



* 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 Confirmation

Cheque Confirmation: Will you like to pre-confirm your cheques? Yes No

Cheque Confirmation Threshold: (If the answer to the above is yes, please note that the minimum confirmation threshold is currently TZS1,000,000.00

If you would like to have a higher threshold for pre-confirmation, please specify the amount: (TZS)

Key Contact Person(s)

1. Full Name:

Job Title:

Email:

Mobile Number:

Office Address:

2. Full Name:

Job Title:

Email:

Mobile Number:

Office Address:

3. Full Name:

Job Title:

Email:

Mobile Number:

Office Address:

Details of Account Signatory 1:

Title:

Surname:

First Name:

Other Name(s):

Marital Status: Single Married Others:

Gender: Male Female

Date of Birth:

Place of Birth:

Mother's Maiden Name:

Name of Next of Kin:

District:

Region:

Tax Identification No.:

Means of Identification:

Identification Number:

ID Issue Date:

ID Expiry Date:

Occupation:

Status/Job Title:

Position/Office of the Signatory:

Nationality :

Tanzanian

Others

(Please specify)_____

Social Security No.:

Permit Issue Date:

(for non-Tanzanians)

Day

Month

Year

Permit Expiry Date:

(for non-Tanzanians)

Day

Month

Year

Do you have residency or citizenship of any other country: YesNoIf yes, which country: _____

Residential Address

House/Plot Number:Street Name:

Nearest Bus Stop/Landmark:

Street:District:

Region:

Mailing Address:

(If different from the Residential Address)

Mobile Number:Phone Number:

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) _____

Signature: _____

Date:

Day

Month

Year

Details of Account Signatory 2:

Title:Surname:

(Please specify)

First Name:

Other Name(s):

Marital Status: SingleMarriedOthers:

(please specify)

Gender: MaleFemale

(please tick ✓ as appropriate)

Date of Birth:

Day

Month

Year

Place of Birth:

Mother's Maiden Name:

Name of Next of Kin:

District:

(Tanzanians only)

Region:

(Tanzanians only)

Tax Identification No.:

(If available)

Means of Identification:Identification Number:

ID Issue Date:

Day

Month

Year

ID Expiry Date:

Day

Month

Year

Position/Office of the Signatory: _____

Nationality: ☐ Tanzanian ☐ Others (Please specify) _____

Social Security No.:

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Permit Issue Date: (for non-Tanzanians)

Day		Month		Year	

Permit Expiry Date: (for non-Tanzanians)

Day		Month		Year	

Do you have residency or citizenship of any other country: Yes ☐ No ☐

If yes, which country: _____

Residential Address

[illegible]

Nearest Bus Stop/Landmark:

[illegible][illegible][illegible]

Mobile Number:

[illegible]

I hereby attest that the above information is true and complete

Signature: _____

Date:

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Day Month Year

Official use only

Verified By (Full name) _____

Signature: _____

Date:

--	--

--	--

--	--	--	--

Day Month Year

Details of Account Signatory 3:

[illegible][illegible]

Other Name(s):

Marital Status: Single ☐ Married ☐ Others: (please specify)

Gender: Male ☐ Female ☐

[illegible][illegible][illegible]

District:		Region:	
(Tanzanians only)		(Tanzanians only)	

[illegible][illegible]

ID Issue Date: ID Expiry Date:

3.

Title:

(Please specify)

Surname:

First Name:

Other Name(s):

Date of Birth:

Day

Month

Year

Gender: Male

Female

Mother's Maiden Name:

Means of
Identification:Identification
Number:

ID Issue Date:

Day

Month

Year

ID Expiry Date:

Day

Month

Year

Occupation:

Status/Job Title:

Nationality:

Tanzanian

Others

(Please specify)

Do you have residency or citizenship
of any other country:

Yes

No

If yes, which country:

Residential Address

House/Plot Number:

Street Name:

Nearest Bus Stop/Landmark:

Street:

District:

Region:

Social Security No.:

Mailing Address:

(If different from the Residential Address)

Mobile Number:

Phone Number:

E-mail Address:

Signature:

Date:

Day

Month

Year

Accounts held with other banks

S/N	Name and Address of Bank/Branch	Account Name	Account Number	Status : Active/Dormant
1				
2				
3				
4				

Account Opening Mandate

a. Mandate authorisation/Combination Rule (Please tick as appropriate):

Sole Signatory Two or more If two or more to sign, please specify

b. Signatories

i. Title:

(Please specify)

Surname:

First Name:

Other Name(s):

Class of Signatory

(Please indicate class in the box provided)

Signature:

Date:

