



## DETAILS OF INTRODUCER

Name of Introducer : \_\_\_\_\_ Account No. \_\_\_\_\_ Branch \_\_\_\_\_  
Introducer's ID : \_\_\_\_\_ Address \_\_\_\_\_  
Telephone/Mobile : \_\_\_\_\_ Relationship with Applicant \_\_\_\_\_  
E-mail : \_\_\_\_\_

I certify that the applicant(s) and/or signatory(ies) is/are personally known to me for the last ..... months/years and confirm that his/her/their occupation and address as stated elsewhere in this application is correct to my knowledge.

\_\_\_\_\_  
Signature of introducer  
& Seal (if applicable) with date

\_\_\_\_\_  
Introducer's signature verified by  
Name & AB Bank's Employee No.

## INITIAL DEPOSIT

Cash received BDT. : \_\_\_\_\_ (In words) \_\_\_\_\_ only.  
Received cheque No. \_\_\_\_\_ dtd. \_\_\_\_\_  
Drawn on (Bank) \_\_\_\_\_  
Debit my / our Account No. \_\_\_\_\_ with your branch for BDT \_\_\_\_\_  
(In words) \_\_\_\_\_

## STATEMENT REQUIREMENT

Account statement to be provided:  Monthly  Quarterly  Half-yearly  Yearly

Note: Any exception/errors regarding transaction or change of address should be advised to the bank within 15 days of receiving statement.

## DETAILS OF TERM DEPOSIT & INSTRUCTION

I/We hereby deposit an amount of BDT / US\$ / GBP / EURO \_\_\_\_\_ (in figure)  
\_\_\_\_\_ (in words) for a period of \_\_\_\_\_ days / months / years  
@ \_\_\_\_\_ % p.a. interest with instructions.

Source of fund : \_\_\_\_\_

Deposit in :  Cash  Cheque Cheque No. \_\_\_\_\_ Date \_\_\_\_\_ Drawn on \_\_\_\_\_  
Amount (BDT) \_\_\_\_\_ In words \_\_\_\_\_ only.

I/We authorize you to debit my/ our account no. \_\_\_\_\_ title \_\_\_\_\_ with you.

Interest payment :  Pay in cash  Credit to account No. \_\_\_\_\_

On maturity disposal :

- Reply Principal & Interest in cash  
 Credit Principal & Interest to account No. \_\_\_\_\_  
 Renewal Principal for \_\_\_\_\_ days / months / year & credit interest to account No.  
 Renewal Principal for \_\_\_\_\_ days / months / year & pay interest in cash  
 Renewal Principal & Interest for \_\_\_\_\_ days / months / year

Note : Unless prior written notice is received by the Bank will automatically renew the deposit plus accrued interest for the same period on the maturity date at the prevailing rate of Interest.

## DETAILS OF SPECIAL SCHEME / PRODUCT

Name of Scheme \_\_\_\_\_

Tenure of Scheme \_\_\_\_\_ one time Deposit/Installment amount \_\_\_\_\_ Number of Installment (annual) \_\_\_\_\_  
Payable on maturity \_\_\_\_\_ Monthly/Quarterly/Half yearly payable \_\_\_\_\_

Interest Payable \_\_\_\_\_ Interest/Amount \_\_\_\_\_

Tenure \_\_\_\_\_ Day \_\_\_\_\_ Month \_\_\_\_\_ Year. Date of Maturity \_\_\_\_\_

- In case of renewal  Renew Principal Amount & Interest  Renew only Principal Amount  
 Renew only Principal Amount & Deposit the Interest on A/C No.  
 Not applicable

## ACCOUNT OPENING INSTRUCTION

- Singly  Jointly  As per Relation

Name	Designation/Position	Specimen Signature

Authorized by the Resolution dated \_\_\_\_\_ (copy enclosed) of the Partner/Board Directors/Office bearers of M/s. \_\_\_\_\_ and/or in accordance with the partnership deed/Memorandum and Article of Association/Constitution/By-laws of the firm/company/organization. I/We undertake to notify the bank of any change in the authorized signatures and these will be supported by further resolution of the company/firm/organization.

