





Third Applicant																			
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FULL Residential Address			
	First Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant
Lot No./House No			
Street Area			
Province			
TIKINA / VILLAGE			
Country			
Tel No.,			
Mobile			
Email			

Communication Address (If different from Residential Address) – Post Bag No Address			
	First Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant
Lot No./House No			
Street Area			
Province			
TIKINA / VILLAGE			
Country			
Tel No.,			
Mobile			

Permanent Address / In case of NRE local Address in India & Abroad			
	First Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant
Lot No./House No			
Street Area			
Province			
TIKINA / VILLAGE			
Country			
Tel No.,			
Mobile			

**OTHER INFORMATION: (√ tick one)**

Education: 

Primary Level	Secondary Level	Graduate	Post Graduate	Masters
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Monthly Income (F\$.) : 

\$
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Expected Annual Turnover in the A/C: F\$ \_\_\_\_\_

**If salaried, employed with: (√ tick one/ Circle it)**

Proprietorship	Partnership	Pte Ltd.	Public Sector	Government		Others (Pl. Specify)
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**If Professional: (√ tick one/Circle it)**

Doctor	Architect	CA / CS	IT Consultant	Engineer	Lawyer	Others (Pl. Specify)
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**If Business: (√ tick one/Circle it)**

Manufacturing	Real Estate	GROG Seller	Service Provider	Trader	Farming	Others (Pl. Specify)
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**DECLARATION**

**TERMS & CONDITIONS & DECLARATION**

- I/We have read, understood and agree to abide by the Bank's rules relating to the conduct of the above accounts / services/ products /Fee & charges which are displayed on the website [www.bankofbaroda-fiji.com](http://www.bankofbaroda-fiji.com) / contained in the brochures of the Bank from time to time.
  - Account will be operated and balance along with interest payable as per operational instructions given above.
  - I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority.
  - I will indemnify the Bank against the claim of the above minor of any withdrawal/transactions made by me in his/her account.
  - I / We understand that in the event of the death of the depositor(s), premature termination of term deposit, I agree to abide by the rules of Bank of Baroda from time to time.
  - I / We also agree to maintain the minimum balance which the Bank may prescribe from time to time as the minimum balance to be maintained to avail the facilities and agree to pay the charges if minimum balance is not maintained and any other charges stipulated by the Bank. I/We understand that any change in this respect will be notified by the Bank on its website [www.bankofbaroda-fiji.com](http://www.bankofbaroda-fiji.com) or any one of Leading Newspaper. and also will be displayed on the notice board of the branches one month in advance.
  - I / we shall fill up separate pay-in-slips prescribed by the Bank for various deposit schemes. I / we understand that the Term deposit shall be under Auto - renewal scheme of the Bank unless otherwise specified in writing by me/us before maturity.
  - I/We wish to be informed about the various features/ products and promotional offers made by the Bank from time to time.
  - [ ] Please do not call/ contact me/us for various features/ products and promotional offers made by the Bank from time to time.
  - I/We authorize Bank of Baroda/its Group Companies and/or their employees, agents to make references and enquiries as may be deemed necessary in their discretion with regard to the information furnished in this application. Bank of Baroda and its Group entities/companies are empowered to exchange, share or part with all the information, data or documents relating to my/our application inter se among themselves or to other Banks / Financial Institutions / Credit Bureaus / Agencies / Statutory Bodies / such other entities / persons as may be deemed necessary or appropriate or as may be required for processing of such information / data by such person/s or for furnishing of the processed information / data / products thereof to other Banks / Financial Institutions / Credit Bureaus / Agencies / users registered with such agencies.
- For Debit cum ATM Card to be issued in the operative deposit account:**
- I/We have read and understood the terms & conditions governing the usage of the Debit Card. I/We accept to be bound by the said terms & conditions and to any changes made therein from time to time by the Bank at its sole discretion. I/We authorize Bank of Baroda to issue a Debit cum ATM Card to the person/s as name mentioned in the application of account opening form. I confirm that I am the sole account holder or have the required mandate to operate the account singly linked to the Debit Card. I/We further unconditionally and irrevocably authorize you to debit my/our account annually for Debit Card fees/charges if any stipulated by the bank.
  - I/We understand and undertake that the usage of the Debit Card shall be strictly in accordance with the Exchange Control Regulations and in the event of any failure to do so, I/We will be liable for action under the Exchange Control Act 1950 and the amendments thereof stipulated by Reserve Bank of Fiji from time to time.
  - I/We accept full responsibility for my/our Debit Card and agree not to make any claims against Bank of Baroda in respect thereto.
  - I / We hereby declare that Date of Birth mentioned in Account Opening form is correct.



