







# **ACCOUNT OPENING FORM – ENTITIES**

Category of Business (Tick as appropriate) Publ	lic Company	Clubs/Societie	s No	n-Governmental Organization(NGO)
Private Company	Government-Owned Orga	ganization	Partnership	Sole Proprietorship
Account Type (Tick as appropriate)				
Current		Currency: RWF	_ \$_ £_ €_	Others:
This form should be completed i Characters and marks should be		wing: A B C		
Branch:		Account No.:		
Company Details (Please con	nplete in BLOCK LETTERS	S and tick where nec	essary)	
Company / Business Name:				
Certificate of Incorporation Nun	nber:			
Date of Incorporation:	Month Year		ion of Incorporation:	
Type/Nature of Business:				
Business Segment: Sector:		Sub	-sector:	
Sub-sub-sector:				
Operating Business Address :				
House/Plot Number:	Village:	:		
Cell:			Sector:	
District:		F	rovince:	
Registered Address: (If different from above)				
Sector:		Distric	:t:	
Province:		Count	y:	
Email Address:				
Website (if any):				
Mobile Number:		Other	mobile No:	
Estimated Annual Turnover				
a) Less than Rwf 200 million	Rwf 200 million - Less tha	an Rwf 2.5 Billion R	wf 2.5 Billion - Less than	Rwf 20 Billion Above Rwf 20 Billion
b) Is Your Company quoted o	n any Stock Exchange?	Yes No		
	yes, indicate which Stock Ex	exchange and the Stock	Symbol:	<del>_</del>
d) Income Frequency: (mandatory)				
Account Service(s) Required (	Please tick applicable op	ption below)		
Corporate Internet Banking Pref				
E-mail Statement Rv     Kindly note that your account w	Wi corporate cara	E-mail Alert  t for your Card(s) once the	SMS Alert (Charges app account is opened.	ly) Token (Charges apply)
Checked e-banking services are	available when the account is o	opened (3rd party transfers	on e-channel will require a	token).
Statement Frequency: Monthly	Quarterly S	Semi-Annually Ar	nnually	
Mobile No.: 0 7  Cheque Book Requisition (Fees Apply	/): 24 leaves 24	(for email statements and alerts)  24 leaves (express)		

\* GTBank Automated Payment System (GAPS) is a secure web-based service that facilitates the processing of Vendor, Supplier or Payroll payment in batches or single payment, using secured connections over the internet.

Cheque Confirmatio	on																							
Cheque Confirmation: Cheque Confirmation Thresho									Yes num co	nfirma	tion th	No nreshol	d is cur	rently	Rwf 2	00,000	))							
If you would like to ha			eshol	d for pre	e-confi	rmati	on, p	lease	e spec	cify tl	ne an	nount	t: Rwf			Τ	Τ	Τ						
(In line with extant law and ex	isting regu	lation)											11001											
I/We hereby acknowledg the above ticked services		ated to	reque	sted serv	ices as	listed	on K	ey Fa	ct Stat	temer	nt and	l auth	orize	Guara	inty T	rust E	Bank (	R war	nda) p	olc to c	reate	and/	or act	ivate
	Nam	e				_				Signa	ature				-									
	,																Da		Month			١	/ear	
Key Contact Person(s	5)																							
1. Full Name:																								
Job Title:																								
Email:																								
Mobile Number:																								
Office Address:																								
2. Fu <b>ll</b> Name:																								
Job Title:																								
Email:																								
Mobile Number:																								
Office Address:																								
									•	•														
3. Full Name:																								
Job Title:																								
Email:																								
Mobile Number:																								
Office Address:																								
D-4-11 6 A 6	·	4.																						
Details of Account S	ignatoi	ry 1:	[																					
Title:		Surna	me:																					
First Name:																								
Other Name(s):																								
Marital Status: Single (please tick 'V' as appropriate	e)	Marrie	ed		Others (please sp	ecify)											Ge	nder:	Ma	ale _		Fem	ale	
Date of Birth:		Month		Year			P <b>l</b> ac	e of	Birth	:														
Mother's Name:																								
Name of Next of Kin:																								
Sector: (Rwandans only)												Dist (Rwan	t <b>Rct:</b> dans or	nlv)										
Tax Identification No.:		İ									-	(vaii	30113 01	71		•		•	-					
Tax Identification No.:																								

