SEYLAN BANK PLC
The bank with a heart

YOUTH SAVINGS / CURRENT ACCOUNT MANDATE

Branch | Currency | Date (D D M M Y Y Y Y)

Please open a youth current account / passbook savings account / e-statement savings account as per details provided as follows.

External Account Number | Internal Number

Digital interest - Select the interest earning options.

Credit Digital interest to Mobile No.

☐ 0% ☐ 25% ☐ 50% ☐ 75% New SIM ☐ Old SIM ☐

Note : Digital interest will be paid only for youth savings accounts and if the interest is less than LKR 50, only rupee interest will be provided. Maximum digital interest Paid will be LKR 2,000.00

APPLICANT'S DETAILS

Name in full as in NIC/Passport
Mr / Mrs/Miss/Dr./Rev.

Name with initials

NIC/Passport Number | Date of Issue (D D M M Y Y Y Y)

Date of Birth (D D M M Y Y Y Y) | Gender ☐ Male ☐ Female

Visa Expiry date* (D D M M Y Y Y Y) | Parent Country ..... * if subjected to FATCA obtain declaration

Passport Expiry date* (D D M M Y Y Y Y) | Resident Country .....

Nationality | * Reason for open the Account in Sri Lanka

Citizenship ☐ Sri Lankan ☐ Dual citizen (specify the country) .....

Permanent Address

Mailing Address
(If differs to Permanent Address)

Postal Code | Mobile 1 (9 4 7 ...)

Telephone Numbers - Home | Mobile 2

Office | Fax No.

Statements to be emailed | ☐ To receive promotional offers by SMS/E-mails.

Occupation/Designation

Employer's Name & Address

Purpose of opening the A/C

Expected Mode of Transactions ☐ Cash ☐ Cheques ☐ Swift ☐ RTGS ☐ Mobile Banking ☐ Internet Banking

Source of funds

- ☐ Sales and business turnover
- ☐ Contract proceeds
- ☐ Family remittances
- ☐ Gifts
- ☐ Interest Income
- ☐ Donations
- ☐ Loan proceeds/repayment
- ☐ Salary
- ☐ Others (specify) .....

Anticipated Volumes Expected/usual average volumes of deposits into the account in rupees per month

- ☐ Less than 100,000 (Approx. US$ 1,000)
- ☐ 100,001 to 500,000 (Approx. US$ 1,000 to 5,000)
- ☐ 500,001 to 1,000,000 (Approx. US$ 5,000 to10,000)
- ☐ Above 1,000,001 (Approx. US$ 10,000) please indicate .....

Monthly Income (LKR)

☐ Less than 50,000 ☐ 50,001 to 100,000 ☐ 100,001 to 200,000 ☐ 200,001 to 500,000 ☐ 500,001 and above

Acceptance of Terms and Conditions: I hereby acknowledge that I am in receipt, read and understood the terms and conditions and agree to comply with them, I authorize you to convert this account on my reaching 26 years and transfer the balance to a normal savings account with this mandate taken as the source document.

Date (D D M M Y Y Y Y) | Signature

For Office Use only

Customer Type | Account Type | Account Officer | Analysis Code | Sundry Analysis Code

* Customer subjected to FATCA ☐ Yes ☐ No (If yes please obtain declaration) | Occupation Code | Default Tax Ref.

Account opened on (System date) (D D M M Y Y Y Y) | Digital int Code | ASC-SC 150 ☐

Documents Obtained

- ☐ A Certified Copy of the NIC/PP-(NIC Number is Mandatory.)
- ☐ Duly completed reference/introduction form CSV172(I)-(for current accounts only)

Account opened by	Scanned by	Authorized by	Reviewed by	ABM/BMG

GRAPHIC SYSTEMS

** If applicable only*

APPLICATION FORM FOR: SEYLAN VISA/ MASTER/ DEBIT/ SEYLAPHONE/ INTERNET/ SMS/ SOCIAL/ MOBILE BANKING

Account Number ☐☐☐☐ ☐☐☐☐☐☐☐☐ ☐☐☐ Date : ______________

Mother's Maiden Name ______________

PLEASE TICK FACILITIES REQUIRED

☐ VISA DEBIT CARD ☐ SEYLAPHONE SMS BANKING (Preferred Mobile Number) ☐☐☐☐☐☐☐☐☐☐ ______ (Customer Initial)

☐ MASTER DEBIT CARD ☐ SMS ALERT INTERNET/ SOCIAL / MOBILE BANKING ☐☐☐☐☐☐☐☐☐☐ (Preferred User ID) ______ (Customer Initial)

