

Signia Account Number (For Official Use Only)	
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Title Mr. Mrs. Ms. Dr. Other:

Full Name

Customer Identification

Enclosed Identification Copies (any 1 of the following)	<input type="checkbox"/> National ID Card	<i>Kindly enter the identification numbers for the ID's you have supplied</i>	National ID #	
	<input type="checkbox"/> Driver's License		Driver's License #	
	<input type="checkbox"/> Passport		Passport #	

Reason for Opening the Account

Source of Funds

Amount

Contact (telephone) (h): (w): (c):

Contact (other) Fax: Email:

INTEREST PAYMENT FREQUENCY SEMI-ANNUALLY

WITHHOLDING TAX NOT TAXABLE TAXABLE

Interest on call accounts are subject to change due to market conditions.

SIGNATURE	WITNESSED
DATE	DATE

FOR OFFICIAL USE ONLY

Interest Rate (%)		Call account number	
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Effective Date (DD/MM/YR)

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TRANSACTIONING OFFICER	COMPLIANCE OFFICER
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DATE	DATE
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