

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) 9.1Telelejabone/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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