➤ Full Signature (in running handwriting):

(Sole / First Applicant)

(2nd Applicant)

(3rd Applicant)

Introduction from an existing account holder in ACTIVE STATUS & at least six months old satisfactorily conducted and KYC compliant A/c.  
(For Current Account – Individual Only)

Name:		Account No.	
Address:		Date of opening of the A/C:	
		Customer ID:	
Pin:	Email:	Branch Name:	
Tel No.	Mobile	Fax	Type of A/c. SB / CA / CC / OD:

I/We certify that, Mr./ Mrs./ Ms. \_\_\_\_\_ is/are known to me/us personally since last \_\_\_\_\_ Years and confirm the occupation and address stated in this application form for opening account are correct to the best of my/our knowledge & belief.

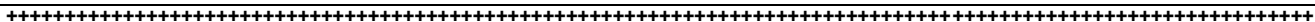
Date:

(Signature of the Introducer)

TITLE OF THE ACCOUNT													
ACCOUNT NO	9	1	0										Branch :
OPERATING INSTRUCTIONS													

Name	Specimen Signature	Photograph
		1. Recent Photo
Customer ID		
		2. Recent Photo
Customer ID		
		3. Recent Photo
Customer ID		
		1. Recent Photo

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ (EC No : \_\_\_\_\_ )  
Bank Official in whose presence signed





**Details of Identification documents submitted by the applicant/s for opening of account.**  
(CARE: FOR NRI APPLICANTS COPY OF PASSPORT MUST BE SUBMITTED AS IDENTIFICATION DOCUMENT)

	Photo Identity			Address Proof Identity		
	1	2	3	1	2	3
Type of Document						
Document Number						
Issuing Authority						
Date of Issue						
Place of issue						
Valid up to.						

**KYC IDENTIFICATION DOCUMENT TO BE SUBMITTED BY APPLICANT**

**(Any one document from each of List A and List B : subject to Bank's Satisfaction)**

List A (FTR Regulations 8(1))	List B (FTR Regulations 8(2))
<b>LIST – I (Latest/ recent photo identification documents)</b>	<b>LIST – II (Latest / recent documents showing address proof)</b>
1. Valid Passport	1. Bank statement or account statement issued by another financial institution if the person previously transacted with a bank or financial institution and that bank or financial institution had confirmed the person's identity <b>(Not Older than 3 Months)</b>
2. Birth Certificate	2. Valid Tax Identification Number and acknowledgement from Fiji Islands Revenue and Customs Authority;
3. Marriage Certificate	3. Notice of taxation assessment by the Fiji Islands Revenue and Customs Authority;
4. Citizenship Certificate	4. Utility Bill for Electricity, Water, Telephone or other similar services issued by the authority responsible for the supply of such services <b>(Not Older than -3- Months)</b>
5. Valid Driving Licence	5. Municipal Business Licence Certificate or Municipal Rates Statement or Invoice;
6. Valid Fiji National Provident Fund membership card;	6. Mortgage / Loan Account Statement from another financial institution;
7. The FIU has determined that the following maybe be used as a identification documents : (* ) Letter of reference or certification by a suitable third party. (* ) Certificate of Registration in the Vola Ni Kawa Bula	7. Cellular Phone / Television Account Statement;
	8. Long-term or short-term insurance policy document issued by an Insurance Company;
7. Any other evidence of Identify, as may determined by FIU. # identified from any of the items mentioned above or FEA bill/water rates bill/telecom bill/bank statement/TIN or any items mentioned vide Sch.8 (2) of FTR Regulations 2007.	9. Motor Vehicle license or registration document;
	10. Land or other property ownership document or title;
	11. Employment Identification Card or a Letter from the Employer;
	12. Pay or salary slip;
	13. Identification card issued to a student at a tertiary or technical education institution;
	14. Verification by a suitable referee to the satisfaction of bank. (For Current Account)
❖ <b>TIN Number or Tax Identification Number &amp; Birth Certificate are Mandatory</b>	
❖ In case of married women, Marriage Certificate along with Photo Identity of the Groom & Address Proof is must, if Account is to be opened in name with Groom's Name)	

**Politically Exposed Person Information**

Are you connected to one or more persons who holds or has held a senior government, political or military position  Yes  No

**if Yes:** If yes, please complete a separate form for each connection and /or account holder.

If you are not the person who holds or has held a senior government, political or military position, what is the name of the politically exposed person you are a family member of?

