



A/C NO:

**ACCOUNT OPENING FORM**

**PERSONAL ACCOUNT APPLICATION FORM**

**TICK BELOW THE ACCOUNT YOU WISH TO OPEN**

- SASA Saving Account     Giraffe Junior Saving Account     Holiday
- Biashara Savings Account     Kilimo Saving Account

**PERSONAL DETAILS**

Full Name \_\_\_\_\_

ID No. \_\_\_\_\_ Mobile No (1.) \_\_\_\_\_ Mobile No (2.) \_\_\_\_\_

Date of birth (dd/mm/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Marital status \_\_\_\_\_ Gender \_\_\_\_\_

E-mail address \_\_\_\_\_

Home/permanent address \_\_\_\_\_

County \_\_\_\_\_ Location \_\_\_\_\_

Electoral area \_\_\_\_\_ KRA PIN \_\_\_\_\_

**Employment details** *(To be completed by an employed applicant)*

Employer \_\_\_\_\_ Employers address \_\_\_\_\_

Positions in Employment \_\_\_\_\_ Work Station \_\_\_\_\_

Date of Appointment \_\_\_\_\_ Gross Monthly Income \_\_\_\_\_

P.N/TSC.NO \_\_\_\_\_

**Sources of income**

Salary  pension  Others (specify)

**Business Details** *(To be completed by a business applicant)*

Business Name \_\_\_\_\_ Business Address \_\_\_\_\_

Nature of Business \_\_\_\_\_ Approximate Monthly Income \_\_\_\_\_

Business Location \_\_\_\_\_

Source of income \_\_\_\_\_

**NEXT OF KIN**

Full Name \_\_\_\_\_

ID No \_\_\_\_\_ Mobile No \_\_\_\_\_

Relationship \_\_\_\_\_ Signature \_\_\_\_\_

**FOR TEENS ACCOUNT PLEASE FILL IN THE FOLLOWING**

Childs' name: Surname \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of birth \_\_\_\_\_ Childs' Birth Certificate No. \_\_\_\_\_ Gender \_\_\_\_\_

Specimen signature \_\_\_\_\_ **INDEMNITY CLAUSE**

I agree that this account shall be operated solely at the discretion of the FOSA activity and I hereby agree to indemnify at my cost any loss incurred or claims arising on of the account being closed by the FOSA activity without notice because of unsatisfactory performance.

Yours Faithfully,

Full Name(s) \_\_\_\_\_

ID No \_\_\_\_\_ Sign \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Channels**

**Would you like to subscribe to Mobile banking & Agency banking channels? [Yes ] [No ]**

**SPECIMEN SIGNATURE**

**Signing Instructions**

One to sign  Two to sign  Three to sign  All to sign

**FOR OFFICIAL USE ONLY**

**Customer Information Checklist**

- |   |   |
|---|---|
| <input type="checkbox"/> Valid Identification Doc. Obtained and authenticated | <input type="checkbox"/> Customer Contact information available |
| <input type="checkbox"/> Photographs obtained/captured and authenticated      | <input type="checkbox"/> mandated signatures Obtained           |
| <input type="checkbox"/> Passport/Birth certificate/ (Giraffe account)        | <input type="checkbox"/> KRA PIN                                |

I confirm that all the above details have been obtained in accordance with the KYC requirements and opening of the account is here by confirmed.

**Recruited by:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Account No:** \_\_\_\_\_

**Account Name:** \_\_\_\_\_

**Account opened by:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Checked by:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Approved by:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Signature/Stamp** \_\_\_\_\_

**Certified by:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Authorised by:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Signature** \_\_\_\_\_