



INDIVIDUAL ACCOUNT OPENING FORM

Types of Accounts

Please tick to indicate your preference

- | | | | |
|---|--|--|----------------------------------|
| <input type="checkbox"/> Ordinary Savings | <input type="checkbox"/> Savers Bonus | <input type="checkbox"/> Extra Capital | <input type="checkbox"/> Current |
| <input type="checkbox"/> Pensions Savings | <input type="checkbox"/> Fixed Deposit | <input type="checkbox"/> Forex Account | <input type="checkbox"/> Other |

Guidelines to opening Individual Accounts

Thank you for choosing Cavmont Bank. Please provide the required information below to help us serve you better.

1. Application Letter.
2. A completed SIGNATURE CARD (copy is enclosed).
3. Photocopy of NRC or Valid Drivers License or Valid Passport.
4. Two passport size photos of each signatory.
5. Reference letter from Lawyer/Commission of Oath, previous Banker or existing Cavmont Bank customer, (Advisory Committee members for Community Branches), Chiefs, Church Ministers, Recommendation letter from employer for those in employment.
6. Utility bill e.g. electricity, water or telephone.
7. Resident Permit

Personal Details for First or Sole Applicant

Title ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss. Initials _____

First Name _____ Middle Name _____

Surname _____

Marital Status _____ NRC /Passport No. _____

Name of Spouse/Partner _____

Occupation/Position of Applicant _____

Sex: ☐ Male ☐ Female

Residence _____ Date of Birth _____

Home Status: ☐ Owned ☐ Rented ☐ Mortgaged ☐ Other

Contact Information:

Home Phone: _____ Business Phone: _____

Mobile Phone: _____ Fax Number: _____

Email Address: _____ Postal Address _____

Residential Address _____ Postal Code: _____

Personal Details For Second or Joint ApplicantTitle ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss Initials _____

First Name _____ Middle Name _____

Surname _____

Marital Status _____ NRC /Passport No. _____

Name of Spouse/Partner _____

Occupation/Position _____

Sex: ☐ Male ☐ Female

Residence _____ Date of Birth _____

Home Status: ☐ Owned ☐ Rented ☐ Mortgaged

Mobile Phone: _____ Home Phone: _____

Business Phone: _____ Email Address: _____

Residential Address: _____ Postal Address: _____

Customer Employment Details:Work Type: ☐ Salaried ☐ Self-Employed ☐ Retired Others: (Please Specify) _____

Current Employer: _____

Full Address: _____

Occupation: _____ Position: _____

Length of Service: _____ Period in Business: _____

Business Phone: _____ Monthly Income: _____

Statement InformationStatement ☐ Yes ☐ No
Send Statements ☐ Home ☐ Business

Via Email: _____

Declaration and Acceptance

I/We hereby certify that all the particulars given by me/us are true and complete. I/we further confirm that I/We have read the terms and conditions governing the operation and closure of accounts with Cavmont Bank Ltd and agree to be bound by them.

Signature of Applicant _____ Date: _____

Signature of 2nd Applicant _____ Date: _____**FOR BANK USE ONLY**

Date Account Opened _____

Completed by : _____ Signature of Employee: _____

Approved by: _____ Signature _____