Means of Identification: National ID Card: (Rwandans only)		Р	assport	:		Driv	/ing Li	cen	se:							
National ID Card/ Passport / Driving License num	ber:															
Issue Date: (Where applicable)  Day  Month  Year		·		Exp (Whe	oiry Date	:	Day		Month				Year			
Occupation:			S	itatus/	Job Tit <b>l</b> e	::										
Position/Office of the Signatory:																
Nationality: Rwandan Othe	ers	(Ple	ase spe	cify)_												
Resident Permit No.: (for non-Rwandans)											1 -					
Permit Issue Date: (for non-Rwandans) Day Month	Year				Pern (for no	nit Ex on-Rwa	piry Dandans)	ate:	Da	ıy		Month		Ye	ar	
House/Plot Number:	9	Street	name:													
Village:				Ce	ell:				'							
Sector:				Dis	sctrict:											
Province:																
Mailing Address: (if different from the Residential Address)																
(if different from the Residential Address)																
Mahila Na				Other	Mobile	No:										
Mobile No.:				Other	WIODIIC	140.										
E-mail Address:																
I hereby attest that the above information is true ar	nd complet	е														
Signature:							Da	ate:	Day			/onth		Yea	r	
Official use only																
Verified By (Full name)																
Signature:							Da	ite:	Day		N	fonth		Yea		
Details of Account Signatory 2:																
Title: Surname: (Please specify)																
First Name:																
Other Name(s):																
Marital Status: Single Married (please tick 'V' as appropriate)	Others: lease specify)									Gei	nder:	Ma	le _	Fem	ale	
Date of Birth: Day Month Year		Place c	of Birth:													
Mother's Name:																
Name of Next of Kin:																
Sector: (Rwandans Only)					Distri (Rwand		nly)									
Tax Identification No.:																

Means of Identification: National ID Card: (Rwandans only)		Passport	:	Driving License:		
National ID Card/ Passport / Driving License num	ber:					
Issue Date: (Where applicable)  Day  Month  Yea	ır		Expiry Date: (Where applicable)	Day Mo	nth Ye	ar
Occupation:		S	tatus/Job Title:			
Position/Office of the Signatory:						
Nationality: Rwandan Othe	ers	(Please spec	cify)			
Resident Permit No.: (for non-Rwandans)						
Permit Issue Date: (for non-Rwandans)	Year		Perm (for no	it Expiry Date: n-Rwandans)	Day Month	Year
Residential Address						
House/Plot Number:	Stre	eet name:				
Village:			Cell:			
Sector:			Disctrict:			
Province:						
Mailing Address: (if different from the Residential Address)						
Mobile No.:			Other Mobile N	o:		
E-mail Address:						
I hereby attest that the above information is true a	nd complete					
Signature:				Date:	Day Month	Year
Official use only						
Verified By (Full name)						
Signature:				Date:	h Day Mont	Year
					Day Mont	rear
Details of Account Signatory 3:						
Title: Surname: (Please specify)						
First Name:						
Other Name(s):						
Marital Status: Single Married (please tick 'V' as appropriate)	Others: please specify)				Gender: Mal	e Female
Date of Birth: Month Year	PI	lace of Birth:				
Mother's Name:						
Name of Next of Kin:						
Sector: (Rwandans only)			Dist (Rwan	rict: ndans only)		
Tax Identification No.: (If available)						

Means of Identification: National ID Card: Passport: Driving License:	
National ID Card/ Passport / Driving License number:	
Issue Date: (Where applicable)  Day  Month  Year  Expiry Date: (Where applicable)  Day  Month  Year	
Occupation: Status/Job Title:	
Position/Office of the Signatory:	
Nationality: Rwandan Others (Please specify)	
Resident Permit No.: (for non-Rwandans)	
Permit Issue Date: (for non-Rwandans)  Residential Address  Permit Expiry Date: (for non-Rwandans)  Day  Month  Year  Year  Year	
House/Plot Number: Street name:	
Village: Cell:	
Sector: Disctrict:	
Province:	
Mailing Address: (if different from the Residential Address)	
Mobile No.:  Other Mobile No:	
E-mail Address:	
I hereby attest that the above information is true and complete	
Signature: Date: Day Month Year	
Official use only  Verified By (Full name)	
Date:	
Signature: Day Month Year	
Details of the Directors/ Executives/Promoters/ Principal Officers	
1. Title: Surname:	
(Please specify)  First Name:	
Other Name(s):	
Date of Birth: Gender: Male Female	
Mother's Name:	
Means of Identification:  National ID Card:  (Rwandans only)  Passport:  Driving License:	
National ID Card/ Passport / Driving License number:	
Issue Date: (Where applicable)  Day Month  Year  Day Month  Year  Day Month  Year	
Occupation: Status/Job Title:	_
Position/Office of the Signatory:	
Nationality: Rwandan Others (Please specify)	

