

CIF No:							
Account Opening Form							
Business / Corporate Account							

(Please Complete All Details In Capital Letters)

Branch: Account Name:
Date: D D M M Y Y Y Y
1. Product Type & Currency
Corporate Current Account Business Enterprise Current Account (Bundled) Business Enterprise Pay As You Go
Business Enterprise Savings Nawiri Account Business Nawiri Account Commercial
Other (Specify)
Currency KES USD GBP EURO AED Other (Specify)
2. Purpose of Account
Inter-Company Payments Investments (Term deposits) Business Income & Expenses Facility Processing Transaction Processing
income, school fees etc) Refill(talices Processing Other (specify)
3. Business / Entity Details
Entity Type Sole Proprietorship Co-operative Partnership Trust Society Limited Company
Other (Specify) Entity Name
Nature / Description of Business Activities Do Day / City
P.O. Box Postal Code Town / City Country Physical address of the Business / Entity (Plot / Building / Road / Street / Town / Country)
Primary Mobile No Telephone No 2
Preferred Email Address (for all Bank's communication)
Registration No Date of Incorporation KRA PIN Cert. No
Expected Annual Turnover (KES)
Total Estimated Net Worth
4. Expected Transaction Details Amount Per Month (KES) Countries
Inward Funds Transfers / Deposits
Outward Funds Transfers / Withdrawals
5. Stakeholder and Signatory Information
i Director Shareholder Partner Sole Proprietor Signatory Other (Specify)
Position in the Company / Organization Job Title Occupation Share (%)
Date of Birth DD / MM / YYYY KRA PIN
Email Address Gender Male Female
Is postal address different from entity address? Yes No If yes, fill below:
P.O. Box Postal Code Town / City Country

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tionality	Reside	ent Status	Resident	Non-Resid	lent Country of	esident, sta of Residenc	re L
you citizen of any other country oth	her than Kenya?	Yes	No	If yes, indicate r	name of the cou	ıntry	_
you a United States of America Per							No
es, please complete self-certification	n (W9 / W8BEN / CR	S self-certifi		_	details in the se	ection belov	N'.
1. Country				N/TIN/SSN			
2. Country			PI	N/TIN/SSN			
Specimen Signature and Ima	age						
Signature:							
Name:	As per identifi	cation docun	nent				
ID / PP No:		Ехрі	iry:				Affix Passport sized photo
Mobile No:							
Date:	DD	/ MM / YYY	Υ				
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Director Shareholder	Partner	Sole Pro	oprietor	Signatory	Other (Spe	city)	
		tle	Occupa	tion			Share (%)
	Job Ti	tle	Occupa KRA	tion			Share (%)
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Director Shareholder	Partner Sole Proprie	etor Signatory	Other (Specify)	
Position in the Company / Organization	ob Title	Occupation		Share (%)
	MM / YYYY	KRA PIN		Share (70)
Email Address		NIVIII IIV	Gender	Male Female
Is postal address different from entity ac	ddress? Yes	No If yes, fill b		1 idie
	ostal Code		Cour	ntr./
Physical Address (Plot / Building / Estate		Town / City and / Street / Town / Country)		шу
Nationality	Resident Status	Resident Non-Res	If Non-Resident, s	
Are you citizen of any other country other]	Country of Reside name of the country	nce L
Are you a United States of America Person	,	J		No
If yes, please complete self-certification		•		
1. Country		PIN / TIN / SSN		
2. Country		PIN / TIN / SSN		
Specimen Signature and Ima	ge			
Signature:				
Name:	As per identification document	t		Affix Passport sized
ID / PP No:	Expiry:			photo
Mobile No:				
Mobile No: Date:	DD / MM / YYYY			
	DD / MM / YYYY			
	DD / MM / YYYY Partner Sole Proprie	etor Signatory	Other (Specify)	
Date:		etor Signatory Occupation	Other (Specify)	Share (%)
Date: iv. Director Shareholder Position in the Company / Organization	Partner Sole Proprie		Other (Specify)	Share (%)
Date: Shareholder Position in the Company / Organization	Partner Sole Proprie	Occupation	Other (Specify) Gender	Share (%) Male Female
Date: Shareholder Position in the Company / Organization Date of Birth DD/	Partner Sole Proprie Job Title MM / YYYY	Occupation	Gender	
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Note* Email Address and Mobile Number will be used for user creation & OTP (One time password). Setup will be done as per account mandate.	e of Birth	Mobile No	
	Note* Email Addre	ess and Mobile Number will be used for user creation & OTP (One time password). Setup will be done as per account mandate.	

