

PERSONAL ACCOUNT OPENING FORM

TELL U	S ABOUT	YOURS	ELF														
Title:	Mr.	Mrs.	Ms.	Dr.		Prof.	Hon.	Oth	ner (pled	ase speci	fy):						
Name:																	
Date of	f birth:		dd/	mm/yyy	/ \/		Gender:				N	lationo	ality:				
Resider	nce (coun	try):					Marital	status:	Si	ngle	Marrie	ed	Other	(specify)		_
National ID/ Passport No.:(Alien ID)								Ex	xpiry d	late: _							
TIN nur						Tax Exe	empted	No	Yes	(Attach c	ertifico	ate)					
Mother	's maider	name/	memore	able wo	rd (se	ecurity fe	ature fo	r your p	rotecti	on)							_
JUNIO	R/CHILD	ACCOU	NT (BEL	OW 18	YEAR	RS) – prov	vide birt	h certif	icate o	f minor							
Child N	lame:						Dat	e of birt	:h:	dd/mm,	/уууу	R	elationshi	p:			
Birth C	ertificate/	[/] Notifico	ation No	o.:				Gen	der:				Nationa	lity:			
HOW C	CAN WE F	REACH Y	OU?														
	number*									The state of the s					_		
	l automat									Twitter handle/ Facebook:							
										to the email address you have given us above.							
Postal	address:					Postal code:			Тс	Town/ City:				Cou	intry:		_
Physico	al address	::				_ Street r	name: _		E	Estate/ Village: House No.:							
Name (of Next of	Kin:															_
Relatio	nship:								Pł	Phone No.:					_		
ACCOL	JNT DETA	AILS															
Current	t Account	:	UGX	(USD		GBP		EUR	(Other	(specify)				_
Savings	s Account	::	UGX	(USD		GBP		EUR	(Other	(specify) _				
Accour	nt service	level:	Bun	dled		Pay as y	ou go										
Accour	nt categor	y:	Indi	vidual		Joint											
Names of joint applicant(s)						Ad	Account title				_						
SOURC	E OF INC	OME															
Sa	laried	Self-	employe	ed	Oth	ner (spec	ify)										
Gross/E	Estimated	l Monthl	y Incom	e:													
Occupa	ation/ Pos	sition/ D	esignati	ion:					Er	mployee o	depart	ment:					
Name of employer/ Business						N	Nature of business:										
Employ	ver's/ Busi	ness pos	stal add	ress:				Post	tal code	e:		Town	n/ City:				
Physical address:					Street:			C	ountry:				Tel. nur	nber: _		_	
Employ	ver's/ Busi	ness em	ail addr	ess:													_
Are you	ı expectin	ng funds	in forei	gn curre	ncy?	Yes N	lo If Yes	s state t	he curr	ency							



BANK ACCOUNT(S)			
Bank Name:	Branch:	A/C No.:	No. of Years
Bank Name:	Branch:	A/C No.:	No. of Years
FOREIGN ACCOUNT TAX OF Are you a U.S resident? Do you have a U.S residenting on the country of	US Citizen Green al address, corresponence dumber: Index to a U.S Bank Account attorney or signatory autility (Account operating ed to the following service quired) Online Banking	Card Holder Born in the U.S e, c/o or hold mail address in the U.S? Yes t? Yes No hority to a person with a U.S addresss? Yes tools) es /products whose terms of use I/We confirm Cheque Book Email (fill email inde	No No n to have read and understood.
My preferred domicile bran (We will send your cheque b		nch).	
Operating Mandates: S	ole Either/or	All to sign Other (specify)	
2. If yes? State the institution3. Are you related to a senion4. If yes? State the name of the senior posion5. Have you held senior posion6. If yes? state the institution	tions in the cabinet, Parlian served, position held and rofficial in the cabinet, Pathe official, their position of tions in an International Canada served, position held and	arliament, Ministry, Military, Judiciary, or poli and your relationship. Organization like the UN, UNDP, EAC, AU, EU	or World Bank? Yes No
8. If yes? State the name of		-	20 of World Bullik. 103
I confirm that the information will be deemed to and I con	on given is correct and tru firm that, prior to signing t , to the Bank's products c	e to the best of my knowledge. By signing the this application form, I have read, understoo and services and I hereby agree to comply,	od and accepted the General Terms and
Attach coloured passport photo	Tot's & Teens Application (where applicable)	Sign here (within the bo	oundary of this box)

FOR OFFICIAL USE ONLY

Account Number:		Customer Tar	get	Customer Industry					
Customer Sector	Account Offic	cer code (DAO 1)_	P	referred branch (DAO 2)					
Sales Code (DAO 3)									
Account Restrictions Special instructions									
AML Risk Category	Review date		Foreigner	PEP status					
FATCA status: If Yes, FATCA documentation to be completed if yes, complete Foreigner Introduction Form									
Form W9 (U.S Persons only) Form W-8BEN (Non U.S Persons only)									
Written explanation for US born non-US citizens (Confirmation of renunciation of U.S Citizenship / reason for not taking up U.S citizenship at birth)									
Authenticated by:	Authorised	for opening by:	Input by:	Authorised by:					
Name									
Date									
Signature									