Day

Month

Year

Please affix
passport photo

ii. Title:

(Please specify)

Surname:

First Name:

Other Name(s):

Class of Signatory

(Please indicate class in the box provided)

Signature:

Date:

Day

Month

Year

Please affix
passport photo

iii. Title:

(Please specify)

Surname:

First Name:

Other Name(s):

Class of Signatory

(Please indicate class in the box provided)

Signature:

Date:

Day

Month

Year

Please affix
passport photo

Account Mandate and Resolution

At a meeting of the Board of Directors/Executive Council (_____) of _____
(if other body, please state)

_____ held at _____ on the _____
("the Organisation")

_____ day of _____ 20_____ the following resolutions were duly passed

OR

Upon the authority of _____ (Authorising Officer)

(Name and Destination)

whose written authorisation dated _____ day of _____ 20_____ is attached herewith

We _____ resolve as follows

(Name of Organisation)

1. APPOINTMENT OF BANKER:

RESOLVED that Guaranty Trust Bank (Tanzania) Ltd (hereinafter referred to as "The Bank") be and is hereby appointed a Banker to the Organisation.

2. OPENING OF AN ACCOUNT

RESOLVED that a Current Account _____ be opened with the Bank

(Please state if other type)

3. DEPOSIT AND WITHDRAWALS:

RESOLVED, that until further order of the Board of Directors/Executive Council/Authorising Officer, any funds of this Organisation deposited in the Bank be subject to withdrawal or charge at any time upon cheques, notes, drafts, bill of exchange, acceptance, undertaken or other instruments or orders for the payments of money when made, signed, drawn, accepted or endorsed on behalf of this Organisation by the authorised signatories as stated in the column below.

RESOLVED, that the Bank is hereby authorised to pay such instrument or make such charge and also to receive the same from the payee or any other holder without inquiry as to the circumstances of issue or the disposition of the proceeds even if drawn to the individual order of any signing person, or payable to the Bank or others for his account, or tendered in payment of his individual obligation, and whether drawn against an account in the name of his Organisation or in the name of any officer or agent of this Organisation as such, and at the option of the Bank, even if the account shall not be in credit to the full amount of such instrument of charge.

RESOLVED that prompt notice be given in such manners as the Bank may from time to time specify by instruction, not to honour any cheques, bills of exchange, promissory notes, deposits and other orders for the payment of money drawn, endorsed or accepted on behalf of the Organisation; and to indemnify the Bank for any loss arising from such non-payment.

RESOLVED that the Organisation shall give notice of any anomalies in the statements of accounts furnished to the Organisation by the Bank within 90 (ninety) days of the date thereof, and the Organisation understands and agrees that failure to give such notice shall absolve the Bank of all liabilities arising therefrom.

RESOLVED that the Organisation hereby affirm that we are aware that it is crime under the laws of the United Republic of Tanzania to issue cheques without sufficient funds in our account in the value of our cheques and I/We hereby undertake to bear all consequences and/or liabilities arising from our instructions to the Bank to pay on cheques drawn on our account where such account is not sufficiently funded with the value of our cheques.)

4. LOANS, CREDITS AND SECURITY

RESOLVED, that the authorised signatories as stated in the column below are hereby authorised on behalf of this Organisation.

- a. To borrow money and obtain credit for this Organisation from the Bank on any terms and to make and deliver notes, drafts, acceptances, instruments of guarantee, agreements and any other obligations of this Organisation therefore in form satisfactory to the Bank.
- b. To grant security interest in and/or pledge or assign and deliver, as security for money borrowed or credit obtained, stocks bonds, instruments, bill receivable, accounts mortgages, merchandise, bill-of-lading, warehouse receipts and other documents, insurance policies, certificates and any other property now or hereafter held by or belonging to this Organisation, with full authority to endorse, assign or guarantee any of the same in the name of this Organisation.

- c. To discount any bills receivable or any paper held by this Organisation with full authority to endorse, the same in the name of this Organisation.
- d. To withdraw from the Bank and give receipt for, or to authorise the Bank to deliver to bearer or to one or more designated persons, all or any documents and security or other property held by it, whether held as collateral security or for any other purpose.
- f. To execute and deliver all securities and other agreements, financial statements and other papers required by the Bank in connection with any of the foregoing matters and affix thereto the seal of this Organisation.

5. AMALGAMATION OF ACCOUNTS

RESOLVED, that the Organisation agrees that in addition to any general lien or similar right to which the Bank may be entitled by law, 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 Organisation whatsoever, whether such liability be present or future, actual or contingent, primary or collateral and several or joint.

