SEYLAN

Joint Account Opening Master Mandate Form For Savings / Current / Fixed Deposit / PFCA for New Customers

Please open an account as per details provided. Currency Date D D M M Y Y Y Y

Internal Account Number

1 2

For Office Use Only

Type of Account Current Savings PFCA Fixed Deposit Others ..... Please specify

1. APPLICANT DETAILS (PRIMARY ACCOUNT HOLDER)

Title Mr Mrs Miss Dr Rev

Full Name as per NIC/Passport

NIC/Passport Number Date of Issue D D M M Y Y Y Y Gender Male Female

Date of Birth TIN/Tax File Number

*CITIZENSHIP DETAILS / NATIONALITY DETAILS

Sri Lankan Dual Citizen Foreign National If dual citizen or foreign national, please specify the country / countries

(1) (2)

*VISA DETAILS (APPLICABLE FOR FOREIGN NATIONALS)

Parent Country Visa Expiry Date D D M M Y Y Y Y Passport Expiry Date D D M M Y Y Y Y

Resident Country Passport Issued Country

*Reason to open account in Sri Lanka (for non residents only)

* IF subject to FATCA obtain declaration

ADDRESS

Permanent Address

Postal code District

DESIGNATED CONTACT DETAILS

Mobile (1) + 9 4 7 (2)

Home Fax

Business / Office (1) (2)

Email

WhatsApp

EMPLOYER DETAILS

Occupation/ Designation

Employer's Name & Address

MONTHLY INCOME

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

1. Are you Involved in politics / hold a senior management position in the government / government related Institution? Yes No

2. Are you in any way related to a person referred above? Yes No

2. APPLICANT DETAILS (ACCOUNT HOLDER 02)

Title Mr Mrs Miss Dr Rev

Full Name as per NIC/Passport

NIC/Passport Number Date of Issue D D M M Y Y Y Y Gender Male Female

Date of Birth TIN/Tax File Number

*CITIZENSHIP DETAILS / NATIONALITY DETAILS

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*VISA DETAILS (APPLICABLE FOR FOREIGN NATIONALS)

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Occupation/ Designation

Employer's Name & Address

MONTHLY INCOME

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

1. Are you Involved in politics / hold a senior management position in the government / government related Institution? Yes No

2. Are you in any way related to a person referred above? Yes No

SOURCE/S OF THE ANTICIPATED CREDITS IN TO THE ACCOUNT

Sales / Business Turnover | Rent Income | Investment Proceeds

Family Remittances | Scholarships (Local / Foreign) | Savings

Sale of Property / Assets | Salary / Professional Income | Others

Membership Fee | Business Profit

For others, please specify

3. FREQUENCY OF STATEMENTS (Not applicable for Passbook Savings Accounts)

Monthly e-Statement (Free of charge for all Accounts) or Paper Statement Frequency Monthly* (Free of charge for Current Accounts only)* Quarterly Half - Yearly

4. PURPOSE OF OPERATING THE ACCOUNT

Business Transactions | Loan Repayment | Savings

To Facilitate Family Inward Remittances | Domestic Necessity | To Facilitate Charity Services

To Collect Employment and Professional Income | Share Transactions / Investments | Other (Please specify) ……

Expected mode of Transaction: Cash | Cheques | Swift | CEFT | RTGS | Mobile Banking | Internet Banking | Transfers / Inward Remittances | SLIPS

Anticipated Credits in to the Account (per month):

Less than 100,000 (Approx. USD 1,000)

100,001 to 500,000 (Approx. USD 1,000 to 5,000)

500,001 to 1,000,000 (Approx. USD 5,000 to 10,000)

1,000,001 to 5,000,000 (Approx. US$ 10,000 to 50,000)

Above 5,000,001 (Approx. US$ 50,000) please indicate

5. JOINT ACCOUNT DETAILS

Joint Account Title

Operating Instructions: Any of us | All of us | Others (Please Specify)