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House/Plot Number:	Str	eet n	ame:				<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>						
Village:					Cell:								<u> </u>		<u> </u>		
Sector:				Di	strict:												
Province:																	
Mobile No.:			(	Other N	Mobile	No.:											
E-mail Address:																	
Signature:								ate:	Di	av		Month			Ye	ar	
2.																	
Title: Surname: Please specify)																	
First Name:																	
Other Name(s):																	
Date of Birth: Month Year										Ge	nder	: Ma	le _		Fem	ale	
Mother's Name:	1																
Means of Identification: National ID Card: (Rwandans only)		Pass	port:			Drivi	ng Li	cens	e:								
National ID Card/ Passport / Driving License number:																	
Issue Date: (Where applicable)  Day  Month  Year				Expir (Where a	y Date: pplicable)	D	ау		Month			Ye	ar				
Occupation:			S	tatus/J	ob Tit <b>l</b> e	:											
Nationality: Rwandan Others		(Pleas	e spe	cify)													
Residential Address																	
Residential Address House/Plot Number:	Stre	et naı	me:														
	Stre	et nai	me:		Cell:												
House/Plot Number:	Stre	et nai	me: [	Di	Cell:												
House/Plot Number:  Village:	Stre	et nai	me: [	Di													
House/Plot Number:  Village:  Sector:  Province:	Stre	et nai				D.: [											
House/Plot Number:  Village:  Sector:  Province:  Mobile No.:	Stre	et nai			strict:	D.: [											
House/Plot Number:  Village:  Sector:  Province:	Stre	et nai			strict:	D.: [	D	ate:	Da			Month			Yea		
House/Plot Number:  Village:  Sector:  Province:  Mobile No.:  E-mail Address:	Stre	et nai			strict:	) )	D	ate:	Da	y		Month			Yea		
House/Plot Number:  Village: Sector: Province:  Mobile No.: E-mail Address: Signature:	Stre	et nai			strict:	D.: [		ate:	Da	у		Month			Yea		
House/Plot Number:  Village:  Sector:  Province:  Mobile No.:  E-mail Address:  Signature:  Surname:	Stre	et nai			strict:	D.: [	D	ate:	Da	y		Month			Yea		
House/Plot Number:  Village: Sector: Province:  Mobile No.: E-mail Address: Signature:  Title: (Please specify)  Surname:	Stre	et nai			strict:	)	D	ate:	Da	y		Month			Yea	r	
House/Plot Number:  Village: Sector: Province:  Mobile No.: E-mail Address: Signature:  3. Title: (Please specify) First Name: Other Name(s): Date of Birth:	Stre	et nai			strict:	D.: [		ate:	Da			Month : Mai	lle		Yea		
House/Plot Number:  Village: Sector:  Province:  Mobile No.:  E-mail Address:  Signature:  3.  Title:  (Please specify)  First Name:  Other Name(s):	Stre	et nai			strict:	D.: [		ate:	Day				lle				
House/Plot Number:  Village: Sector:  Province:  Mobile No.:  E-mail Address:  Signature:  3.  Title:  (Please specify) First Name:  Other Name(s):  Date of Birth:  Day  Month  Year	Stre	et nai	Oth		strict:	Drivir							lle				
House/Plot Number:  Village: Sector: Province:  Mobile No.: E-mail Address: Signature:  3. Title: (Please specify) First Name: Other Name(s): Date of Birth:  Day Month Year Mother's Name:  Means of Identification: National ID Card:	Stre		Oth		strict:								lle				

