



SMB FINANCE PLC
 Registration No. PQ91
 No. 282/1, CBS Building,
 Galle Road, Colombo 3.
 Web: www.smbk.com
 Telephone: +94 11 4222888

APPLICATION FOR ACCOUNT OPENING

For office use only	
Introducer	
Dept Branch	
CUS. ID. No	
Fixed Deposit	
Savings	

Branch		Account type	Savings <input type="checkbox"/>	Fixed deposit <input type="checkbox"/>	Date										
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Personal information	Main applicant	Joint holder
Name in full	Mr./ Miss/ Mrs./ Rev.	Mr./ Miss/ Mrs./ Rev.
Citizenship	Resident <input type="checkbox"/> Non resident <input type="checkbox"/>	Resident <input type="checkbox"/> Non resident <input type="checkbox"/>
Permanent address		
District		
Country		
Correspondence address		
Date of birth (DD/MM/YYYY)		
NIC/ PP No.		
TIN No.		
Telephone No.	Residence	
	Mobile No.	
	Office	
E-mail address		
Occupation		
Place of work		
Marital status	Single <input type="checkbox"/> Married <input type="checkbox"/> Other <input type="checkbox"/>	Single <input type="checkbox"/> Married <input type="checkbox"/> Other <input type="checkbox"/>

Details of account			
Deposit amount in words		Initial deposit (LKR)	
Statement collection method	By post <input type="checkbox"/>	By email <input type="checkbox"/>	To be collect at branch when required <input type="checkbox"/>

Mode of payment				
Cash <input type="checkbox"/>	Savings A/c <input type="checkbox"/>	Cheque <input type="checkbox"/>	Bank draft <input type="checkbox"/>	Direct deposit <input type="checkbox"/>

For fixed deposit only		
Deposit period (In months)	Interest rate % p. a.	Automatic renewal indicator
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 3 6 12 24 36 48 60		Capital Only <input type="checkbox"/> Cap. & Int. <input type="checkbox"/> Other <input type="checkbox"/>
Interest payment mode:		It is SMBF's standard procedure to automatically renew the deposit with interest for the same period at the interest rate that is in effect on the date of maturity, unless it is instructed to us otherwise.
Monthly <input type="checkbox"/> Maturity <input type="checkbox"/> Annually <input type="checkbox"/> Other <input type="checkbox"/>		

Interest payment instructions			
Name of financial institute			Branch
Type of account	Savings <input type="checkbox"/>	Current A/c <input type="checkbox"/>	Account No.
If by cheque	By post <input type="checkbox"/>	To be collected <input type="checkbox"/>	Payee name of the cheque
Operating instructions (For joint deposits only)	<p>1. Where the deposit is held in joint names, it is agreed that all instructions with regard to the fixed savings deposit shall be given by (Please tick as applicable)</p> <p><input type="checkbox"/> Either of above <input type="checkbox"/> All Signatories <input type="checkbox"/> Other (Please specify)</p> <p>2. In the event of the death of any of us (the depositors) the survivor(s) of such depositors shall be entitled to all the rights and powers which the depositor(s) had at the time of such death in respect of the fixed/saving deposits account(s), including the right to payment at maturity of the money in deposit without prejudice to any right you may have in respect of such money arising out of any lien set off, counter claim or otherwise whatsoever or to any step you may deem it desirable to take in view of any claim by any person other than the survivor(s).</p>		

Nominee in terms of section 544 (1) (D) of the civil procedure code (Amendment Act No. 14 of 1993)

Nominees	1	Payment	%	2	Payment	%
Name in full	Mr./ Mrs./ Miss/ Rev./ Other.....			Mr./ Mrs./ Miss/ Rev./ Other.....		
NIC/ PP No.						
Address						
Country						
Mobile No.						
E-mail address						
Relationship						

I/We do hereby nominate, the above names as my/our nominee to receive all monies lying in the account on my / our death. In case of a joint account, we are aware in the event of the death of any one of joint account holders the nomination becomes invalid.

Anti-money laundering and environmental declaration

I/We hereby declare and confirm that all the money that I/we use for the purpose of this facility deposit is earned or received by me/us through legitimate sources and is not derived or realized; directly or indirectly, from any unlawful activity or from proceeds of any unlawful activity. I/We also declare and confirm that any money that I/we will be using in the future to make any payments in terms of this agreement including rentals, capital and /or interest shall be money earned or received by me/us in terms of this agreement shall only be used for legitimate purposes and shall not be used for any unlawful activity. (The words "unlawful activity" shall have the same meaning as defined in the prevention of Money Laundering Act. No. 05 of 2006.)

I/We wish to also confirm that all my/our sources of income are generated through activity which are conducted in compliance with the environmental laws, rules and regulations which are in force in the country and will ensure that all payments that I/we make including rentals, capitals, interest, fees or any deposit in terms of this agreement is now as well as in the future shall be from in come generated through sources or activities which are in compliance with the above laws rules and regulations.

Do you have any other deposit accounts at SMB Finance PLC?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes please provide the account No.		

Rules and regulations referred to the deposit

- A.** Eligible deposit liabilities are insured with the Sri Lanka Deposit Insurance Scheme implemented by the Monetary Board for compensation up to a maximum of LKR 1,100,000 per eligible depositor.
- B.** SMB Finance PLC reserves the right to report any kind of suspicious transactions and the transactions above threshold of LKR 1,000,000 to the Financial Intelligence Unit of Sri Lanka, adhering to regulations issued under the Financial Transaction Reporting Act No. 06 of 2006 and the direction issued thereof.
- C.** It is also understood that the fixed deposit receipt issued by SMB Finance PLC is not transferable and the Company will not release the deposit until the deposit receipt is duly endorsed by the depositor s and surrendered to the Company.
- D.** For savings account, interest will be calculated on daily balance and credited monthly.
- E.** The expiry of the term or period of the deposit whether original or subsequent and the delivery to the Company of the deposit receipt duly discharged as aforesaid are to be together conditions precedent to the release of any money lying in the deposit account.
- F.** Deposit will be for the fixed period specified above and will be re-payment on the maturity date.
- G.** Pre mature withdrawals will be solely at the discretion of the management and will be subject to an interest adjustment due to the reduced term of investment.
- H.** The Company reserves the right to amend the terms and conditions on which a deposit is held at any time and in any manner which the Company deems necessary with or without any notice to the depositors. However, interest rate on fixed term deposits will remain unchanged except in a situation where such rates are subject to Government Directives due to changes in monetary and fiscal policy.
- I.** I/ We authorize SMB Finance PLC to disclose any information pertaining to this deposit/savings account to a party legally authorized to obtain such information according to any existing law in Sri Lanka.
- J.** SMB Finance PLC should be immediately informed in writing in the event of any change in your address, contact no. or loss of fixed deposit receipt. I/ We have read and understood the rules and regulations relating to fixed deposits savings account and hereby apply to open a fixed deposit/ savings account at SMB Finance PLC with details provided above. Further, I/ We agree to comply with and be bound to these rules and regulations and all rules and regulations made or imposed by SMB Finance PLC pertaining to fixed deposits/savings account and which may come into effect and be enforced by the financial institution from time to time not with standing that such rule or regulation may not have been individually notified to me/ us.

Signatures

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Main applicant

.....
Joint applicant

Authorized officer:.....

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AC No:		Data entered by:			
Receipt No:		Data entered date:			
Receipt date:		Authorized by:			
Amount:		Authorized date:			
Certificate No:		Certificate:	Issued to customer		Date issued:
Maturity date:			Held in safe custody		
Rate:		Signature verified by:	Signature of officer		
Remarks:					