



EAGLE FLIGHT MICRO FINANCE BANK LTD.

RC 206 798

SAVINGS ACCOUNT OPENING FORM

| | | | |
|------------------------------------|---------------------|----------------------|-------------------|
| Title: | Surname: | Middle name | Other name |
| Residential Address: | | | |
| Mailing Address: | | | |
| Tel: Nos. Office: | Mobile: | Home: | |
| Date of Birth: | Nationality: | | |
| Occupation: | | | |
| Employer's Name and Address | | | |
| E-mail Address | | | |
| Name of next of kin: | | Relationship: | |
| Address of Next of Kin: | | | |

I hereby request and authorise you to open a savings account in my name.

I certify that the above particulars are true and correct.

I agree

1. To guard against access to the withdrawal slip by unauthorised persons.
2. That interest will be allowed on my account at ruling rates and subject to prevailing conditions.
3. That all sums for the credit of the account should be accompanied by a pay-in-slip showing the name and number of the account to be credited. The entry of the transaction will be verified by the initial of an officer of EAGLE FLIGHT MICRO FINANCE BANK LTD on the Duplicate of the pay-in-slip.
4. That withdrawals can only be made by the account holder at the branch in which this account is domiciled and on the basis of withdrawal slips.
5. That any change in the address of the account depositor should be communicated to EAGLE FLIGHT MICRO FINANCE BANK LTD at the branch where the account was opened.
6. That a quarterly State of Account will be sent to me, any discrepancies with entries on my Statement of Account will be notified to Eagle Flight Micro Finance Bank Ltd within 15 days of the date thereof, EAGLE FLIGHT MICRO FINANCE BANK shall assume that the entries made are correct, having failed to receive any notice or information to the contrary within the stipulated period.

CUSTOMER'S SIGNATURE & DATE

CHECKLIST

1 Passport Photograph

1 Mandate Card

1 Completed Signature Card

APPROVED BY:

(HEAD'S CIS)

SIGNATURE & DATE

ACCOUNT OPENED BY

(CIS OFFICER-NAME)

SIGNATURE & DATE

SCANNED BY:

(CIS OFFICER-NAME)

SIGNATURE & DATE