Occupation:					S	tatus	'Job T	it <b>l</b> e:										
Nationality: Rwandar	n	Others		(P <b>l</b> ea	se spec	cify)_												
Residential Address		٦		_	ſ													
House/Plot Number:				Street na	ame:													
Village:							Cell											
Sector:						D	istric	t:										
Province:																		
Mobile No.:					Oth	her N	1obile	No.:										
E-mail Address:																		
Signature:										Date:		Day		Month		Year		
Additional Details																		
1. Name of affiliated company:																		
Country of incorporation:																		
2. Name of affiliated company:																		
Country of incorporation:																		
3. Name of affiliated company:																		
Country of incorporation:																		
Accounts held with other ba	nks																	
S/N Name and Address of E	ank/Branch	1			Accour	nt Na	me			Ac	coun	t Num	ber		Statı Activ	ıs : e/Do	rman	t
S/N Name and Address of B	ank/Branch	1			Accour	nt Na	me			Ac	coun	t Num	ıber		Stati Activ	is : re/Do	rman	t
	ank/Branch	1			Accour	nt Na	me			Acc	coun	t Num	ıber		Statu Activ	is : re/Do	rman	t
1	ank/Branch				Accour	nt Na	me			Acc	coun	t Num	nber		Statu Activ	is : ve/Do	rman	t
2	ank/Branch				Accour	nt Na	me			Acc	coun	t Num	nber		Statu	is : re/Do	rman	t
1 2 3 4	ank/Branch				Accour	nt Na	me			Acc	coun	t Num	nber		Statu	is : e/Do	rman	t
1 2 3 4 ADDITIONAL DETAILS											coun	t Num	nber		Statu	is: e/Do	rman	t
1 2 3 4 ADDITIONAL DETAILS Purpose of Account: Saving	gs	Investme Busine	ss —	Tran	saction	nal		Other	s (Spe		coun	t Num	nber		Statu	is : e/Do	rman	t
1 2 3 4 ADDITIONAL DETAILS Purpose of Account: Saving Source of Funds: Investment	gs	Investme	ss —	Tran		nal		Other	s (Spe		coun	t Num	hber		Statu	is : re/Do	rman	t
1 2 3 4 ADDITIONAL DETAILS Purpose of Account: Saving	gs nt	Investme Busine Procee	eds	Tran Othe	saction rs (Spe	nal		Other	s (Spe		coun	t Num	hber		Statu	is: re/Do	rman	t
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate a. Mandate authorisation/Com	gs nt	Investme Busine Procee	eds tick as a	Tran Othe	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Statu	is: re/Do	rman	t
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate a. Mandate authorisation/Com	gs nt bination Ru	Investme Busine Procee	eds tick as a	Tran Othe appropria	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Statu	is: re/Do	rman	t
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate  a. Mandate authorisation/Com Sole Signatory Two b. Signatories  i. Title:	gs nt bination Ru	Investme Busine Procee	eds tick as a	Tran Othe appropria	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Ple	is: re/Do	ifix	
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate  a. Mandate authorisation/Com Sole Signatory Two  b. Signatories	gs nt bination Ru	Investme Busine Procee	eds tick as a	Tran Othe appropria	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Ple	ase af	ifix	
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate  a. Mandate authorisation/Com Sole Signatory Two  b. Signatories  i. Title:  (Please specify)	gs nt bination Ru	Investme Busine Procee	eds tick as a	Tran Othe appropria	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Ple	ase af	ifix	
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate  a. Mandate authorisation/Com Sole Signatory Two  b. Signatories  i. Title:  (Please specify) Surname:	gs nt bination Ru	Investme Busine Procee	eds tick as a	Tran Othe appropria	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Ple	ase af	ifix	
ADDITIONAL DETAILS  Purpose of Account: Saving Source of Funds: Investment Account Opening Mandate  a. Mandate authorisation/Com Sole Signatory Two  b. Signatories  i. Title:  (Please specify) Surname:  First Name:	gs nt bination Ru	Investme Busine Procee	eds tick as a	Tran Othe appropria	sactior rs (Spe	nal			s (Spe		coun	t Num	hber		Ple	ase af	ifix	

ii. Title:  (Please specify)	Please affix passport photo
Surname:	pussport prioto
First Name:	
Other Name(s):	
Class of Signatory (Please indicate class in the box provided)  Signature:  Date:  Day  Month	Year
iji. Title:  (Please specify)	Please affix passport photo
Surname:	
First Name:	
Other Name(s):	
Class of Signatory (Please indicate class in the box provided)  Signature:  Date:  Day  Month	Year
Shareholding Structure	
No. Shareholder Names Shareholder ID/Passport Number	% Of Shares
2	+

No.	Shareholder Names	Shareholder ID/Passport Number	% Of Shares
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

In case of more than 10 shareholders please provide them on a separate form.