**Name (In Full):** \_\_\_\_\_ **Relation:** \_\_\_\_\_

**Title of Position held:** \_\_\_\_\_  
During what time period was the position held? Starting year: \_\_\_\_\_ Ending Year: \_\_\_\_\_

**Signature of Declarant**

**Signature of Declarant**



**Declaration (Source of Funds)**

I/We \_\_\_\_\_ hereby declare that my source of income is from normal source of funds Salary/ Rental Income/ Business Income. (Tick anyone)- **Actual Source to be declared.**

Source of funds, in particular what is the normal source of fund or income for the customer e.g. salary, rental income, pension etc. Some Customers, such as the unemployed or minors, will have no regular source of income.

Signature of Declarant Signature of Declarant

**MICRO, SMALL AND MEDIUM ENTERPRISES Guidelines – For Current Accounts (Individuals)**

- A “micro enterprise” means any enterprise that has a turnover or total assets not exceeding \$30,000 and employs not more than 5 employees.
- A “small enterprise” means any enterprise that has a turnover or total assets between \$30,000 and \$100,000 and employs between 6 and 20 employees.
- A “medium enterprise” means any enterprise that has a turnover or total assets between \$100,000 and \$500,000 and employs between 21 and 50 employees.

Enterprises	1. Employees	2. Assets	3. Annual Sales
Micro	< 5	< \$30,000	< \$30,000
Small	6 < 20	\$30,000<\$100,000	\$30,000<\$100,000
Medium	21 < 50	\$100,000<\$500,000	\$100,000<\$500,000

- I hereby declare that I would fall under following category
- ❖ Enterprise: Micro / Small / Medium (Kindly Tick One).
  - ❖ No of Employees: \_\_\_\_\_.
  - ❖ Assets: F\$ \_\_\_\_\_.
  - ❖ Annual Sales: F\$ \_\_\_\_\_.

Signature of Declarant Signature of Declarant

**Verification**

I /We \_\_\_\_\_ hereby declare that the contents of the account opening form have been explained & interpreted to us in the vernacular language and I/we appear to have understood the same.

I will also adhere to various Regulatory/ Statutory Guidelines & Bank's Internal guidelines/ policies issued from Time to Time.

I /We do hereby declare that what is stated is true to the best of my knowledge and belief.

Verified at \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_ (Month) \_\_\_\_\_ (Year)

Date:

Place:

Signature of the Declarant Signature of the Declarant

**For Office Use**

Sr. No.	Description	Name of Supervisor	Signature
1	Applicant interviewed & purpose ascertained by		
2	Document/s of identification/Address Proof listed above were verified with original by		
3	<b>Money Laundering Risk Classification (*)</b> [ ] Low [ ] Medium [ ] High		



**KYC CERTIFICATION:**

I have met the account opener/s Mr/Ms. \_\_\_\_\_  
& Mr/Ms. \_\_\_\_\_ in person and hereby confirm that  
KYC Norms along with other Due Diligence guidelines issued from time to time  
by the Bank and other Regulatory authorities in FIJI are fully complied with and  
further confirm that -

i) a) **The Customer/s** had visited the branch

\_\_\_\_\_  
Signature of Head of the Department EC No \_\_\_\_\_  
Date:

I have verified the documents submitted and confirm that KYC  
Norms are fully complied with.

Signature of Branch Head / Asst. Manager / Accountant  
EC No.  
Date:



List of Documents required for opening of various other type of accounts **along with Individual KYC Documents** of Signatories & Trustees.

