ba	ilance	in the A	.ccou	ınt.																
All of us/Any one of u	s will with				1 1 1	/1 •	э.		.ca	11 · ·																
In the event of death of I/We agree to deposit a													ales fo	or the	cond	luct o	f Inve	estme	ent Sa	ving	s Ac	coun	t.			
* පෞද්ගලිකව මා/අප දෙදෙ குறிப்பிட்டுக் கொள்ளவும்/Insert	නාම/අප දෙ	දනාගෙන්	කෙනෙකු/අ	ප වශයෙන් ද	කුදුකු උද	• ලෙස්	සටහන්	කල යුතුය	5/Gun(r															வாரால்"	' என	
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ගණුදෙනුකරුගේ අත්ස	න/வாடிக்ன ner's Sign		ை யொப்ப	வ்	ගණු	ලදෙනු <u></u>	කරුගෙ	් අත්සන Custome	/வாடி	.க்கைய	ாளரின்	கையெ	ரப்பம்		•	ගණු ෙ	දනුකර	ැගේ C1	අත්ස iston	න/ഖ ner′s	ாடிக்ன Sign	கயாள ature	ரின் எ e	ை யொ	ப்பம்	
Custoi	<i>ಖಾ</i> ಂದು		ූ යෝජ	නය ස	දහා	06						த்து	க்கு	மா	த் தி	ரம்/1	Ban.						-			
නිපයුම් සංකේතය										තොරස	බුරු අ	ැතුළත්	කරන	ලද්.ෙ	<u>;)</u>											
திட்டத்தின் குறியீடு Product Code										உட்படு	த்தியவ			٠,٠,٠	` }											
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விபரக் கூற்றுக் குறியீடு Statement Code												ත ලද්	ඳ්		1											
Suite In Cour										அதிகா Auth					}											

Know Your Customer (KYC) Profile Form –(Individual) (Requirement in terms of Financial Transaction Reporting Act No.6 of 2006)



Date	:
A/C No.	• •
BRANCH No.	:
OFFICER'S S/No	:
MANAGER'S INT	L:

Section A - Basic information of the individual including	g of those with Power of Attorney
√ Tick the appropriate boxes	
Full Name of the Customer:	
Address of the Customer:	
2. Nature of business (if any):	3. Occupation/Employment/Status:
4. Position held:	5. Name of employer:
6. Citizenship:	o. Tume of employer.
☐ Sri Lankan	Nationality
☐ Sri Lankan with dual citizenship	Type of Visa
☐ Sri Lankan with foreign citizenship	Expiry date
☐ Foreign national	
7. Foreign Address (if any):	
7. Toleigh Address (if any).	
Section B – Mandatory Checks	
√ Tick the appropriate boxes	
1. Name, Date of birth and Nationality verification:	
To be supported by one of the following accepted documents for each	ch category (1& 2 below)
	cial Armed Forces Service Card
□ Passport □ Other	rs (specify)
☐ Birth Certificate for minor	
2. Address verification:	
Residential address verified and supported by one of the following a	ccented documents
□ National Identity Card □ Statement of other Bank	
☐ Tenancy Agreement ☐ Utility Bill (specify)	☐ Income Tax Receipt/Assessment Notice
☐ Passport ☐ Employment Contract	☐ Others (Specify)
☐ Driving License	
* N.B. Under item 1 & 2, a copy shou No Mobile phone bills are acco	ld be held & stamped "Original Seen"
3. Status of the Residential Address: Premises	греа
Owner (A) Lease/Rent (C)	☐ Friends/Relatives (E)
\square Parent's (B) \square Official (D)	☐ Board/Lodging (F)
Permanent Address: (In the case of C-F)	
4. Applicants' ownership of wealth	
☐ Residential property ☐ Financia	
☐ Business premises ☐ Investme ☐ Motor vehicles ☐ Others	
(if property is on rent/lease, please indicate)	
5. Source of wealth: Wealth generated from	_
☐ Business ownership ☐ Inheritano	ce
☐ Investments ☐ Other (Sp	pecify)
☐ Profession/employment	

6. Other connected Business/Professional activities		
Income Tax File No.		
7. Introduced by - Name		
- Address - NIC		
- Account No.		
(Mandatory for Current Accounts for all other accounts at the discreti	ion of the Branch Manager on a risk based	
Approach)		
Customer Signature	Date	
Name of Bank Officer Signature of Bank Officer	Date	
Ü		
8. Does the client appear in the known suspected terrorist list of any other	er alert list Yes □ No	
9. Is the client or any member of his immediate family is a Politically Ex	posed Persons (PEP) Yes □ No □	
If "YES" - Please Specify		
10. Other Details/Remarks/Notes (if any)		
` •/		

Personal .	
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Opening	
Application	

