

# **ACCOUNT OPENING FORM - INDIVIDUAL /JOINT/MINOR**

For Official Use Only:

CIE Number					Accou	at Number			
CIF Number:				Account Number:					
	lete in BLOCK LETTER								
I/We request you to open the following according		account(s) as							
Branch: Account Title:			Date						
Category of		Individual				a:a4 🗍		Minau [	
Category of	Account	Individual				oint		Minor	
	Type of Account (KES O	nly)		Foreign Curr	ency	Prime Current			
Savings	Prime Saver	[		Currency:		USD	GBP	EURO	Others
Javings	Prime Junior	[							
	Prime Current	[		Other Accou	int Type				
	Prime Faida	[		Other Accou	пт турс				
	Prime Faida Plus	[							
Current	Prime Wananchi	[							
	Prime Flexi	[							
	Prime Yes	[							
	Prime Esteem	[							
Other Bank I									
			Account N	at Number: Bra			Branch	Granch	
Correspondence and Statements to be:									
Sent by E-Mail	Sent by Post	Colle	cted by Sig	natory					
Frequency fo	or E-mail statements:								
Daily	Weekly	Monthly		Quarterly					
Apply for Pr	ime Alerts:								
E-Mail Alerts	SMS Alerts	Both							
	 vill be sent only to Mobile								
Account Faci	-		·						
Prime Mobi Debit Card			ard 📗						
Credit Card Cheque Book (L			Book (Leave	aves) 25 50 100					
			ansactional Daily Limit(Specify) Kes.						
Others(Please Specify)				. ,	. 1 3/				
INTERNET B OTHER ACCO	ANKING (PRIMENET) UNTS I/WE WISH TO AC	SERVICES CESS ON-LIN	E: PRIMARY	′ CIF					
Account Typ		Currency			Accou	nt No.		Accoun	t Name



Mobile Number:

MOBILE BANKING (PRIMEMOB	I) ALERTS			
SMS Alerts (Kenyan Nos. Only)	Debit Credit	Both Both		
Email Alerts	Debit Credit	Both Both		
Phone Model				
Mode of Operation  Solely All Jointly  Other (Specify)	Anyone Either or Su	Survivor Former or Survivor		
I/WeAuthorized Sign (Please sign only within the	gnatory 1	of the operation of the account shall be		
Attach coloured passpo	ort size photograph	Attach coloured passport size photograph		
me:		Name:		
/ PP Number:		ID / PP Number:		
de of Operation:		Mode of Operation:		
bile Number:		Mobile Number:		
Authorized Sign only within the		Authorized Signatory 4 (Please sign only within the boundary of this box)		
Attach coloured passpo	rt size photograph	Attach coloured passport size photograph		
me:		Name:		
PP Number:		ID / PP Number:		
de of Operation:		Mode of Operation:		

Mobile Number:



### **Customer Classification:**

a) Occupation/Profession:	
b) Expected No. of Monthly Transactions:	
c) Expected Value of Monthly Transactions:	
d) Expected No. and Value of Monthly Cash Transactions:	
e) Expected Average Account Balance:	

#### Declaration

	and understood the Genera	mation I/We have provided herein and the disclosures al Terms and Conditions governing the Bank-Custome g facilities as well as the use of the Debit / Credit Card	r re	elationship in regard to the	operations of a Bank account (T&Cs), the use of the	
I/We accept to be bound by and also acknowledge that the Terms and Conditions contained therein shall constitute part of my/our obligations herein.						
	Authorized Signatory 1			Authorized Signatory 2		
	Name:			Name:		
	Signature			Signature		
Authorized Signatory 3 Au				Authorized Signatory 4		
	Name:			Name:		
	Signature			Signature		



### **FOR BANK USE ONLY**

Customer Profile		Customer Classification		
Customer/Account Name:		Parameters	Rating (1/3/5)	
Telephone/Contact:		Based on profession/sector/ occupation		
Account Number:		Based on No. of monthly transactions		
Constitution:		Based on expected monthly cash value		
Profession/Nature of Business:		Based on monthly No. of cash transactions		
Profession/Nature of Business:		Based on account balance		
Economic Sector:		OVERALL CUSTOMER RATING		
Sub-Segment:				

## CHECKLIST

#### **BRANCH MANAGER**

Sign	Date