Mailing Address

Mobile + 9 4 7 Home

Email

6. APPLICABLE FOR FIXED / CALL DEPOSITS : DISPOSAL / INTEREST INSTRUCTIONS

Amount Period Months / Days

Pay Interest Monthly ☐ At Maturity ☐ Debit Account Number

Renew at maturity with / without interest for the same period specified above at your ruling rate of interest and credit interest to (Account number)

I/We authorize to email ☐ SMS ☐ my renewal notice/advices to the email address / mobile number (1) given in the Applicant Details

7. DEBIT CARD / INTERNET BANKING

Please tick the facilities required. Visa Debit Card ☐ Master Debit Card ☐ Internet Banking ☐ SMS Alerts ☐ SMS Banking ☐

Name to be Printed on Card

Preferred User ID. (Max 10 characters)
(For Internet Banking)

Mother's Maiden Name

I/We hereby confirm that I/We am/are aware of the conditions imposed under the provision of the foreign exchange act, no. 12 of 2017 (the act) on electronic fund transfer cards (EFTs) 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 the act.
I/we am/are aware that the authorized dealer (bank) is required to suspend availability of foreign exchange on EFTs if reasonable grounds exists to suspect that unauthorized foreign exchange transactions are being carried out on the EFTC issued to me/us and to report the matter to the director- department of foreign exchange.
I/We also affirm that I/We undertake to surrender the EFTCs to Seylan Bank, I/We migrate or leave Sri Lanka for employment abroad, as applicable.

PRIVACY & DATA PROTECTION NOTICE

At Seylan Bank, you are committed to safeguarding my/our personal information with the utmost integrity. To provide me/us with banking services and to ensure compliance with the Personal Data Protection Act (PDPA), No. 9 of 2022, you collect and process my/our data as part of our mutual agreement.

Commitment of the Bank:

- Confidentiality: You manage my/our data according to the Seylan Bank Privacy Notice, which could be reviewed at *www.seylan.lk*, the notice which outlines my/our rights and how you protect my/our identity.
- Service Partners: To offer me/us the best technology and support, you may occasionally share necessary information with your trusted third-party partners, whether located in Sri Lanka or abroad where such partners are strictly bound by your security standards.
- My/Our Authority: We/Us remain in control of my/our information. I/We may withdraw my/our consent for data processing at any time through a formal written request, provided it does not conflict with your legal or regulatory requirements.

Acknowledgement & Consent:

I/We hereby acknowledge that I/we have read and understood the terms above. I/we explicitly consent to Seylan Bank processing my/our personal data and sharing necessary information with authorized third-party providers as described, ensuring the continued delivery and security of my/our banking services.

Communication preferences:

Seylan Bank would keep me/us informed about the latest financial benefits, security updates, and exclusive offers designed for me/us.
Preferred mode of communication:[ ] Email | [ ] SMS | [ ] Voice Call | [ ]

- Opting Out: I/We may stop receiving marketing updates at any time, free of charge, by contacting you at *info@seylan.lk* or following the opt-out instructions in your messages.