### **DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP (UBO)**

An Ultimate Beneficial Owner is a natural or legal person who ultimately owns or controls a customer or another person on whose behalf a transaction is being conducted.

**Details of Ultimate Beneficial Owners:** 

### **ULTIMATE BENEFICIAL OWNER (ENTITIES)**

I/We hereby declare that the above-named company is ultimately owned by / controlled by / its transactions are conducted for the following listed entities:

No.		COMPANY/ENTITY 1	COMPANY/ENTITY 2	COMPANY/ENTITY 3
1	Company / Entity names			
2	Registered Office / Principal Office			
3	Legal form and law governing the company			
4	Register in which the UBO is registered			
5	Nature of Business			
6	% of Shares			
7	Incorporation ID			

In case of more than 3 entities please provide them on a separate form.

#### **ULTIMATE BENEFICIAL OWNER (INDIVIUALS)**

I/We hereby declare that the above-named company is ultimately owned by the following listed individuals:

	INDIVIDUAL A	INDIVIDUAL B	INDIVIDUAL C
First Name			
Other Names			
Nationality			
ID/Passport no.			
Residential Address			
Email Address			
Position in Legal company			
% Of shares / Voting Right			

In case of more than 3 individuals please provide them on a separate form.

#### **DECLARATION OF LANGUAGE OF CHOICE**

Declaration of Language of choice	Déclaration de la langue de Choix	Guhitamo Ururimi Rukoreshwa
I/We declare that English is our chosen language for use for the requested services and communication being messages, mails or another form of communication.	Nous déclarons que l'Anglais est notre langue choisie pour l'utilisation des services et communications demandés, qu'il s'agisse de messages, de courriers ou d'une autre forme de communication.	Duhisemo Icyongereza nk'ururimi ruzajya rukoreshwa muri serivisi dusabye no mu butumwa tuzajya duhana haba ubutumwa bugufi, kwandikirana cyangwa uburyo buryo bwose buzakoreshwa.

#### **Terms and Conditions**

We, the within named company hereby request and authorise you to:

- 1. Open a Guaranty Trust Bank (**Rwanda**) plc account in our name:
- 2. Honour all cheques or other orders which may be drawn on the said account until the Bank receives a written notice to the contrary, provided such cheques or orders are signed by the authorized signatories as stated in our Mandate Card and to debit such cheques or orders to the said account and in consideration we hereby irrevocably and unconditionally agreed and undertake as follow:
  - a. To assume full responsibility for the genuineness or correctness and validity of all signatures and/or other documents to deposited in respect of our account with the Bank.
  - b. That advances to the Company by way of overdraft discount, loan mortgage or otherwise credit facilities in any other form, as well as the issuance of guarantees by you from time to time may be requested by any authorized signatory(ies) specified below.
  - c. That the Bank may at any time without notice, notwithstanding any settlement of account of any matter whatsoever combine or consolidate all or any of the then existing accounts(s) opened in the name of the company or a related party and set-off, appropriate or transfer any such sum(s) standing to the credit of any such account(s) towards the satisfaction of any liabilities of the company whatsoever, whether such liability be present or future, actual or contingent, primary or collateral and several or joint.
  - d. "Related Party" means an entity that is: a subsidiary or an affiliate of the company; or an individual (person) that is a director/shareholder of the company; or an entity in which the company is a shareholder.
  - e. That in the absence of any directive to the contrary, any account(s) subsequently opened in the name of the Company shall be operated and dealt with upon the terms set out above in so far as the same may be applicable.
  - f. That no liabilities whatsoever shall be ascribed to the Bank for funds handed to staff of the Bank outside banking hours or outside the Bank's premises, unless by specific agreement in writing with the Bank, and we hereby indemnify and keep the Bank indemnified against all loss, claim, damage or action that may arise therefrom.
  - g. That we have been notified by the Bank and we are aware of the necessity of safeguarding our cheque book and other banking instruments so that unauthorized persons are unable to gain access to the cheque book and any of the other banking instruments as failure or negligence on our part may lead to any loss arising therefrom, for which we shall be solely responsible and the Bank is hereby absolved of all responsibilities.
  - h. That we shall notify the Bank of any disagreement with entries on our Bank statement within 15 days of receipt of the Bank statement via any medium including but not limited to electronic mail, printed statement or internet banking screen shot, failing which the Bank is expressly permitted to assume that the statement is correct, and that we have no objections.
  - i. That the Bank may close any of our accounts with the Bank, 7 days after dispatch of notice in writing, of the Bank's intention to do so, to us at our last known address.
  - j. That the Bank may act on any instruction to counter and/or revoke any cheque, draft or other instrument before payment is effected.
  - k. That we hereby indemnify and keep the Bank indemnified against all loss, claim, damage, action, liability or request for repayment of any loss or damage to funds, instruments or documents deposited with the Bank, which occurs as a result of any Government order, law, levy, tax, embargo, moratorium, exchange restriction and/or other causes beyond the Bank's control.
  - 1. That all funds standing to our credit in our accounts are payable on demand only in such currency as they were remitted or deposited.

