

SISSALA RURAL BANK LIMITED



ACCOUNT OPENING FORM INDIVIDUAL / JOINT ACCOUNT

YOUR BEST BET IN BANKING

ACCOUNT OPENING FORM - INDIVIDUAL/JOINT ACCOUNT

ACCOUNT TYPE Savings Current Joint Other Specify

Affix
Passport
Photograph
Here

AGENCY/
BRANCH
STAMP

ACCOUNT NO. (For office use only)

1A PERSONAL INFORMATION

Title Surname

First Name

Middle Name(s)

Former Name

Marital Status (Please tick as appropriate) Single Married Other (pls Specify) Gender M F

Date of Birth DDMMYYYY Place of Birth

Mother's Maiden Name

Nationality Resident Permit No.

Permit Issue Date DDMMYYYY Permit Expiry Date DDMMYYYY

Tax Identification Number (TIN) Region

Purpose of Account (Please Tick) Salary Savings Business Other Specify

1B PERSONAL INFORMATION

Title Surname

First Name

Middle Name(s)

Former Name

Marital Status (Please tick as appropriate) Single Married Other (pls Specify) Gender M F

Date of Birth

D	D	M	M	Y	Y	Y	Y

Place of Birth

Mother's Maiden Name

Nationality

Resident Permit No.

Permit Issue Date

D	D	M	M	Y	Y	Y	Y

Permit Expiry Date

D	D	M	M	Y	Y	Y	Y

Tax Identification Number (IIN)

Region

Purpose of Account (Please Tick)

Salary Savings Business Others (Specify)

2 CONTACT DETAILS

Residential Address

City / Town / Village

Nearest Landmark

Proof of Address
(Indicate type and Serial Number)

Metropolitan, Municipal, District Assembly Area (MMDA)

Mailing Address

Phone Number 1

Phone Number 2

Email Address

3 VALID MEANS OF IDENTIFICATION

National ID Card Driver's License Passport Voter's ID

ID No.

ID Issue Date

D	D	M	M	Y	Y	Y	Y

Expiry Date

D	D	M	M	Y	Y	Y	Y

4 EMPLOYMENT DETAILS

Employed Self Employed Unemployed Retired Student Others (Pls Specify)

Date of Employment (If Employed)

D	D	M	M	Y	Y	Y	Y

Annual Salary / Expected Annual Income

Annual Salary Less than GHC5,000 GHC5,001 – 10,000 GHC10,001 – 20,000 More than GHC20,000

Employer's Name

[Grid]

Employer's Address

[Grid]

Nearest Landmark

[Grid]

City / Town / Village

[Grid]

Region

[Text Box]

Nature of Business/Occupation

[Text Box]

Office Phone Number

[Grid]

Mobile Number

[Grid]

Email Address

[Grid]

5 DETAILS OF NEXT OF KIN

Title

[Text Box]

Gender M

F

Surname

[Grid]

First Name

[Grid]

Date of Birth

Middle Name(s)

[Grid]

D D M M Y Y Y Y

[Grid]

Relationship

[Grid]

Phone Number 1

[Grid]

Phone Number 2

[Grid]

Residential Address

[Grid]

Region

[Text Box]

6 ADDITIONAL DETAILS

Name of Beneficial Owner(s) of the Account

[Grid]

[Grid]

Spouse's Name

[Grid]

Spouse's

D D M M Y Y Y Y

Date of Birth

[Grid]

Spouse's Occupation

[Text Box]

Sources of Funds to the Account 1

[Grid]

Sources of Funds to the Account 2

[Grid]

Level of Deposits

[Grid]

Frequency of Deposits

[Text Box]

Expected Annual Income from other sources

Name of Associated Business(es) 1

Name of Associated Business(es) 2

Name of Associated Business(es) 3

Types of Business

Business Address

7 ACCOUNTS WITH OTHER BANKS

S/N	NAME AND ADDRESS OF BANK/BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	STATUS: ACTIVE/DORMANT
1.				
2.				
3.				
4.				
5.				

8 ACCOUNT MANDATE

(Please tick as appropriate)

Mandate authorization (Please tick as appropriate)

Sole Signatory Either to Sign Both to Sign

Name: _____

Surname _____

Other Name _____

Class Of Signatory _____

Identification Type _____

Identification No. _____

Telephone Number _____

Signature and Date _____



FOR BANK USE ONLY

Signature

FOR BANK USE ONLY

Signature