<b>Cooperative Societies, Association, Clubs</b>	<ol style="list-style-type: none"> <li>1. Certificate of Registration / Association, Clubs etc. of the societies / association / club if any.</li> <li>2. Certified copy of the By-laws of the society etc.</li> <li>3. Resolution of the Management committee appointing the Bank at its Banker for opening of Account and stipulating the conditions for the conduct of account.</li> <li>4. List of Office Bearers (with address) along with KYC Documents of managing committee with the copy of resolution electing them to the committee.</li> <li>5. List of Authorised Signatories.</li> <li>6. List of Committee Members along with Designation.</li> </ol>
<b>Charitable / Public Trust / Foundations</b>	<ol style="list-style-type: none"> <li>1. Certificate of Registration, if registered.</li> <li>2. Copy of Trust Deed / Constitution document.</li> <li>3. Power of attorney granted to persons to transact the business on its behalf</li> <li>4. Certified copy of the resolution signed by all the trustees in regard to the conduct of the account.</li> <li>5. Any document listing out the names and address of trusts, settlers, beneficiaries and those holding Power of Attorney and other key officials involved in day to day management of the trust / foundation to the satisfaction of Bank.</li> <li>6. Certificate from the Charity Commissioner in case of registered trust.</li> <li>7. List of Committee Members along with Designation.</li> </ol>
<b>Gang Accounts</b>	<p><b>GANG</b></p> <ul style="list-style-type: none"> <li>➤ TIN # OF THE GANG</li> <li>➤ MINUTE OF THE MEETING (ENGLISH)</li> <li>➤ MOGA (STAMP BY THE SECTOR OFFICE)</li> <li>➤ List of Committee Members along with Designation.</li> </ul> <p><b>MEMBERS WHO WILL OPERATE THE ACCOUNT</b></p> <ul style="list-style-type: none"> <li>➤ Original Birth Certificate</li> <li>➤ Recent 1 Passport Size Photographs</li> <li>➤ Deposit- Normal savings (Passbook ONLY) - \$50.00</li> <li>➤ TIN Registration</li> <li>➤ Valid Photo ID (FNPF card, Drivers Licence, Passport &amp; Voter Registration Card)</li> </ul> <p>NOTE **: ALL NAME SHOULD MATCH WITH ALL THE DOCUMENTS OTHERWISE GET A STATUTORY DECLARATION FROM A JP, ROKO, ADVIROSY COUNCILLOR OR DISTRICT OFFICER (DO)</p>
<b>Sole Proprietor Ship Firm</b>	<ol style="list-style-type: none"> <li>1. Sole Proprietorship Letter (included in terms and conditions in the form)</li> <li>2. Power of Attorney (if any) granted to any person to transact the business on its behalf.</li> </ol>

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### Dormant Guidelines

The savings as well as current accounts are treated as inoperative /dormant if there are no transactions in the accounts for over a period of **ONE** year. For the purpose of classifying an account as "inoperative/dormant" both the type of transactions debit as well as credit transactions, induced at the instance of customers and third party are considered. However, the service charges levied by the bank or interest (payable on the balances of account itself.) credited by the bank are not considered.

The accounts would also be classified as dormant accounts if there is no customer induced debit transaction in the account for **TWO** years even though there are credit transactions in the account.

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**Resolution for Club Account / Gang / Trust Account**

(1) \_\_\_\_\_ Meeting of (2) \_\_\_\_\_ held at  
on \_\_\_\_\_ it was resolved that:-

**(A)** A Current/Savings Bank Account be opened with Bank of Baroda, in the name of \_\_\_\_\_

(3) Under the control of (4) \_\_\_\_\_ or their successors in office and that the said  
Bank be requested to honour to the debit of such account all Cheques and orders signed by (5) \_\_\_\_\_

**(B)** All deposit receipts shall be discharged on behalf of the

(2) \_\_\_\_\_ provided they are endorsed by

(3) \_\_\_\_\_

**(C)** Receipts withdrawing securities or other valuables lodged with the Bank shall be discharged on behalf of the

(2) \_\_\_\_\_ provided they are signed by (3) \_\_\_\_\_

**(D)** Instructions for mail transfers, telegraphic transfers, opening letters of credit, will be given on behalf of (2)  
\_\_\_\_\_ and documents and/or indemnities required by the Bank in connection therewith will  
be signed on behalf of (2) \_\_\_\_\_ by (5) \_\_\_\_\_

..... CHAIRMAN OR PRESIDENT

..... SECRETARY

..... TREASURER

..... SIRDAR

**NOTES**

- ❖ Insert "**Committee**" or "**General**" etc., as applicable in lieu of 1.
- ❖ Insert the **Name of the Association** in lieu of 2.
- ❖ Insert full **Name of the account as per TIN Number** as it will appear in the ledger heading in lieu of 3.
- ❖ Full names of **All Office bearers (Signatories)** who are authorized to operate together with their respective offices in lieu of 4.
- ❖ Insert "**Instructions on How to Operate the Account.**" in lieu of 5.