- m. That we shall be bound by any notification of change in conditions governing our account(s) which is communicated or sent to us at our last known address and such notice, letter or correspondence shall be considered as delivered 7 days from the date of dispatch, and its content shall be binding.
- n. That the Bank is under no obligation to honour any cheques drawn on this account unless there is sufficient fund in the account to cover the value of the said cheques, and we understand and agree that such cheque may be returned to us unpaid. In the event that such cheque(s) is/are honored and paid for any reason whatsoever, we hereby undertake to pay the Bank on demand the value of said cheques, plus bank charges, interest or fees as the Bank may require.
- o. That where the Bank, in its absolute discretion, has reasonable grounds to suspect that any cheque, instruction or instrument purportedly issued by us contains any fraudulent element of whatsoever nature, the Bank may refuse to honor such instrument.
- 3. I/we hereby authorize the Bank to disclose at any purpose, any information whatsoever relating to my/our personal data, accounts Transactions or dealings with the Bank, to any of the Bank's offices, branches, representantive offices, affiliates, subsidiaries, wherever located, for the purposes of administration of my/our account or to any government, regulatory, statutory, judicial or quasi-judicial authority and agent or contractor engaged to perfom services for the Bank's benefit.
- 4. We hereby affirm that we are aware that it is crime under the laws and BNR regulations to issue cheques without sufficient funds in our account in the value of our cheques and we hereby undertake to bear all consequences and/or liabilities arising from our instructions to the Bank o pay on cheques drawn on our account where such account is not sufficiently funded with the value of our cheques.
- 5. We also agree that in addition to any general lien or similar right which you may as bankers may be entitled to by law, you may at anytime and without notice to us combine or consolidate all or any of our account liability to you and set-off or transfer any sum(s) standing to our credit in any one or more of such other respect, towards the satisfaction of any liability of the company whatsoever, whether such liability be actual or contingent, primary or collateral and several or joint.
- We undertake that we shall not release cash to or issue cheques in favour of any staff of the Bank, or transfer money into the account of any staff of the Bank. In the event that we write such cheques or make such transfers, the Bank is hereby indemnified against all loss, claim, damage, action, liability or request for repayment which may arise therefrom;
- 7. Foreign currency cash withdrawals from my/our accounts shall be subject to availability
- We acknowledge that the Bank consults with various bureaus and reference agencies, and may be required to disclose the Company's information to these credit bureaus for the purpose of conducting checks on the Company. We hereby irrevocably and unconditionally grant our consent to the Bank and expressly authorizes such disclosure of any or all information on our account(s)/transaction(s) with the Bank, to such credit bureau and reference agencies whether based locally or abroad, including information on our Directors and other personnel, transactions and conduct on the account together with details of any non-payment or delayed payments as the Bank may deem necessary. The consent herein given discharges the Bank from all liabilities, claims, and damages for such disclosure made by the Bank to any credit bureau pursuant to the consent herein granted.
- 9. Subject to the provisions of laws, rules and/or regulations, the customer hereby agrees that the Bank or any of its subsidiaries and/or affiliates can share information related to their account(s) with any domestic or overseas regulators or tax authorities where necessary to establish their tax liability in any juridiction. Where required by any domestic or overseas regulators or tax authorities, the customer agrees that the Bank may withhold and pay out from their account(s) such amounts as may be required according to applicable laws, rules and regulations.
- 10. The customer acknowledges that the Bank may from time to time provide information to the customer on products and services updates, new tariff, new product and services offered by the Bank and other marketing and promotional information. This information may be passed by SMS (Short Message Service), flash messages, and any other available communication channels. The Customer by accepting these Terms and Conditions give consent that the Bank may from time send the information stated under this section to the Customer. The customer hereby accepts that no communication will be effective until it is officially received by the Bank. A communication from the Bank to the Customer is, however, deemed to be effective and received:
  - In the case of a letter, immediately after posting; and
  - In the case of electronic or other channels of communications, on completion of transmission to the relevant electronic address provided by the customer herein
- 11. The customer acknowledges that the Bank will take reasonable and practical steps to ensure that its account has adequate security controls to manage the risks in operating the account.
- 12. The customer hereby agrees that it shall use only its credentials registered with the Bank to access the account. The Customer shall not permit any other party to access its account or leave the account details unattended. The customer shall not allow third-parties to access its account.
- 13. The customer shall be liable for any unauthorized access its account and hereby absolves the Bank of all and any liability or responsibility in this regard. The customer undertakes not to make any claim against the Bank for losses, damages or actions arising out of the unauthorized access to its account due to factors beyond the Bank's control.
- 14. The customer shall further indemnify the Bank for all losses, damages, actions, and liability arising as a result of the Customer's failure to comply with these Terms and Conditions.
- 15. The Customer understands and acknowledges that in the event of loss or misplacement of account details, it can be misused to view the account-related information and/or carry out unauthorized financial transactions. To this end, the customer shall indemnify the Bank for any such misuse or any loss arising out of the same. The customer shall not hold the Bank responsible for any loss that it may suffer in these circumstances.

