

CCA 001



Guaranty Trust Bank (SL) Ltd

**ACCOUNT OPENING
DOCUMENTATION
CORPORATE**



GUIDE TO OPENING YOUR ACCOUNT

1. Complete all relevant portions of the account opening application form.
2. Complete the enclosed signature mandate.
3. Supply the under listed documents along with completed application package:
 - a. Memorandum and Articles of Association
 - b. Photocopy of licence for current year.
 - c. One passport photograph of each signatory to the account
 - d. Identification document for signatories to the account, e.g. Driving licence, Passport
National ID card
 - e. Certificate of Incorporation.



APPLICATION TO OPEN A CURRENT ACCOUNT

Guaranty Trust Bank (SL) Ltd

Company Name

Certificate of Incorporation No Date of Incorporation

Business Address

Registered Office (if different from above)

Nature of Business

Telephone Nos.

Telefax Nos Telex No

E-Mail Address

NAMES OF DIRECTORS/KEY CONTACT PERSON (S)

| Name | Designation |
|-------|-------------|
| | |
| | |
| | |

Correspondence Address (Where different from Business Address)

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ACCOUNT WITH OTHER BANKS IN SIERRA LEONE

Bank Name

Bank Address

Account No

Bank Name (2)

Bank Address

Account No

CCA 004



Guaranty Trust Bank (SL) Ltd

ACCOUNT NO.

| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

SIGNATURE MANDATE (CORPORATE)

Date Account Opened _____

Account Name: _____
(In Block Letters)

Permanent Address _____

_____ Tel. No/ Mobile _____

Nature of Business _____

SIGNATURE MANDATE

| Title (Mr, Mrs, Etc) | Name | Photograph |
|--------------------------------|------|------------|
| | | |
| Signature | | |
| Title (Mr, Mrs etc) | Name | Photograph |
| | | |
| Signature | | |
| Title (Mr, Mrs etc) | Name | Photograph |
| | | |
| Signature | | |
| Authorised Combination Mandate | | |



MANDATE AND RESOLUTIONS

Pursuant to this application, a meeting of the Board of Directors of the company was held and it was resolved and declared that a current account be opened with Guaranty Trust Bank (SL) Ltd (“the Bank) and the bank is hereby authorized to honour the instructions of the persons whose signatures are contained in the specimen signature card delivered to the Bank.

The company shall give notice of any anomalies in statements furnished by the Bank within 90 days of the date thereof the failure of which will absolve the Bank from all liability thereof.

It was further resolved that the Bank may combine or consolidate all or any of the company’s accounts and set off or transfer any sums or asset standing to the credit of any or of one or more of such accounts towards the satisfaction of the company’s liabilities to the Bank.

The Persons, whose signatures appear below, one of whom is a Director of the Company, have been duly authorized to mandate the opening of the account. The information provided for the opening of this account is true and correct in all material respect.

Dated this day of 20

CERTIFIED TRUE COPY

Name Name

Designation Designation

Signature Signature

CCA 006



FOR BANK USE ONLY
DOCUMENTS OBTAINED

Guaranty Trust Bank (SL) Ltd

| | YES | DEFERRED | WAIVED |
|--------------------------------------|--------------------------|--------------------------|--------------------------|
| COMPLETED SIGNATURE CARD | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| MEMO & ARTICLES OF ASSOCIATION | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| COPY OF CERTIFICATE OF INCORPORATION | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| COPY OF LICENCE FOR CURRENT YEAR | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| PASSPORT PHOTOGRAPH OF SIGNATORIES | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| IDENTIFICATION OF SIGNATORIES | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

DOCUMENTATION CHECKED BY:

CSO _____
NAME INITIAL DATE

DEFERRAL/WAIVER OF DOCUMENTS AUTHORISED BY:

NAME INITIAL DATE

ACCOUNT OPENING AUTHORISED BY:

NAME INITIAL DATE