**NOMINATION FACILITIES (THE NOMINATION FACILITY SHOULD BE ONE ONLY).  
Under section 103 of Bank-Company Act, 1991**

I/We nominate the following person to receive the balance of the account in the event of my/our death/physical incapability to sign. I/We hereby declare that the nominee shall be entitled to the deposits/credit balance in the account to the exclusion of all my/our heirs, other persons and the payment made by you to the nominee shall constitute a full discharge by you of your liability in respect of such deposits/balance. In case of change or cancellation of the nomination at any time, I/We shall give you notice for record & reference. Attested photograph of the nominee is endorsed.

Name of Nominee : \_\_\_\_\_ Age/Date of Birth \_\_\_\_\_  
Occupation \_\_\_\_\_ National ID No. \_\_\_\_\_ Any other Information \_\_\_\_\_  
Father's Name : \_\_\_\_\_  
Mother's Name : \_\_\_\_\_  
Husband's/Wife's Name : \_\_\_\_\_  
Permanent Address : \_\_\_\_\_ Relationship with Applicant \_\_\_\_\_  
National ID Number (if any) \_\_\_\_\_

Note : If a non resident is the nominee the terms of the Regulation Act. shall have to be followed.

Recent Passport size  
Photograph of  
nominee duly  
attested by the  
Account holder

\_\_\_\_\_  
Signature of nominee

If at the time of my/our death the nominee remains a minor Mr./Mrs./Ms. \_\_\_\_\_  
\_\_\_\_\_ S/o/D/o/W/o Mrs./Mr. \_\_\_\_\_ shall  
as the guardian be authorized to receive/ draw on behalf of the nominee the amount of deposit held by you in my/our account.

Name of the Guardian \_\_\_\_\_ Signature \_\_\_\_\_

Signature of Nominee and Guardian (if applicable) Attested By:

\_\_\_\_\_  
Signature of account holder

**APPLICANT'S DECLARATION**

- I/We confirm that the information given above is true and complete. I/We read and accepted the Terms & Conditions governing the account(s) which I/we am/are opening as outlined in the Account Rules and hereby agree to be bound by such Terms and Conditions.
- I/We acknowledge that I/we have read and understood the terms and conditions stated and agree to comply with these.
- I/We declare that I/we am/are fully aware of the Money Laundering Prevention ordinance, 2008 and I/we shall not do any act/transaction in contravention of the provisions of the said act. I/We also commit to provide necessary information/documents which may be required by the bank from time to time.
- I/We hereby confirm : (to open a current account please tick and fill up if appropriate)
  - That I am/we are not enjoying any credit facility from any other bank/any other branch of your bank and undertake to inform you in writing as soon as any credit facility is availed by me/us from any other bank or any other branch of your bank.
  - That I am/we are/our concern is enjoying credit facilities from other bank (s)/any other branch of your bank as are furnished below:

Branch/Bank	Account No.	Nature of Credit	Amount O/s	Validity

\_\_\_\_\_  
Signature with seal :  
Full Name  
Date:

\_\_\_\_\_  
Signature with seal :  
Full Name  
Date:

\_\_\_\_\_  
Signature with seal :  
Full Name  
Date:





AB Bank Limited

Branch

Recent  
Passport Size  
Color  
Photograph

Date 

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D/D M/M Y/Y/Y/Y

**ACCOUNT OPENING FORM : PERSONAL INFORMATION**

(After filling this form it should be attached with main part of Individual and Corporate Account Opening Form)

Account Number 

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Customer ID 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**PARTICULARS OF CUSTOMER**

Name : \_\_\_\_\_  
Relationship with the Account :  1st Applicant  2nd Applicant  3rd Applicant  Director  Partner  
 Minor  Attorney  Holder  Signatories  Others \_\_\_\_\_

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Spouse Name : \_\_\_\_\_ No. of Children \_\_\_\_\_

Nationality : \_\_\_\_\_ National ID No. \_\_\_\_\_ TIN No. (if any) \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Place of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Sex ( Please  ) :  Male  Female

