APPLICATION FOR OPENING A SOLE PROPRIETORSHIP ACCOUNT

BUSINESS NAME:						
BUSINESS REGISTRATION N	O:					
DATE ISSUED:						
OFFICE ADDRESS:						
TELEPHONE (OFFICE)						
RESIDENTIAL ADDRESS OF PROPRIETOR:						
TYPE OF ACCOUNT DESIRED:						
NATURE OF BUSSINESS:						
ACCOUNTS V	VITH OTHER BANKS (INCLUDING	FIB BRANCHES)				
NAME OF BANK	ADDRESS	A/C NAME & NUMBER				
1.						
2.						
2. 3. INITIAL	□ CHEQUE Le:	□ TOTAL DEPOSIT Le:				
2. 3. INITIAL	□ CHEQUE Le:	□ TOTAL DEPOSIT Le:				
2. 3. INITIAL DEPOSIT □ CASH Le REFERENCES:	□ CHEQUE Le:					
2. INITIAL DEPOSIT □ CASH Le REFERENCES: 1. NAME:						
2. INITIAL DEPOSIT □ CASH Le REFERENCES: 1. NAME: ADDRESS:						
2. 3. INITIAL DEPOSIT □ CASH Le						
2. 3. INITIAL DEPOSIT □ CASH Le						

2. NAME:					
ADDRESS:					
TELEPHONE:					
OCCUPATION:					
BANKERS:					
ACCOUNT NO:					
I request the opening of a Proprietorship Account and confirm that the above information are true. I also agree to the terms and conditions of this application and give the Bank the rights to verify the same at it's discretion.					
NAME (S) IN FULL	SIGNATURE	DATE			
1.					
MANDATE FOR FIRM (SOLE BUSINESS)					
To: FIRST INTERNATIONAL BANK (SL) LIMITED.					
BRANCH					
l					
Being the sole proprietor of the firm of					
Which has been duly registered and under the registration of the Business Names Act hereby request and authorise you to open an account in the name of the above firm and honour the signature of					
for all purposes on behalf of the said firm whether in credit or debit as on behalf of the said firm and in consideration of you doing so I agree, convenant and declare as follows:					
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That I am the sole proprietor of the business now conducted and / or to be conducted under the said style and I do hereby acknowledge that I am and shall continue to be personally and fully responsible for all business conducted by me or anyone else duly authorised by me. To the same extent as if the said business has been operated and conducted under my own name. You are hereby authorised to debit such account whether it be in credit or overdrawn with all cheques or other orders purporting to be drawn thereon. Provided they are signed by me or my authorised attorney as indicated on your specimen signature card.

I declare myself liable on all such cheques or other orders which may drawn on the said account and agree to comply with and to be bound by the Bank's rules of the conduct of current accounts.

My attention has been drawn to the necessity of safeguarding my chequebook so that unauthorised persons are unable to gain access and to the fact that neglect of this precaution may be a ground for any consequential loss being charged to my account.

I agree that in addition to any other general lien or similar right which you as bankers may be entitled by law you may at any time and without notice to me combine or consolidate all or any of my accounts with and liabilities to you and set-off transfer any sums standing to the credit or any other credit, be it cash, cheques, valuables, deposits, securities negotiable instruments or any other assets belonging to me in or towards satisfaction of any of my liabilities to you on any other account or in any other respect whether such liabilities be actual or contingent primary or collateral and several joint. In addition I also give the Bank the right to close my account at the sole discretion of the Bank if the account is declared by the Bank as dormant, inactive or undesirable due to any reason(s) whatever subject to a prior notice of 15 days by way of mail or general notice in the Banking hall.

In addition I also give his Bank the right for s	et off in appropriation.	
I note that the Bank will accept no liability outside the Bank's premises.	whatsoever for funds handed to member	rs of staff outside banking hours or
Interest at the Bank's prevailing rate of interaccount(s) is /are in credits or in debit.	erest, all interest due shall be applied to the	ne account(s) not withstanding if the
Data of partificate	Cortificate No.	
Date of certificate	Certilicate No	
Dated this	day of	20
FULL NAME	ADDRESS	SIGNATURE

INSTRUCTIONS / SIGNING POWERS

FOR BANK USE ONLY

DOCUMENTS OBTAINED	YES	DEFE	RRED	WAIVED
Signature Cards				
Mandate				
Business Name				
Certificate of registration (Copy of Original)				
Power of Attorney				
Reference Forms				
Passport Photographs				
Others (Specify)				
Identification				
Reference Instructions:				
Other Instructions				
Other instructions				
DOCUMENTATION CHECKED BY	NA	ME	SIGNATURE	DATE
ACCOUNT OPENING APPROVED BY	NA	ME	SIGNATURE	DATE