Social Banking E-mail Address (Facebook) ______________

I/ WE HAVE READ, UNDERSTOOD AND AGREE TO ABIDE BY RULES & CONDITIONS FOR CONDUCT OF SEYLAN VISA DEBIT/ SEYLAPHONE FACILITIES. I/WE AGREE TO ACCEPT LIABILITY OF ALL TRANSACTIONS PERFORMED UNTIL REPORTING LOSS OF MY/OUR CARD/S

I/WE ACKNOWLEDGE HAVING READ AND UNDERSTOOD THE TERMS AND CONDITIONS APPLICABLE TO SEYLAN INTERNET BANKING / SMS BANKING / SOCIAL / MOBILE BANKING SERVICE AND AGREE TO ABIDE BY THE TERMS AND CONDITIONS LAID DOWN THEREIN. I/WE ALSO AGREE TO THE DEDUCTION OF A LEVY FROM MY/OUR ACCOUNT(S) AS ANNUAL SUBSCRIPTION AND IN AN EVENT OF A RE-ISSUE OR RE-SETTING OF MY INTERNET BANKING/SMS BANKING/SOCIAL/MOBILE BANKING PASSWORD.

DECLARATION BY THE APPLICANT/S FOR ELECTRONIC FUND TRANSFER CARDS (EFTC)

TO : THE CONTROLLER OF EXCHANGE

I/WE (BASIC CARD HOLDER/ JOINT CARD HOLDER) DECLARE THAT ALL DETAILS GIVEN ABOVE BY ME/US ON THIS FORM ARE TRUE AND CORRECT. I/WE HEREBY CONFIRM THAT I/WE AM/ARE AWARE OF THE CONDITIONS IMPOSED UNDER THE EXCHANGE CONTROL ACT IN THE NOTICE PUBLISHED IN THE EXTRAORDINARY GAZETTE NO 1411/5 OF 19TH SEPTEMBER 2005 SUBJECT TO WHICH THE CARD MAY BE USED FOR TRANSACTIONS IN FOREIGN EXCHANGE AND I/WE HEREBY UNDERTAKE TO ABIDE BY THE SAID CONDITIONS. I/WE FURTHER AGREE TO PROVIDE ANY INFORMATION ON TRANSACTIONS CARRIED OUT BY ME/US IN FOREIGN EXCHANGE ON THE CARD ISSUED TO ME/US AS SEYLAN BANK MAY REQUIRE FOR THE PURPOSE OF EXCHANGE CONTROL ACT. I/WE ALSO AFFIRM THAT I/WE UNDERTAKE TO SURRENDER THE DEBIT CARD TO SEYLAN BANK, IF I /WE MIGRATE OR LEAVE SRI LANKA FOR EMPLOYMENT ABROAD. I/WE AM/ARE AWARE THAT THE AUTHORIZED DEALER IS REQUIRED TO SUSPEND AVAILABILITY OF FOREIGN EXCHANGE ON EFTC IF REASONABLE GROUNDS EXIST TO SUSPECT THAT UNAUTHORIZED FOREIGN EXCHANGE TRANSACTIONS ARE BEING CARRIED OUT ON THE EFTC ISSUED ME / US. FOREIGN EXCHANGE ON THE CARD ISSUED TO ME/US AS SEYLAN BANK MAY REQUIRE FOR THE PURPOSE OF EXCHANGE CONTROL ACT.

DD.MM.YY	SIGNATURE OF THE BASIC CARD HOLDER	SIGNATURE OF THE JOINT CARD HOLDER/S

PART 3 - RECOMMENDATIONS

FOR BANK USE ONLY CARD NO. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

I, THE AUTHORIZED OFFICER, HAVE CAREFULLY EXAMINED THE INFORMATION TOGETHER WITH RELEVANT DOCUMENTS GIVEN BY THE APPLICANT/S AND SATISFIED THEY ARE BONA FIDE. THE BANK UNDERTAKES TO EXERCISE DUE DILIGENCE ON THE TRANSACTIONS CARRIED OUT BY THE CARD HOLDER ON HIS/HER EFTC IN FOREIGN EXCHANGE AND TO SUSPEND THE AVAILABILITY OF FOREIGN EXCHANGE ON THE EFTC IF REASONABLE GROUNDS EXIST TO SUSPECT THAT UNAUTHORIZED FOREIGN EXCHANGE TRANSACTIONS ARE BEING CARRIED OUT ON THE EFTC IN VIOLATION OF THE UNDERTAKING AND TO BRING THE MATTER TO THE NOTICE OF THE CONTROLLER OF EXCHANGE.

DD.MM.YY	AUTHORIZED OFFICER	BRANCH STAMP & SIGNATURE OF MANAGER