

# COMPANY TERM DEPOSIT APPLICATION FORM



<b>Signia Account Number (For Official Use Only)</b>		<i>COMPANY SEAL</i>
Company Name		
Company Registration # (Corporate/VAT etc.)		
Authorised Officer(s)		

## Authorised Officer(s) Identification

Enclosed Identification Copies (any 1 of the following)	<input type="checkbox"/> National ID Card	<i>Kindly enter the identification numbers for the ID's you have supplied</i>	National ID #	
	<input type="checkbox"/> Driver's License		Driver's License #	
	<input type="checkbox"/> Passport		Passport #	

Reason for Opening the Account			
Source of Funds			
Amount		Term	
Contact (telephone)	(h):	(w):	(c):
Contact (other)	Fax:	Email:	

<b>INTEREST PAYMENT FREQUENCY</b>	<input type="checkbox"/> ANNUALLY	<input type="checkbox"/> SEMI-ANNUALLY	<input type="checkbox"/> QUARTERLY	<input type="checkbox"/> MATURITY
<b>WITHHOLDING TAX</b>	<input type="checkbox"/> NOT TAXABLE	<input type="checkbox"/> TAXABLE		
<b>BARP NUMBER (IF APPLICABLE)</b>				

<b>SIGNATURE</b>	<b>WITNESSED</b>
<b>DATE</b>	<b>DATE</b>

## FOR OFFICIAL USE ONLY

<b>Interest Rate (%)</b>	<b>BARP Premium (%)</b>	<b>Total Rate (%)</b>
<b>Deposit No.</b>	<b>Effective Deposit Date (DD/MM/YR)</b>	
<b>TRANSACTIONING OFFICER</b>		<b>COMPLIANCE OFFICER</b>
<b>DATE</b>		<b>DATE</b>