



FOR BANK USE ONLY

CRM No:

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Scheme Code:

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ACCOUNT OPENING FORM CORPORATE

MVR																				
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USD																				
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ACCOUNT DETAILS

Account Name																			
Account Type	<input type="checkbox"/> Current									<input type="checkbox"/> Fixed Deposit									
Account Currency	<input type="checkbox"/> Maldivian Rufiyaa (MVR)									<input type="checkbox"/> United States Dollar (USD)									
Service Required	<input type="checkbox"/> Internet Banking (please fill Internet Banking Application Form For Corporate Customers) <input type="checkbox"/> Statement by e-mail, <i>specify frequency</i> : <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly																		

CORPORATE INFORMATION

Corporate Name																																								
Registration Number										Date of Incorporation	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										D	D	M	M	Y	Y	Y	Y												
D	D	M	M	Y	Y	Y	Y																																	

TRANSACTION VOLUME

Volume of Transaction / Year	MVR	USD
Expected Cash Withdrawal		
Expected Cash Deposit		
Expected Outward Remittance		
Expected Inward Remittance		
Expected Total Credits		
Expected Total Debits		

ADDITIONAL DETAILS REQUIRED FOR FIXED DEPOSIT ACCOUNTS

Duration	<input type="checkbox"/> 3 months <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> Other _____																																						
Initial Deposit Amount																																							
Initial Deposit Method	<input type="checkbox"/> Cheque									<input type="checkbox"/> Transfer from account: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																													
Auto Renewal (Fixed Deposit Accounts Only)	<input type="checkbox"/> No <input type="checkbox"/> Yes, please specify renewal method: <input type="checkbox"/> With Interest <input type="checkbox"/> Principle Amount Only. Please Provide Interest Credit Account: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																						

SIGNATURE

Mode of Operation	<input type="checkbox"/> Singly <input type="checkbox"/> Any Two / Both Jointly	Company Seal / Stamp
	<input type="checkbox"/> Other, <i>please specify:</i> _____ _____ _____ _____	

PHOTO	Specimen Signature 1	Specimen Signature 2
	Please paste your recent passport size photograph here	

Name		Group	
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PHOTO	Specimen Signature 1	Specimen Signature 2
	Please paste your recent passport size photograph here	

Name		Group	
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PHOTO	Specimen Signature 1	Specimen Signature 2
	Please paste your recent passport size photograph here	

Name		Group	
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PHOTO	Specimen Signature 1	Specimen Signature 2
	Please paste your recent passport size photograph here	

Name		Group	
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SIGNATURE				
<p>PHOTO</p> <p>Please paste your recent passport size photograph here</p>	Specimen Signature 1		Specimen Signature 2	
	Name		Group	
<p>PHOTO</p> <p>Please paste your recent passport size photograph here</p>	Specimen Signature 1		Specimen Signature 2	
	Name		Group	
<p>PHOTO</p> <p>Please paste your recent passport size photograph here</p>	Specimen Signature 1		Specimen Signature 2	
	Name		Group	
<p>PHOTO</p> <p>Please paste your recent passport size photograph here</p>	Specimen Signature 1		Specimen Signature 2	
	Name		Group	

FOR BANK USE ONLY		
Checked By	Uploaded By	Verified By

DECLARATION

- I/We hereby declare/certify that the information furnished above is correct. I/We undertake to inform the Bank in the event of any change in the above details that will bring our company under FATCA and also authorize SBI to disclose account information to the relevant authority, in such an eventuality
- I/We confirm that the details / documents submitted by me are correct as per best of my knowledge
- I/We read and agree following terms and conditions of State Bank of India:
 - General fund transfer terms and conditions
 - Fixed deposit account terms and conditions (fixed deposit account opening customers only)

* current terms and conditions and bank service charges are available from our website www.sbimaldives.com and our branches.

Name of Director	ID / PP Number	Signature

Date:

D	D	M	M	Y	Y	Y	Y
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Company Seal / Stamp

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Form Checked & Approved By	Account Opened By	Compliance Checked By	Verified By