

ACCOUNT OPENING FORM - INDIVIDUAL /JOINT/MINOR

Please complete in BLOCK LETTERS and tick appropriate box. I/We request you to open the following account(s) as per the following details: Date: **Account Title:** Category of Account: Individual Joint Minor Purpose of Account opening: Savings Transactions ___ Fixed Deposit/Investment Other Type of Account (KES) Foreign Currency: Prime Current Prime Saver GBP Others USD EURO Currency: Savings Prime Junior Other Account Type: Prime Current Prime Faida **Frequency for Free Email Statements** Daily Weekly Monthly Quarterly Daily & Monthly Prime Faida Plus Current Prime Wananchi Apply for Prime Alerts: Email Alerts SMS Alerts Both 📗 Prime Flexi SMS Alerts are applicable for: Debit Alert - KES. 50,000 > = USD. 500 Prime Yes Credit Alert - KES. 50,000 > = USD. 500 (Subject to change) Prime Esteem * Channels of Banking available - Prime Debit Card, PrimeMobi and PrimeNet Other Bank Details: *List other banks with the same account name being opened at Prime Bank. Bank Name: **Account Number:** Account Name: Branch: **Account Facilities:** Prime PrePaid Card Yes No (If yes, provide Mother's maiden name) Prime Mobi Prime Net (self registration available online) Yes No Cheque Book (Leaves) 25 100

Prime Debit Card

Others (Please Specify)

* Cheque book will be ordered once the account is funded



Account Name:	
Mode of Operation: Solely All Jointly Anyone Other (Specify)	Either or Survivor Former or Survivor
Account Holder 1 (Please sign only within the boundary of this box)	Account Holder 2 (Please sign only within the boundary of this box)
Attach coloured passport size photograph Photograph	Attach coloured passport size photograph Photograph
Weld photo	Web photo
Account Holder 3 (Please sign only within the boundary of this box)	Account Holder 4 (Please sign only within the boundary of this box)
Attach coloured passport size photograph	Attach coloured passport size photograph
Photograph, Web photo	Photograph Web photo
ame:	Name:



Signature:

		CCESS ONLINE: Primary CIF Number:						Financial transaction limits			
Account No.	Account holder name/s only:						Max Amt. pe	r Max no. of	Max Am		
								transaction:	txns per day:	per day:	
ACRUS DANKING (PRI	4EMODIN	ALEDTO	+0.1								
MOBILE BANKING (PRING) SMS Alerts (Free)	NEMORI)	ALERIS									
Email Alerts			Credit	Credit Both Credit							
Customer Classification:											
	Source 1			Source 2		Source 3		S	Source 4		
Source of Income/ Funds:											
Source of Wealth:											
Expected Account Activ	ities:										
Approximate debits / credits expected in the Account:			Debit Value/	Debit Value/ Withdrawals (KES equivalent)			redit Value/ Deposits (KES equivalent)				
Cash Transactions Monthly	Cash Transactions Monthly:										
Expected Value of Total Transactions Monthly, other than cash:											
Estimated Annual Income:					'						
Declaration											
/We confirm that the inforr understood the General Ten nternet Banking facilities as	ms and Co	onditions	governing the Ba	nk-Customer re	lationship in regard t	o the operation	s of a Ban	k account (T&C			
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Signature:



FOR BANK USE ONLY

CIF N	Number:		Account Number:					
	Customer Economic Activity Sector:							
1.	Customer Economic Sector:							
2.	Customer Economic Sub-Sector:							
*As per	*As per ISIC Economic Activity							
CHEC	CHECKLIST							
Sales	/ RM Name:							
Sales	/ RM Code:							
Account entered in System by:								
Account verified in System by:								
Signa admit	atures of Authorised Signatories tted by:							
Signa	atures Verified by:							
Introd	ducer Signature Verified by:							
Custo	omer Risk Rating input by:							
OFFICIATING/BRANCH MANAGER								
Signat	ture:		Dat	e:				