Name of 2 nd Applicant As per l	Identification document
Email Address	
Date of Birth	Mobile No
Note* Email Address and Mobile Number will be used for user creation & OT	TP (One time password). Setup will be done as per account mandate.
	Identification document
Email Address	
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Note* Email Address and Mobile Number will be used for user creation & 07	i P (One time password). Setup wiii be done as per account mandate.
Name of 4 th Applicant As per l	Identification document
Email Address	
Date of Birth	Mobile No
Note* Email Address and Mobile Number will be used for user creation & 07	TP (One time password). Setup will be done as per account mandate.
You are not allowed to transfer the debit card, Internet and Mobile Banking count to a Third Party without prior written consent by the Bank. The accou	
confidential and restricted for use by the persons authorised.	

11. Sole Proprietorship Resolution for Opening Account(s) and Subscription of Products Services (Applicable for entities with single director and entities registered a Sole Proprietor)

		Date:
To,		
The Manager,		
DIB Bank Kenya Limited		
DID Dank Keriya Elimited		Dranch
		Branch
Re: Sole Proprietorship F	Resolution For Account Opening and Subscriptio	on For Banking Products and Services
I the undersigned doing bus	siness as M / s	
		re at and carrying out the principa
		n, authorise and instruct DIB Bank Kenya Limited ("Bank") as follows:
That the resolutions	on this document are a true and correct copy of the re	solutions adopted on(date)
		rm. I am doing business as a Sole Proprietor under the trading name of
3. In addition to the Sol	e Proprietor, Agents listed below, subject to any writte	en limitations, is / are authorised to exercise the powers granted as indicated below:
		ID / PP:
		ID / PP:
 The undersigned can The undersigned here Proprietorship. This resolution shall coreplacement of a resol All transactions, if an this resolution are he 	eby certifies that he / she own 100% of the Sole Proportion on the sole Proportion of the S	and in the name of the Sole Proprietorship, sign, execute and deliver documents. orietorship, is the only individual with significant responsibility for managing the Sole rescission or modification has been received by the Bank. Any revocation, modification or ory to the Bank, establishing the authority for the changes. ties by or on behalf of said Sole Proprietorship with the Bank prior to the adoption of
For and on behalf of		(Entity Name)
Name:	As per Identification document	Sign:
Date:(Stam	p / seal)	

		Date:		
To,				
The Manager,				
DIB Bank Kenya Limite	d			
		Branch		
Re: Partnership Res	olution For Account Opening Mandate and Subscripti	on For Banking Products a	and Services	
Extract of the minutes	of the Partnership and resolutions passed at a meeting hel			
	We the undersigned doing business a			
	ip firm registration number			
	and carrying out the principal busines ise and instruct DIB Bank Kenya Limited ("Bank") as follows:			
Approval be and account(s) with l (e.g. savings, cur Authority is give on behalf of the	is hereby given for the Partnership to open, maintain and / DIB Bank Kenya Limited at any time. Accordingly, We hereby rent or fixed deposit) Account and avail the in to the partners ("Authorised Partners") of the Firm set ou partners of the Firm and issue all instructions of any nature with the Bank at any time and / or all dealings with the Bar	or close a Savings Accounts, request the Bank to allow us t below to open, operate, mai e in respect of the Bank acco	to open a (e.g internet / mobile) banking Sentain and / or close the Bank accounts of the Fiunts and / or maintain, terminate any banking pr	ervices irm an roduct
	As per Identification document	·		
	As per Identification document			
	As per Identification document			
	As per Identification document			
3. The Firm is auth error or default i password confid such error, defau. 4. The Firm throug as may be contanotified by the E. 5. This Partnership constitution or radmission of any the Bank with a	on and complete such formalities as be required by the Bank torised to convey to the Bank that any transactions done to the operation of the Account on part of the authorised of ential and the Firm agrees to hold the Bank harmless for everall, unauthorised use, negligence, fraudulent transactions. In it's authorised signatories accepts the Terms and Conditioned in the application forms and / or displayed on www.dit and from time to time in connection with the Account and fraccount Mandate shall continue to be in effect until revolution and of the Partnership and shall apply notwithstanding and row partner(s). Doartners of the Firm as of the date and we undertake to not copy of any amendments made in the partnership deed / agreed below, being the partners of the Partnership hereby contacts.	brough the electronic banking ificials, unauthorised use the ery transaction executed using one applicable for the Accoupage ("Website") or an ery or Fixed Deposit(s) and produced in writing by all partners, dechange in the partners by of the Bank promptly of any of the Bank promptly of any of the Firm from time.	reof, negligence, fraud, failure to keep login lds ag the Account and shall not hold the Bank liable ont, Internet banking Services and / or Fixed Dep y other Terms and Condition as may be prescribucts and / or services offered. notwithstanding any change in the deed, agredeath, bankruptcy, retirement or otherwise and / thange in the partnership firm. We undertake to pe to time.	and / of for any posit(so bed and emention) or the provide
For and on behalf of _				
Partner:		Sign:	Date:	
Partner:		Sign:	Date:	
Partner:		Sign:	Date:	
Partner:		Sign:	Date:	
To be signed by all the	e Partners of the Firm)		(Affix Stamp / Seal)	