- 16. I/We also agree that my/our failure to disclose any material fact/information known to me/us now or in future or my/our failure to remedy any deficiency in documents/information/other details, may invalidate me/us from transacting in the account and the Bank would be within its right to put restrictions in the operations of my account or to close it or to report to any regulator and/or any authority designated by the Government of Rwanda for the said purpose or take any other action as may be deemed appropriate by the Bank.
- 17. I/We also agree to provide to the Bank any other information that are called upon due to any change in law either in Rwanda or abroad in relating to the operation or maintenance of the account.
- 18. I/We shall indemnify the Bank from any loss/damage that may be caused to the Bank on account of any defect/mistake in the details provided herein or on account of providing incorrect or incomplete information by me/us.
- 19. I/We undertake to submit data/information together with fresh KYC documents for update of KYC details at periodical intervals as may be required by the Bank.
- 20. I/We understand that the account will be activated and debits will be allowed only after completion of Customer Due Diligence relating to KYC by the Bank
- 21. I/We undertake the responsibility to declare and disclose immediately and in no case beyond 30 days (except in case of force majeure) from the date of change, any changes that may take place in the information provided before while opening the bank account. I/We also hereby undertake to inform the Bank on any change in my communication address.
- 22. I/We affirm and declare that I/We have read over and understood the terms and conditions of Guaranty Trust Bank (Rwanda) plc and those relating to various services offered by the Bank including but not limiting to debit card/internet banking/Mobile Banking. I /We agree to abide by the same as amended/modified from time to time by the Bank/ Regulator/ Government published through circulars, notifications, notice board/ websites/ newspaper publications.
- 23. I/We waive the rights, if any, to have personal notice in respect of such amendments/ modifications. I/We agree that the transactions and requests executed in my/our account(s) by me/authorized person through internet, mobile, under my/our User ID and password/PIN/OTP will be legally binding on me/us & I/We am/are responsible for the maintenance of secrecy and confidentiality of the authentication credentials and any other information/ details/OTP/PIN, in such matters. I/We agree that Bank has got all the rights to debit my/our account for any service charge, expenses or other dues which the Bank is entitled/ liable to recover from me. I/We also authorize the Bank and agree to close/ discontinue my account without any notice to me in case of any violation of laws/rules/ regulations or terms and conditions of maintaining the account.
- 24. I/We expressly understand that the Bank in its sole discretion may change or amend its tariff (commission, fees and interest rate) applied on products and services mentioned herein at any time depending on the prevailing money market conditions in Rwanda upon completion of the 30 days' notice of changes.
- 25. I/We further authorise the Bank, its parent bank, its third party service providers and its contracted agents to use, store, process, share, disclose and transfer (whether within or outside the jurisdiction concerned) all information relating to me/us and my/our accounts, without limitation, and other credit information maintained with or obtained by the Bank and its subsidiaries (including those obtained from credit reference agencies) as they shall consider necessary in connection with administering my/our account. I/We acknowledge and agree that any such sharing or transfer of information will be on a confidential basis and that the Bank, its parent bank or other third party service providers, may disclose information if required or permitted by any law, rule or regulation or at the request of any public or regulatory authority or if such disclosure is required for the purposes of preventing fraud. I/We agree that the consent above is to be read in conjunction with the terms and conditions contained in this Bank's account opening form.