Occupation (With Designation) : \_\_\_\_\_

Passport No. (if any) : \_\_\_\_\_ Validity \_\_\_\_\_ Place of Issue \_\_\_\_\_

Driving Licence No (if any) : \_\_\_\_\_ Validity \_\_\_\_\_ Place of Issue \_\_\_\_\_

Other Identification (if any) : \_\_\_\_\_

Marital Status (Please  ) :  Married  Single  Widow  Divorced/Separated

Education (Please  ) :  None  Primary  SSC/HSC  Graduate/Post Graduate

Residence Status (Please  ) :  Resident  Non-Resident

Present Address (Residence) : \_\_\_\_\_  
 Rented  Own Private House  Living Partner's House

Permanent Address : \_\_\_\_\_

Occupational Address : \_\_\_\_\_

If Business, Please mention the Nature of Business \_\_\_\_\_

Contact : Tele No. Res \_\_\_\_\_ Office \_\_\_\_\_ Mob. \_\_\_\_\_ E-mail \_\_\_\_\_

Personal Income BDT (Per month) :  Less than 15,000  15,001 - 25,000  25,001 - 40,000  
 40,001 - 70,000  70,001 - 1,20,000  More than 1,20,000

Household/Other Income (Per month) :  Less than 15,000  15,001 - 25,000  25,001 - 40,000  
 40,001 - 70,000  70,001 - 1,20,000  More than 1,20,000

Source of Income : \_\_\_\_\_

Car Ownership ( Please  ) :  Yes  No

Credit Card Information : Issuing Institution \_\_\_\_\_ Card No. \_\_\_\_\_ Expiry Date \_\_\_\_\_  
Issuing Institution \_\_\_\_\_ Card No. \_\_\_\_\_ Expiry Date \_\_\_\_\_

Existing Banking Relationship (if any)  
1. Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_  Deposit A/C  Loan A/C  Others \_\_\_\_\_  
Account No. \_\_\_\_\_ Account Title \_\_\_\_\_  
2. Name of Bank \_\_\_\_\_ Branch \_\_\_\_\_  Deposit A/C  Loan A/C  Others \_\_\_\_\_  
Account No. \_\_\_\_\_ Account Title \_\_\_\_\_

Note: Information should be provided in compliance of banking guidelines for foreign exchange transactions (if required).

**EXPECTED TRANSACTION PROFILE**

[To be filled by the Applicant/Customer(s)]

Name of Applicant/Customer(s) : \_\_\_\_\_

Account Type : CD / STD /SB/FDR/Other (Please specify) \_\_\_\_\_

Reference Account Number \_\_\_\_\_

Personal net worth (in case of individual) : BDT \_\_\_\_\_

Company net worth (In case of Company) : BDT \_\_\_\_\_

Source of Fund : \_\_\_\_\_

Type of Transaction (Deposit)	No. of Transactions (monthly)	Maximum Size (Per Transaction) (Tk lac)	Total Value monthly (Tk lac)
Cash deposits (With online)			
Transfer/Instrument Deposits			
Incoming Remittance (local)			
Incoming Remittance (foreign)			
Cash Collection			
Cheque Collection			
Foreign Currency Cheque Collection			
Receipt of Export Proceeds			
Other (specify)			
<b>Total Expected Deposit</b>			

Type of Transaction (withdrawal)	No. of Transactions (monthly)	Maximum Size (Per Transaction) (Tk lac)	Total Value monthly (Tk lac)
Cash withdrawals (including online/ATM)			
Transfer/Instrument Payment			
Outgoing Remittance (local)			
Outgoing Remittance (foreign)			
Letters of Credit			
Letters of Guarantee			
Credit Card Payment			
FC/Travellers Cheques			
Investment Transaction			
Loan facilities			
Pay roll cards			
Other (specify)			
<b>Total Expected Withdrawal</b>			

Note : Please use additional sheets if required.

I/We, the undersigned, hereby confirm that this Transaction Profile truly represents the transactions arising out of occupation or the normal course of business of my/our firm/company/organization. I/We also confirm to notify the bank and submit a fresh transaction profile, if my/our income sources increase/decrease, from time to time.

(1) First/Sole applicant

(2) Joint applicant

(3) Joint applicant

Signature			
Name & Designation			

Date : \_\_\_\_\_