IJ. Cilli	ted Company Account Resolution							
Certified 7	rue Copy of the resolution passed at the meeting of the Board of direc	tors of (Company name) held at						
(Address)	on (date)	at (time)						
Members	Present:							
1. Nam	e: As per Identification document	Designation:						
2. Nam	e: As per Identification document	Designation:						
3. Nam	e: As per Identification document	Designation:						
4. Nam	e: As per Identification document	Designation:						
After disc	l to open a current Account with the DIB Bank Kenya Limited was placed ussions, the Board unanimously: D THAT							
	(COMPANY NAME)' be opened with DIB Bank							
	r the operations of the activities of the Company and that the following ne said account:	g Authorised Signatory(ies) of the Company	be and are hereby authorised to open and					
No	Name	ID / PP Number	Designation / Title e.g. MD, CEO, CFO etc					
1	As per Identification document							
2	As per Identification document							
3	As per Identification document							
4	As per Identification document							
2. RESC Com the I furth 13. RESC and docu. 5. RESC Bank by th 6. I / We bank	 Company or relating to any transactions of the Company with the Bank, provided the instructions are signed by the authorised signatory(ies) of the Company as per the account operating mandate endorsed on the account opening form. RESOLVED FURTHER THAT DIB Bank Kenya Limited be furnished with a list of the names of Shareholders, Directors, Beneficial Owners and Controllers of the Company and a copy of the Memorandum & Articles of Association or similar document and be from time to time informed by notice in writing under the hand of the Directors / Authorised Signatory of the Company of any changes which may take place therein and be entitled to act upon any such notice until the receipt of further notice under the hand of any Directors / Authorised Signatory. RESOLVED FURTHER THAT above mentioned signatory(ies) be and is / are hereby authorised, on behalf of the Company, to complete, sign, execute and deliver all forms, contracts, agreements, documents, instruments, terms and conditions and acknowledgements related to account opening on behalf of the Company. RESOLVED FURTHER THAT Authorised Signatories be and are hereby authorised from time to time to request from DIB Bank Kenya Limited any credit facilities and to provide to DIB Bank Kenya Limited any security / guarantee as required by the Bank for such facilities and to sign any and all forms, contracts, agreements, documents, instruments, terms and conditions and acknowledgements related to any credit facilities on behalf of the Company. RESOLVED FURTHER THAT the resolution be communicated to the Bank and remain in force until duly rescinded and notice thereof in writing be given to the Bank by any of the Directors of the Company." The aforesaid power entrusted to the said authorised signatories shall be valid and effective unless revoked earlier by the Board." 							
Chairman:		Sign:	Date:					
Director: _		Sign:	Date:					
Director: _		Sign:	Date:					
Director: _		Sign:	Date:					
Director: _		Sign:	Date:					
(Affix Sta	ump / Seal)							

14. Beneficial Owner Declaration

I/ We declare that the beneficial owners, i.e. individual(s) who ultimately own(s) or effectively control(s) this company or group of companies (regardless of shareholding), or on whose behalf a transaction or activity is being conducted, and the percentage of shares held by the beneficial owners of the Company are as follows:

No	Name ID / PP Nun			Name ID / PP Number Nationality and Date and place residential address birth					
1									
2									
3									
4									
Do an	y of the beneficial owner(s) and / or contro	oller(s) hold or h	eld or i	s being considered for senio	r public office pos	ition?	Yes	No	If yes:
No	Name		Public office position				Date when office was assumed a		
1									
2									
3									
4									
I / we undertake to keep the Bank informed should there be any change in ownership in the future. I declare that all information provided in this form is true, correct, complete, current and up to date. I / we undertake to indemnify DIB Bank Kenya Limited and its Officers in the event of any misstatement in this form.									
Vame	:			Sign:			Date:		
Zapac Dwne	city in which you are signing the form er', 'POA'). If signing under a power of attor	ney, please also	attach	n a certified copy of the pow	er of attorney.	'Authorised	d Signatory' or 'U	Itimate	Beneficial

Го:	demnity in Res					,											
Γhe Bra	nch Manager,										Bra	nch					
/ We																	
Email Ad	ddress																
Accou	ınt Number(s):																
			,							1.1				,			
	deration of your agre electronic mail (here																ort to be from me / us by facsimil th you as follows:
 2. 3. 	authority from me any payment which shall be binding upout I/ We agree to inder in relation to or arisin the currency in wunder or in consequence / our account or an reason of any such I/ We further agree any amount due he and as a result of a purposes of such juriobligation on my /	us and you son me / mnify yoing out which the uence of the debit. It that I were under your particular particu	withous and out and ou	ut enquike or ir shall be keep you yof yoe shall linder such juristication arounds a count of the count of th	uiry into nstruct e acce ou inde ur acts have be sing the its with nnify y dgmen occurred the d pply irr	o the juicons with the	ustification which you y me / us d against in accor ade, suff and I / v ill such p inst any der being es of exc actual pa cive of ar	on therefore shall core as conclusted and action dance with the irrevocation and the irrevoca	ore or va nply with usive evi ns, proced th such curred, a tably aut losses, in tred by y ed in a c etween to	lidity then in accordence that edings, classed in state of the paymer thorise you costs, and out as a recurrency of the date of the reto.	eof an dance at you waims, de cruction it, losse u (with dexpersult of ther the sat work for for an art work as at work for an art work for a	d agred or purp were like emand his and es, cost hout pronses we any just an that hich ar egoing	e that porting able to s, liabil I / We ts and rejudice whether that in way such g inder	you may to be make make make make make make make mak	in acci such p isses, c to pay ses ma ny othe accour der be ich ami int is co	orda aym osts osts or ri ade, s or rig ount onne	rithout any reference to or further the authenticity thereof and that ance with such email instruction ment or comply with such demands, charges, damages and expense reimburse to you, on demand an suffered or incurred by you there ght you may have) to debit to me accounts is or are overdrawn be given or made for the payment of the pay
 4. 5. 6. 	to be the joint and persons so jointly a with you any rights Any demand made post in a prepaid er principal office or, a that it may later be Saturdays, Sundays	ty is ex severa nd sev as sur by you velope s the ce return and P	ecuted I liabilit erally liaety as a I hereu addres ase ma ned und ublic H	by or one of the able shagainst against against shagainst shagainst seed to be able to b	on beha e partr all be d t any or nall be the co lace of ed) at t	alf of a ners in leemed ther of in writi mpany, busine he time	firm or o the firm I to be a them. ing signe firm or p ess or abo e it was	or of suc demand r ed by any person or ode or su so left o	n persor made on of your whom t ch compa r, as the	officers the dema any, firm c	esaid, a ersons and ma nd is to or perso y be, at	and not and not and not and not and not and not and	mand I one of erved ade at, I a den xpiry I	made to such produced by lead the additional such that the additional s	oersons ving th dress l o serve y eight	here s sha ne sa ast k d sha : hou	arising hereunder shall be deeme eunder on any one or more of the all have or exercise in competition arms at, or sending it through the known to you as the registered chall be effective (notwithstandinurs after it was posted excludinus include references to companie
7	or corporations and	l vice v	ersa.														
7.	This Indemnity sha																
N WITN	IESS whereof this In	demnit	y has b	een ex	ecutec	l this		d	ay of								20
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Name:_								Sig	n:						Dat	te:	
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16. Declarations

i. Terms and Conditions Declaration

I/ We the undersigned have read the terms and conditions necessary as provided on the official website www.dibkenya.co.ke, to operate an account with DIB Bank Kenya Limited (the "Bank") and request the Bank to open an account(s) as detailed in this account opening form. I/ We agree that this account(s) shall be solely at the discretion of the Bank, and hereby agree to indemnify the Bank at my / our cost against any loss or claim arising out of the accounts being closed by the Bank without notice due to unsatisfactory performance. I/ We confirm that the information given in this form is true and accept that the operations of the account(s) will be subject to the general terms and conditions including the terms and conditions governing the use of Internet Banking and Mobile Banking and Debit Cards as amended from time to time and can be accessed in any banking hall and on the Bank's official website, www.dibkenya.co.ke, which I/ We have read and understood.

