



1st Director/Signatory

2nd Director/Signatory

3rd Director/Signatory

<p>Surname----- First Name----- Gender Male <input type="checkbox"/> Female <input type="checkbox"/> Marital status----- Brith date (dd/mm/yyyy) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Place of Birth----- ----- Type of Identification National ID <input type="checkbox"/> Passeport <input type="checkbox"/> Driving Licence <input type="checkbox"/> other----- ID number----- Issued at----- Date of issue----- Expire date----- Tel Mob----- E-mail adress-----</p>																					<p>Surname----- First Name----- Gender Male <input type="checkbox"/> Female <input type="checkbox"/> Marital status----- Brith date (dd/mm/yyyy) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Place of Birth----- ----- Type of Identification National ID <input type="checkbox"/> Passeport <input type="checkbox"/> Driving Licence <input type="checkbox"/> other----- ID number----- Issued at----- Date of issue----- Expire date----- Tel Mob----- E-mail adress-----</p>																					<p>Surname----- First Name----- Gender Male <input type="checkbox"/> Female <input type="checkbox"/> Marital status----- Brith date (dd/mm/yyyy) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Place of Birth----- ----- Type of Identification National ID <input type="checkbox"/> Passeport <input type="checkbox"/> Driving Licence <input type="checkbox"/> other----- ID number----- Issued at----- Date of issue----- Expire date----- Tel Mob----- E-mail adress-----</p>																				

ACCOUNT OPERATING TOOLS

Passbook Cheque Book-24 leaves Chequebooks-48 Leaves Mobile
Banking Push and Pull Product Payment Order
Sms banking

OTHER UNGUKA BANK ACCOUNTS OR ANY OTHER BANKS/ AUTRES COMPTES / IZINDI KONTI



Type of Account	Account number	Name of the bank/BRANCH

The information that/ We have provided in this form is accurate and remain valid at the date of opening the account. I/We have also fully read and understood the terms and conditions of Unguka Bank current account as contained overleaf and agree to be bound by all said terms and conditions as applicable to the banking services applied by me/us. Amakuru nujuje/ twujuje muri iyi nyandiko ni ay'ukuri kandi akomeza kugira agaciro kugeza igihe konti ifunguwe. Na none kandi nasomye/twasomye amabwiriza n'amategeko yose yerekeranye no gufunguza konti muri Unguka bank .Niyemeje/twiyemeje kandi kubahiriza ayo mabwiriza n'ayo mategeko yose agenga umuntu wese usaba serivisi za banki nasabye/twasabye..

1st Director/Signatory	2 nd Director/Signatory	3rd Director/Signatory
Photo	Photo	Photo
Signature	Signature	Signature
Full Name----- -----	Full Name----- -----	Full Name----- -----
ID-----	ID-----	ID-----

Signed in the presence of ----- Signature-----
Account relationship officer ID.....

Date -----

FOR OFFICIAL USE ONLY		Account opening checklist	
Branch		Copy of ID/Passeport(Y/N)	
Account number		Customer photo	
Industry		Copy of business licence	
Professional Sector		Certificate of incorporation (Y/N)	
Risk class1 (high)	2(Medium)	3(Low)	Full identification of signatory (Y/N)

	NAMES	SIGNATURES
Relationship officer		
Authorized By		
Supervised By		