



The Hongkong and Shanghai Banking Corporation Limited in Bangladesh
Incorporated in the Hong Kong SAR with limited liability

..... Branch

Personal Account Opening Application Form

Account Opening Requirements

- Completed Account Opening Form.
- Passport size photograph of each account holder.
- Passport size photograph of nominee. (attested by the account holder)
- A valid identification proof (i.e. National ID card, passport, driving license, etc)
- Introduction by any of the following : an existing HSBC Bangladesh customer who has maintained an account with the Bank for 6 (six) months, HSBC Bangladesh staff member or through HSBC's Group Identification Form, or a formal introduction from another bank.
- Recent Utility bill/Insurance policy/TIN certificate to support Residence Address.
- Documents supporting occupation and source of income

Notes :

- Please produce the original document for each photocopy submitted.
- Please fill the form in capital letters.
- Please countersign any corrections.
- For Non Bangladeshis and Non Resident Bangladeshis additional documentation is required.
- Please provide information in full.
- A local currency current account is required to avail credit facility.

Date:

Customer ID No.

Account No.

Existing Customer: ☐ Yes ☐ No

The Manager

HSBC

.....Branch.

Dear Sir

I/We the undersigned hereby request and authorise the Bank to open an account in your Branch of HSBC as per following. My/our detail information and documents are furnished below:

1. Name of Account/Name of Applicant: Mr/Mrs/Ms
Family Name First Name Middle Name

2. Type of Account (Put v mark): ☐ Savings ☐ Current ☐ Fixed ☐ FC ☐ Others.....

3. Currency (Put v mark): ☐ BDT ☐ Dollar ☐ Euro ☐ Pound ☐ Others.....

4. Signing Mandate (Put v mark): ☐ Singly ☐ Jointly ☐ Any or Survivor(s) ☐ Other

Instructions.....

5. Joint Applicants:

A. Name of Second Applicant/ Mr/Mrs/Ms
Parent/Guardian of Minor Family Name First Name Middle Name

B. Name of Third Applicant/ Mr/Mrs/Ms
Family Name First Name Middle Name

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7. Other Bank Account(s) (If any):

<u>Bank's Name</u>	<u>Branch Name</u>	<u>Type of Accounts (Put v mark)</u>		
A	A	<input type="checkbox"/> Deposit A/C	<input type="checkbox"/> Loan/Credit A/C	<input type="checkbox"/> Others
B	B	<input type="checkbox"/> Deposit A/C	<input type="checkbox"/> Loan/Credit A/C	<input type="checkbox"/> Others
C	C	<input type="checkbox"/> Deposit A/C	<input type="checkbox"/> Loan/Credit A/C	<input type="checkbox"/> Others

8. Introducer's Information :

A. Name : B. Account No. :

C. Name of the Branch : D. Tel No(s): E. Staff ID No:

I/We certify that I/we have known Mr./Mrs/Ms under Sales Effort/ Walk in Customer/ Personally Known to me for the past months/years and confirm his/her occupation and address as stated elsewhere in this application.

F. Signature : Date :

G. HSBC's Group Identification Form (if any) ☐ H. Other Bank's Verification Letter (if any) ☐**9. Initial Deposit**

: Cash Amount BDT/USD/GBP/EUR:

: Cheque No. drawn on (bank name) BDT/FC

: Debit my Account No. for BDT/FC

10. F.D.R. Information

: Amount: Currency :

Duration : ____ Months ____ Years ____ Days. Date of Expiry :

Interest Payment : ☐ by Credit to Account No: or ☐ by Cashier's Order :

Instruction on Maturity :

☐ Renew Principal and Interest for days/months/years☐ Renew Principal only, for months/years and pay interest in A/C No.☐ Repay Principal and Interest to A/C No.☐ Not Applicable.....
Signature

(Note: Unless prior written notice is received, the Bank will automatically renew the deposit plus accrued interest for the same period on the maturity date at the prevailing Bank-rate of interest)

11. Information on Special Scheme:

Name of Scheme: Duration of Scheme:

Primary Deposit/Amount of Instalment: No. of Instalment (Annual):

Maturity Payment: Monthly Payment:

12. Information of Nominee:

I/We do hereunder appoint the following individual as my/our nominee who shall in the event of my/our death receive/draw the amount of deposits held by the Bank in my/our account. I/We reserve the right to cancel or change this nomination at any time. I/We also acknowledge that the payment made by the Bank to him/her shall constitute a full discharge by the Bank of its liability in respect of such deposits. I/We declare that everything done by the Bank in pursuance of this authority shall be binding upon me/us until the Bank receives any notice from me/us in writing to the contrary.