## **Corporate Internet Banking - GAPS**

#### **User Roles & Functions**

Role Code	Users	Responsibilities
ADMIN	System Administrator	Responsible for user management and activity audit.
UPL	Uploader	<ul> <li>Initiates all transactions and file upload</li> <li>Review reports and account information</li> </ul>
REV	Reviewer	■ 1st level review and authorization
АРР	Approver	<ul> <li>■ Must be authorized signatories of the bank account. Structure may be sequential</li> <li>(A → B → C) or non-sequential (Any to sign, either to sign, two to sign, e.t.c)</li> </ul>
VIEW	Viewer	Review end of day activities and reports

## **User Contact Information**

Kindly provide the details for each user and select role below:

Kindly provide the	details for each use	er and select	Tole below.						
First/Last Na	me	Role Code	Approval Limit	E-	mail Address		Mobi	le Numbe	
Token Request									
	II require tokens to	sign in to GA	.PS						
Kindly take this as	an authority to issu	e	_ unit(s) of toker	ns for our users.					
Token should be re (A duly signed indemnity	eleased to:		(Name)						
Mode of Identifica	tion:								
Declaration									
hereby apply for th supplied are the b We have read the	e opening of an acco asis for opening suc terms and condition	ount with Gua h account an ns governing	aranty Trust Bank (F d We therefore w the operations of	Rwanda) plc. We u arrant that such i	nformation is co	orrect.			
	•	·							
1 Name of	Authorised Officer	/ Director		Signature		Day	Month		Year
				J					
2									
	Name of Secretary			Signature		Day	Month		Year
			C	Company seal					
In the presence of	:								
Name:									
Address:									
Occupation:									
Signature:					D	ate:			

## **FOR BANK USE ONLY**

Customer Segmentation			
Customer Classification Code: Desc	ription:		
Economic Sector Code: Desc	ription:		
Type of Depositor Code: Desc	ription:		
Risk Classification			
Low Risk Medium Risk	High Risk		
Authentication for Politically Exposed Person	s		
Is the customer a Politically Exposed Person? Yes	No No		
If yes, please provide details:			
Customer Address Verification/ Call Memo (If a	applicable)		
Address Visited:			
Comment on Location - Landmarks:			
Location - Colour of building:			
Location - Description of building:			
Full Name of Visiting Staff:	Signature:	Day Month	Year
Certification		,	
I hereby confirm that the information contained he	rein is correct and a true representation of the Cust	:omer's profile	
Full Name:	— Signature:	Day Month	Year
Deferral/Waiver of Documents (if any) author	rised by	Day Month	Year
Full Name:	Signature:	Day Month	Year
Documents Required			
	Checked	<b>Deferred</b> (Please specify deferral period)	Waived
1) Account opening form duly completed			
2) Specimen signature card duly completed			

3)	Copy of RDB/RGB Certificate of Registration					
4)	Board Resolution					
5)	Copy of Memorandum and Articles of Association (Certified by Public notary: Optional)					
6)	Copy of RDB full registration information of Domestic Compan	у				
7)	Two (2) passport sized photographs of each Signatory to the account with name written on the reverse side					
8)	Introduction Letter (where applicable)					
9)	Resident Permit or work permit (for Non-Rwandans)					
10)	Search Report					
11)	Power of Attorney (where applicable)					
12)	Letter of Indemnity (where applicable)					
13)	Proof of Company Address					
14)	Business Premises visitation certificate					
15)	Proof of identity of all Signatories and Directors/Officers whose name appear on the account opening form/document (Preferred Identit card are Int'l Passport, National Identity Car					
16)	Proof of Address of all Signatories and Directors/Officers whose name appear on the account opening form/document Utility bi (Certified true copy is acceptable if original is not held)	e III				
17)	Others (please specify)					
Account Opening Authorised						
A/C	Manager's Code:					
A/C (	Opened by: Name:	Signature :		Date:		
Аррі	oved by: Name:OPERATIONS HEAD	Signature :		Date:		