Name & Address	Designation	Specimen Signature





#### Current Account Rules

1. Current accounts are opened with sums of \$550.00 (Cheque Accounts) or upwards for parties satisfactorily introduced.
2. An account may be opened in the name of the person or in the names of two or more persons; arrangements can be made for any one or more of them to operate the account and the balance to be paid to the survivor.
3. All payments to Current Accounts made by local customers should be accompanied by paying – in – slips (Books of paying – in – slips are supplied free of charge to customers) and the Bank's stamp and authorized Initial should be obtained on the counterfoils thereof.
4. Separate paying – in – slips should be used for cash collection of local cheques and cheques on upcountry banks. Cheques on local Banks if received after 1p.m. on week days will be cleared on the next working day.
5. Cheques must be drawn on the printed form provided by the Bank; the Bank reserves to itself the right to refuse payments of cheques drawn otherwise.
6. Application for cheque book must be made by the customers personally or in writing. It is particularly requested that the printed requisition form inserted in the cheque-books be used when a new cheque-book is required.
7. To prevent forgeries, frauds etc., customers are particularly requested to:
8. Keep the cheque-book under lock and key;
9. Fill in the body of the cheque before delivery;
10. Fill in the amount in words as near as possible to "\$"
11. The writing of cheques should be clear and distinct and cheques must be drawn in such a way as to prevent any alteration or addition after issue.
12. The amount in cheque must be stated both in words and figures distinctly.
13. All alteration on cheques must be authorized by the drawer's full signature; otherwise the cheques are liable to be returned unpaid.
14. Payments of cheque are liable to be refused on which the signature does not exactly correspond with that on record at the Bank. Signature other than in Roman characters on cheques may be accepted only by special arrangement.
15. The Bank will register instructions from the drawer of a cheque to stop its payment but cannot undertake any responsibility in case such instructions are inadvertently overlooked.
16. No cheque should be drawn for a sum of \$2.00. The Bank reserves to itself the right to refuse payment of cheques drawn for amounts smaller than \$2.00.
17. Cheques post-dated, i.e. bearing a date subsequent to the date of presentation will not be paid. Cheques bearing date over six months prior to the date of presentation are liable to be refused payment.
18. Customers are requested to cross all cheques intended for collection before paying them into their accounts.
19. Accounts can be overdrawn only after previous arrangement with the Manager.
20. Cheques must not be issued before the necessary funds have been credited to the account. If cheques be presented when there are insufficient funds to meet them, payment may be refused and the cheques returned. Repeated disregard of these instructions will entail summary closing of the account.
21. The Bank should be immediately notified of the cancellation of any authority given to third parties to operate the account. Any such notice will be operative only after its receipt by the Bank.
22. A Pass-book showing record of all sums paid in and all cheques drawn is issued to each account-holder. No entry should be made in pass-book except by an official of the Bank. Alternatively, statements of account can be supplied periodically.
23. The Pass-book should be sent to the Bank at least once a month to be written up. On a Pass-book or statement being received by a customer, the entries therein should be carefully examined and any error or omission should be immediately brought to the notice of the Bank; otherwise it will be concluded that the account has been found correct. The Bank will not be responsible for any loss arising from the neglect of these precautions.
24. It should be understood that although entries may have been made to the credit of an account and such entries initialed by officer in the pass-book or statement, should such entries be made up of cheques which have to be collected the amount they represent is not available for drawing until the proceeds have been realized by the Bank.
25. The Bank reserves to itself the right of closing any account after previous intimation if it is not operated upon satisfactorily.
26. Basic fee and activity fee as fixed by the Bank from time to time will be levied each quarter on all current accounts.
27. A further charges will be made on all account where the balance does not compensate for the number of cheque forms and the amount of stationery used and labour involved in keeping the accounts.
28. The Bank's decision in the above matter will be final.
29. The Bank does not recognize unregistered trusts.
30. The Bank reserves to itself the right of closing any account which in its opinion is not operated upon satisfactorily or for any reason whatsoever. The Bank's decision in such matters will be final.
31. Any change of address should be notified to the Bank as soon as possible.
32. The Rules of business are subject to alteration from time to time.