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	in BLOCK letters and ($\sqrt{\ }$) where applicable thich are not applicable)		2									,	,	
trike on eages, w	men are not applicable)		3							Date		/	/	
loaco onon an acc	count for me/us as per details provided belo	w 1 / Mo a	groo to r	arovido any	docum	ontatio	on roat	irod by	tho bank	in cons	idorati	on with	tho ac	count
	I to abide by the current rules of the bank for					ciitatic	лтец	ineu by	the bank	III COIIS	iderati	JII WICH	tile ac	count
TYPE OF ACCOU	JNT													
Individua	al		Joint (F	Please fill in	details	of join	t Appli	cant/s	in the spac	e provi	ded be	low)		
Current	Savings		Fixed D	eposits			Call De	posits			Othe	er		
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SOURCE OF FUNDS			
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Name that should appear on ch	neque book		
STATEMENTS			
I wish to get e-statement	Normal statement		
Monthly	Weekly Daily Daily	Other	
Send e-statement to (e-mail ad	ldress)		
NOMINATIONS			
If you are sole account holder of the balance (s) in your accou	operating Time/Call Deposit (s) and Saving Account (s) in case of your demise.	with Pan Asia Bank, you could nomi	inate a person (s) to be the beneficiary
Yes - Please complete	Nomination Form		
ATM CARD			
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Preferred language for ATM Transactions	Name that should appear on the A	ATM card (maximum 24	cnaracters)
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Tick the relevant services and	l enter the acc	ount number(s) fo	or which the	services ar	e requii	ed			
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* Pan Asia Bank Credit Card N	Numbers								
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பொதுவான வியாபார நடைமு அவறறை விளங்கிக் கொண்டே									ந்கு/எமக்கு வாசித்து அறிவுறித்தியதுடன் நான்/நாம் நுதி செய்கிறேன்.
Name				_		Name			

Date _

INTERNET BANKING

Date

I the undersigned hereby c Corporation PLC	onfirm that the applicant(s) of this current account i	s/are known to me and is/are suitable to operate a current account	with Pan Asia Bankin
NIC		or Employee Number	
Date	Signature		
FOR BANK USE ONLY			
CIF Number	Primary Account Holder (P)	Joint Account Holder (J)	
Identity Checked Address Verified Signature Witnessed GBC signed Copy of NIC/PP Copy of Visa Indemnity Nomination	P) (J) National Identity Card Passport Driving Licence Utility Bill Tenancy Agreement	(P) (J) Employment Contract Statement of other Banks Letter from a public authority Income tax receipt/assessment notice Other	(P) (J)
	Branch Employee Name	Number	
Input by	Number	Sales Code	

Number ___

Lead Code ____

INTRODUCTION FOR CURRENT ACCOUNT

Authorised by____

Manager /Asst. Manager (Name & Signature) ____



ACCOUNT OPENING APPLICATION FORM – INDIVIDUAL

For Bank Use Only Account No. 1 The Manager, Thet Managernal Bank PLC, 2. Hatton National Bank PLC. 3. Branch. CIF No. 1. I the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete The undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank. (Please complete the undersigned request you to open the following account /accounts in my name with your Bank.) TYPE OF ACCOUNTS General Current Account Capital Savings Privilege Account Yauwanabhimana Adhishtana cliffency, Market GREETRE-SOVINGER [**EXISTING ACCOUNT HOLDERS EXISTING ACCOUNT HOLDERS** he Name & NIC number, should be indicated.
An existing account holder should complete the information pertaining to 'Personal Details' only if there is a change in the information submitted to the Bank previously. However, the Name & NIC number should be indicated.

PERSONAL DETAILS PERSONAL DETAILS 1. Name in Full (Rev./Dr./Mr./Mrs./Miss/Ms.) 2. Nationality 4: Nationality Permanent Residence 5.3-Anyountry of Residence R (Please state the country) 6. NIC No. (Please (Date of Issue) attach copies) 3. Passport No. 8. Date of Birth (Submission of Passport Number will only apply to Non Nationals opening permitted accounts.) 9. Permanent Address (Confirmation of Address required if different from NIC) 80C6ammunitationrAdddress(IfItidffferentfroomthbeppermanentadddress) 9.1Telelephbone/Numbbers. Riteixidence Office Mobile E-Mail Fax 10. Occupation if "Business" state the nature of Business 13. Marital Status Single Married Divorced Widowed 12. Name of Employer 13. Address of Employer 16. Full Name of Spouse 13. Employer of Spouse **CHANNEL SERVICES** Internet Banking Please provide Internet Banking Facilities Preferred User Login (Min 8 characters) Visa Debit Card Please provide SMS alert facility to the mobile number stated above Please issue International Visa Debit Card with ATM & Shopping (POS) Mother's Maiden Name (Security Requirement for Visa/Debit Card) Mobile Banking Please provide Mobile Banking Facilities to the mobile number stated above Issue of Password for Internet/Mobile Banking Please send my Password to the addressstated ballowee Permanent address Communication address REQUIREMENT FOR ACCOUNT STATEMENT Please forward Account Statement as indicated. Mode of Dellpation Post (Monthly)* E-mail E-mail frequency Weekly Monthly *Current Accounts only INITIAL OF APPLICANT/S OFFICER'S INITIAL

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