Photograph of
Nominee
(Attested by the
Customer)

Name of the Nominee : Date of Birth/(Age) :/...../.....
 Father's Name :
 Mother's Name :
 Husband's/Wife's Name :
 Permanent Address of the Nominee :
 Occupation : Relationship with the A/C Holder :
 National ID No. :

(If a Non-Resident Bangladeshi is nominated, payment/repatriation to such nominee will be subject to compliance with the existing Foreign Exchange Control Regulations. The photograph of such guardian must be collected and attested by the Customer too.)

However, at the time of my death the nominee remains a minor the following individual shall as the guardian is authorized to receive/draw on behalf of the nominee:

Name: National ID No. :

13. In case of Account Holder(s) is/are Minor:

I, the legal guardian of the undersigned account holder hereby declare that, the account holder is a minor. His/her necessary information is provided in the attached form. The account will be operated under my signature as the legal guardian until the account holder becomes mature or until the Bank receives any notice from me/us in writing to the contrary.

A. Name of Account Holder (Minor) :

B. Date of Birth : Attains Majority on (date) :

C. Name of Guardian : Relationship with Minor:

(Both the Minor and Guardian have to fill up the "Personal Information" forms and both the forms must be signed by the legal Guardian.)

14. Source of Fund/Income :

15. Purpose of Opening Account :

16. ATM Card:

Account No.: Second A/C No. Third A/C No.

Name of the first applicant Identity type Identity no.

Name of the second applicant Identity type Identity no.

Card to be collected at branch * Card type * I- International ATM Card

☐ Linked Account ☐ Separate Accounts P- PVA Card

A- ATM Card (Local)

S -Select Card

Signature ☐ S.V. Signature ☐ S.V. ☐ Foreign Currency
☐ Local Currency

[Note - ATM cannot be issued (a) against Non Resident Taka account (b) NITA (c) where the mode of operation is jointly]

17. Cheque Book Collection:

Please issue a cheque book. I/We confirm that I/we have read or will read prior to drawing any cheques, the conditions subject to which cheque books are currently issued as printed on the inside of the front cover of the cheque book and agree to be bound by such conditions or such other conditions relating thereto from time to time in force.

(Note - Cheque book cannot be issued against NITA, RFCD, STD, TMD, etc.)

Account Name A/C No.

☐ Savings ☐ Current ☐ Others..... Currency.....

Signature ☐ S.V. Signature ☐ S.V. Signature ☐ S.V.

18. Declaration & Signature:

A. I/We also authorise and request the Bank to honour and to comply with all cheques, promissory notes and other orders drawn, and all bills accepted on behalf of me/us, whether the account be in credit or overdrawn, to comply with all directions given for or in connection with any account or accounts of any kind whatsoever on behalf of me/us and to accept and act upon all receipts for monies deposited with or owing by the Bank on any account or accounts in my/our name, provided that such cheques, promissory notes, orders, bills, directions or receipts are signed by myself/ourselves.

B. Any securities or other property of or deposited in my/our name may be withdrawn and any monies may be borrowed from the Bank in the name or on behalf of me/us and may be secured in any manner upon any securities, monies or property of or deposited in my/our name by myself/ourselves.

C. I/We confirm that, I/we have read all the account rules/conditions and hereby agree to be bound by such Terms and Conditions. I/We confirm that I/we have received Bank's Account Rules and Tariff list. I/We, consciously, hereby declare that, all information furnished above and during opening this account is true. I/We also declare that I/we will provide any further information/document as per the Bank's requirement.

D. Customer's Name, Signature(s) & Date :

..... Specimen Signature (first/sole applicant) Specimen Signature (second applicant)
..... Specimen Signature (third applicant) Date

(Note: The liability of joint account for facilities will be joint and several)

For Bank's Use

Remarks:

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Account Opening Staff Name, Signature with Seal & Date	Approval Staff Name, Signature with Seal & Date