

Preferred branch __

BUSINESS ACCOUNT OPENING FORM

Section 1: Entity type									
Sole Proprietor Company (including incorporated companies) Trust/Attorney Trust Partnership									
Informal body e.g. Clubs Societies Non-Governmental Organizations (NGOs) Other (specify)									
Section 2: Accour	nts required								
Current account	rent account Call account								
Fixed deposit	ixed deposit Savings Account Other (specify)								
Currency option: KES	USD EUR	GBP .	ZAR Other (speci	ify)					
Section 3: Applica	ant information								
Residency: Resident Registered name	Non-resident		lent - country of incorpo	ration/reg	gistration _				
Name of account/Trade nar	ne								
Physical business address									
Postal address					Pos	stal code			
Head office address/Registo	ered address (if ap	plicable)			Post	tal code			
Identity/Trust/Registration	No		Registra	ation date	(YYYY-MM	-DD)			
Income tax number		PIN nun	nber	VA	AT number				
Source of funds (e.g. donati	on, third party loan)							
Purpose of the account									
Type of business conducted	i			N	lo. of emplo	oyees/members ₋			
Business telephone number	r								
Section 4: Solutions									
Till2Bank - Buy Goods Till Alternate account on paybill (shortcode) Internet banking Mobile banking									
(a) What function(s) would you like these users to perform? (Applicable to Internet Banking)									
Entity details									
Account Number	User e-mail address	Mobile number	User identification number	View rights	Input rights	Authorizing rights	Transaction limits		

_ Date (YYYY-MM-DD) __





(b) Mobile ba	anking accounts							
Mobile Number	:							
Accounts to be	linked: 1			2	2			
	3				1			
(c) Alternate	account on Payl	oill (short code)						
Account Nu	mber		Propose	ed short c	ode	Notificati	on phone numb	er
(d) E-stateme	ents							
Details			Freque	псу				
Account	Email addre	SS	Daily	Weekly	Monthly	Quarterly	Semi-annually	Annually
Cheque book		5 leaves						
Section 5:	Declaration of	f ownership						
Name of Compa	any (hereafter referi	red to as "the entity"):						
Registered Nun	nber (or other suitat	ole identification numbe	er):					
Registered Add	ress:							
A - Organisat	ional chart <i>(For e</i>	entities with more t	han three l	ayers of o	wnership b	y corporate	entities)	
Please attach a	n organisation chart	showing the ownershi	p structure o	f the entity.	The chart m	ust show:		
		e, and a proportionate interes	st of 10% or r	more of the	customer th	rough ownersl	nip in the intermed	liate or ultimate
	l ownership Infor	mation						
companies? *nathe Company.	atural person who h	ultimate beneficial ow olds a proportionate in			_	•		_
YES NO	(please complete th	ie table below)						
	o are ultimate ben more rows where ne	eficial owners of the (cessary):	Company thi	rough owne	ership in the	intermediate	e or ultimate hold	ling companies
Full name		Residential address		te of th	Nationa	ldenti ality docur numb	nent Per	centage of nership (%)
	by confirms and dec							
		n 1 and 2 is true and co						
The Company s	shall notify Stanbic E	Bank without delay of a	ny changes t	o the inform	nation given i	in this declara	tion	



C - Signatories, Directors, Shareholders information (if different from Section 2 - beneficial owners)

Full Name	Residential Address	Residential/ cell phone/ Telephone number	Capacity/ Designation (Director/ shareholder/ partner)	Signatory of the account (Yes/No)	Nationality	Identity Document Number	Percentage of ownership/ control (%)

Section 6:

Financial statements declaration

(For entities with Annual Turnover below KES 50M, Asset base below KES 20M, and number of employees not exceeding 25. All other entities to provide audited financial statements.)

(a) Balance sheet

Assets	Amount(KES)
Company's total value (Approximate valuation amount), Property and Equipment Value, Stock, Cash in Hand + Cash at Bank and Account Receivables (Money due by third parties)	
Total Assets	
Liabilities & Equity	Amount (KES)
Liabilities	
Loans/debts owed, Account Payable - Payments due to suppliers and Taxes Payable	
Total Liabilities	
Equity	
Capital injected in company	
Total Equity	
Total Liabilities & Equity	

(b) Income statement

Revenue	Amount (KES)
Revenue from Sales and Services	
Other Income/Revenue	
Expenses	Amount (KES)
Payroll, advertising, rent, utilities, office supplies, software, etc.	
Other miscellaneous costs	
Profit	



_____ Date ___

Section 7:	Specimen signature form			
(Bank use only) Account number				
Signing Instruction	ns			
The names and de	etails of persons captured in this Section shou	ıld be the persons specified	d in Section 5B o	f this document.
Full Names		Specimen sig	nature	Affix photo of Signatory
Authority/Manda	ate e.g. category A, B, C where applicable			
Full Names		Specimen sig	nature	Affix photo of Signatory
Authority/Manda	ate e.g. category A, B, C where applicable			
Full Names		Specimen sig	nature	Affix photo of Signatory
Authority/Manda	ate e.g. category A, B, C where applicable			
Full Names		Specimen sig	nature	Affix photo of Signatory
Authority/Manda	ate e.g. category A, B, C where applicable			
Date (YYYY-MM-	DD) Chairman's/Direc	tor's signature	Director/	Company Secretary's signature

(Bank use only) Authenticated by (Initial) __



Section 7:	Specimen signature form	Specimen signature form			
(Bank use only) Account number					
Signing Instruction					
	etails of persons captured in this Section should b nder column "Signatory on the account".	e the persons specified in	Section 5B of	this document by means of a "Y" for	
Full Names		Specimen signa	ture	Affix photo of Signatory	
Authority/Mand	ate e.g. category A, B, C where applicable				
Full Names		Specimen signa	ture	Affix photo of Signatory	
Authority/Mand	ate e.g. category A, B, C where applicable				
Full Names		Specimen signa	ture	Affix photo of Signatory	
Authority/Mand	ate e.g. category A, B, C where applicable				
Full Names		Specimen signa	ture	Affix photo of Signatory	
Authority/Mand	ate e.g. category A, B, C where applicable				
Date (YYYY-MM	-DD) Chairman's/Director's	s signature	Director/	'Company Secretary's signature	
(Bank use only) A	authenticated by (Initial)			Date	





	and agree to the Consolidated Terms the document is https://shorturl.at/		ning, Electronic Banking and e-Statemen is below.			
Signature Applicant 1:			Date			
Signature Applicant 2:			Date			
Signature Applicant 3:			Date			
	Scan QR code for Terms & Conditions					
Section 8: Appr	roval (for bank use only)					
KYC/FICA requirements,	Trade references, Bank reports, Bank st	atements and Credit checks	_			
Business address and/or	rtrade name(s) verified: Y N	Premises visited: Y N	Date visited:			
Premises verification und	dertaken by	Sig	gnature			
Sector ID Number		Industry ID Number				
Verification documents r	equired in respect of the account holder					
Does this account form p	part of a group? Y N If y	es, group number				
Trade references, bank re	eports/statements/KYC/CTF/OFAC/UN	ISC				
Completed by	Personnel No	Checked by	Personnel No.			
Credit check						
Completed by	Personnel No	Checked by	Personnel No.			
Approved by	Personnel No	Released by	Personnel No.			
Authorised signatory	/					
Signature:		Signature:				
Name:		Name:				
Designation (where appli	icable):	Designation (where application)	able):			
Date (DD-MM-YYY):		Date (DD-MM-YYYY):	Date (DD-MM-YYYY):			

*Company seal (where available)

For more information or queries, contact us at:

Customer Care Centre (CCC)

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