I/We agree and indemnify the Bank as follows

- To exercise utmost care and diligence during payment of utility bills and designing accounts for funds transfers to both own accounts and third party accounts and understand and agree that the bank will be under no obligation nor duty to recover any funds already credited either intentionally or unintentionally.
- To indemnity and keep indemnified the bank from and against all actions, claims, demands, liabilities, obligations, losses, damages, costs (including without limitation, interest and legal fees) and expenses of whatever nature (whether actual or contingent) suffered or incurred sustained by or threatened against the bank whatsoever arising from or in connection with or any way relating to the bank in good faith accepting and acting on instructions placed via Seylan Internet/SMS banking as authorized by this indemnity by me/us.
- The within Indemnity shall not be affected and shall continue in full force and affect notwithstanding unless otherwise requested so in writing by me/us and accepted by the bank. Nevertheless transaction(s) performed during the validity of this indemnity shall treat and interpreted under the conditions of this Indemnity.
- The bank may at any time terminate this facility, add or cancel functionalities at its discretion by giving reasonable notice.
- I/We authorize the bank to debit any of my/our account(s) with the bank with all and any amounts which may become payable to the bank pursuant to the within indemnity.
- Where this indemnity is given by two or more parties the liability of such parties to the bank hereunder shall be joint and several.
- This Indemnity will be treated as an integral part of the bank's terms and conditions governing the usage of the bank internet/SMS banking facility.
- To indemnify and keep the Bank indemnified against any and all losses, damages, liabilities, claims, costs and expenses arising from or in connection with the Bank acting upon any communications or instructions received through the designated email address, contact numbers or WhatsApp number specified herein

I/We hereby acknowledge that,
(i) I/We read and understood the instructions above, in relation to the Usage of Debit Card/s.
(ii) I/We agree and indemnify the Bank in connection to the usage of Internet Banking Facility.
(iii) I/We are in receipt, read and understood the terms and conditions in relation to the account.
(iv) I/We have no objection in the Bank verifying the above details from the Department for Registration of Persons and/or other relevant entities.

And I/We agree to comply with (i), (ii), (iii) & (iv) above,

I/We hereby confirm that the information given are true and correct and authorize Seylan Bank PLC to open any account/s herein after requested by me/us using this mandate as the source document.

Customer Signature (Primary Account Holder)

Customer Signature (Account Holder 02)

I hereby confirm that I am in receipt of the following; Debit Card PIN Passbook

Customer Signature (Primary Account Holder)

Customer Signature (Account Holder 02)

8. APPLICABLE FOR CURRENT ACCOUNTS: REFERENCE / INTRODUCTION

Introduced By Title Mr Mrs Miss Dr Rev Seylan Bank Other

Full Name and Address

NIC / Passport Number

Account Number

Fill these areas if the introducer is not a Seylan Bank customer

Bank / Branch

Telephone Number

Occupation / Business

Name & Address of Employer

I certify that I am well acquainted with the above named and I confirm and certify that he / she is suitable person to open and maintain a current account with Seylan Bank PLC

Date D D M M Y Y Y Y

Signature of Introducer

Authorised by (Manager/ Authorised officer)

FOR BANK USE ONLY

Customer's Permanent address confirmed / Customer's Permanent address visited for verification / Customer is personally known to me *(Strike-through whichever is not applicable)*

Signature …… Name and Designation …… Staff No……

Documents Obtained

01. Certified copy of NIC/Passport (for FCY accounts), D/L or PP (with NIC No)	Yes ☐	No ☐
02. Billing Proof (if applicable)	Yes ☐	No ☐
03. Marriage Certificate (if applicable)	Yes ☐	No ☐
04. If PEP EDD Form obtained	Yes ☐	No ☐
05. If FATCA Liable (W9 Form) obtained	Yes ☐	No ☐
06. CRIB reports (for current accounts)	Yes ☐	No ☐
07. Debit card Issued	Yes ☐	No ☐
08. Passbook Issued	Yes ☐	No ☐
09. Internet Banking Activated	Yes ☐	No ☐
10. Customers Screening Completed using AML System	Yes ☐	No ☐
11. For CA - Introducer is a non SBK Customer obtained Independent verification	Yes ☐	No ☐

External Account Number 1

External Account Number 2

Passbook Number

Debit Card Number

Branch Customer Type

Deal Reference

Funding Account

Account Opened by ……

Primary Account Holder Basic Number Joint Account Basic Number

Account Holder 2 Basic Number

Branch Code Period Code Customer Type

Interest Code Deal Type

Authorised by ……
Name ……

Staff ID ……

Grade / Designation ……

Authorised by ……

Name ……

Staff ID ……

Grade / Designation ……