ii. Data Privacy Notice Declaration

I/ We the undersigned hereby acknowledge that I/ We have read, understood, and do consent to the terms and conditions of DIB Bank Kenya Limited Privacy Notice made available to me / us at the time of collecting the information provided in this form and also available at www.dibkenya.co.ke / privacy-policy / and I/ We hereby explicitly authorise DIB Bank Limited and / or its associates to use my / our personal information / data as stipulated in the DIB Bank Kenya Limited Privacy Notice as amended from time to time.

iii. Declaration on Information About Products, Services and Promotions

I/ We the undersigned agree that DIB Bank Kenya Limited may use and share administrative notices and relevant information about my / our account(s) and my / our transactions and notify me / us about products, services and promotions that may be of interest to me / us through telephone, post, SMS, e-mail, electronic, social media and other means. If I / We no longer want to receive marketing-related emails and alerts from DIB Bank Kenya Limited, I / We can opt-out / unsubscribe by following the instructions contained within each such communication or by contacting DIB Bank Kenya Limited's contact Centre or update my / our preferences at your nearest Branch. I / We have been made aware that if I / We opt-out of receiving marketing-related communication, DIB Bank Kenya Limited may still send me / us administrative notices and relevant information about my / our accounts and transactions, from which I / we cannot opt-out or unsubscribe.

iv. Acceptance of Terms and Conditions Governing Data Collection and Processing

I/ We confirm that I/ We have read and understood DIB Bank Kenya Limited Privacy Policy. I/ We understand that the information collected by the Bank will be used in accordance with its Privacy Policy available at www.dibkenya.co.ke / privacy-policy / . I / We hereby grant my / our consent to DIB Bank Kenya Limited and all its associated third-party processors and service providers to collect, use, store, disclose and process my / our personal Information including Personal Data and Sensitive Personal Data in the manner described in the Bank's Privacy Policy, laws and regulations as amended from time to time. I / We agree that the personal information and / or Personal Data that I / We have provided is accurate and complete to the best of the my / our knowledge and agree to notify the Bank in writing or through other means in case of any change in my / our particulars.

Stakeholder and / or Authorised Signatory:	_Sign:	_Date:
Stakeholder and / or Authorised Signatory:	_Sign:	_Date:
Stakeholder and / or Authorised Signatory:	_Sign:	_Date:
Stakeholder and / or Authorised Signatory:	_Sign:	_Date:

17. For Official Use					
Minimum required documents for Entition	es				
Evidence of Registration or Incorporation Resolution Stating Authority to Open an Accou ID / Passports and PIN of the Natural Persons O Audited / Unaudited Financial Statements / Pric KRA PIN / Tax Identification Number (TIN) for th Other Formative Documents e.g. Trust Deed, Pa Constitution, Agreements, Memarts or CR1, CR2 BOF1, Statement of Nominal Capital	owning the Entity or Bank Statements ne Entity ortnership Deed, 2, CR8, Current CR12,	Business Site Proof of Lates In Case of Gov For Foreigners Passport)	Visit Report t Official Returns ernment - a Lette (Valid Foreigner C	r from the Accoun Certificate, Reside	nt / Work Permit and
(Additional documentation and information may be r photocopies)	equested by the Bank on	need basis. Bank offi	cial will need to si	ight the originals t	nefore accepting
How did the Customer find out about DIB Bank Keny	a Limited				
Walk-in Referral / Introduced	Marketing Initiat	ive			
Account Number:					
Relationship Manager / Sales Officer Name:				D:	
ead Originator Name:			l ead	IID:	
A / C Opened by:		Sign:		Date:	
Authorised by:		Sign:		Date:	
Verified by BM / BOO:		Sign :		Date:	
Branch Stamp					