"Related Party" means an entity that is: a subsidiary or an affiliate of the Organisation; or an individual (person) that is a director of the Organisation; or an entity in which the Organisation is a shareholder/stakeholder.

6. ENABLING ACT AND FINANCIAL REGULATIONS

RESOLVED, that the Bank be furnished with a list of the names of the Executive Council members/Board of Directors of the Organisation and with the specimens of their signatures and that the Bank be authorised to act on any information given by a certified true copy of the Organisation's Resolution, or written instructions of the Authorising Officer as to any changes therein. Further RESOLVED that the Bank be furnished with a copy of the Act creating the Organisation (the Enabling Act) and that future amendments to the Enabling Act and Financial Regulations governing the borrowing powers of the officers (if any) would be sent to the Bank within 14 days of the registration/filing of such amendments. The Bank would be indemnified against any loss or damages sustained as a result of failure to notify it of any such amendments.

7 FOREIGN EXCHANGE TRANSACTION

RESOLVED, that in consideration of the Bank providing foreign exchange facilities to the Organisation from time to time in the ordinary course of business or against the Organisation's imports, the Organisation agrees to:

- a. Deliver to the Bank not later than 60 (sixty) days after the payment of foreign currency or against the Organisation's import transaction and in any other case not later than 10 (ten) days after the arrival of eligible goods in Tanzania, the exchange control copy of the custom Bill of Entry and other allied documents, that may be prescribed from time to time by the laws of Tanzania.
- b. To indemnify the Bank against loss or damage incurred as a result of failure to produce the required Custom Bill of Entry and any other document required by law and to comply with any Tanzanian Customs or Exchange Control regulations.
- c. The debiting of the Organisation's account or to pay on demand to the Bank any difference in exchange rate due to a fluctuation in rates between the time of instruction and the completion of the transaction.

8. NON DEFAULT REPRESENTATION

The Executive Council/Board of Directors/Authorising Officer hereby certifies that the Organisation is not in default of any obligation to any of its creditors and that obtaining credit from the Bank will not cause the Organisation to be in default to any of its Obligations to its creditors.

- 9. Foreign currency cash withdrawals from my/our accounts shall be subject to availability.
- 10. Subject to the provisions of all 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 jurisdiction. 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.

Credit Bureau

The Organisation acknowledges that the Bank consults with various credit bureaus and reference agencies, and may be required to disclose the Organisation's information to these credit bureaus for the purpose of conducting checks on the Organisation. 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 partners and other personnel, transactions and conduct on the Customer's 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.

Corporate Internet Banking - GAPS

User Roles & Functions

Role Code	Users	Responsibilities
ADMIN	System Administrator	<ul style="list-style-type: none">Responsible for user management and activity audit.
UPL	Uploader	<ul style="list-style-type: none">Initiates all transactions and file uploadReview reports and account information
REV	Reviewer	<ul style="list-style-type: none">1st level review and authorization
APP	Approver	<ul style="list-style-type: none">Must be authorized signatories of the bank account. Structure may be sequential (A → B→ C) or non -sequential (Any to sign, either to sign, two to sign, e.t.c)
VIEW	Viewer	<ul style="list-style-type: none">Review end of day activities and reports

User Contact Information

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

First/Last Name	Role Code	Approval Limit	E-mail Address	Mobile Number

Token Request

*Note: All users will require tokens to sign in to GAPS

Kindly take this as an authority to issue _____ unit(s) of tokens for our users.

Token should be released to: _____
(A duly signed indemnity is required) (Name)

Mode of Identification: _____

Declaration

I/We _____ hereby apply for the opening of an account with Guaranty Trust Bank (Tanzania) Ltd. I/We understand that the information given herein and the documents supplied are the basis for opening such account and I/We therefore warrant that such information is correct.

I/We have read the terms and conditions governing the operations of the account which are presented overleaf and agree to be bound by them.

Signed, sealed & delivered by the within named person

1. _____
Name of Authorised Officer/ Director

Signature

Month

Year			

2. _____
Name of Secretary

Signature

Month

Year			

Organisation seal here (if applicable)

In the presence of:

Name:

[illegible]

Address:

[illegible][illegible]

Occupation:

[illegible]

Signature:

Date:

--	--

Month

Year			

FOR BANK USE ONLY

Customer Segmentation

Customer Classification Code: ☐ Description: _____

Economic Sector Code: ☐ Description: _____

Type of Depositor Code: ☐ Description: _____

Risk Classification

Low Risk

☐

Medium Risk

☐

High Risk

☐

Customer Address Verification/ Call Memo (If 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 herein is correct and a true representation of the Customer's profile

Full Name: _____ Signature: _____

Day	

Month	

Year			

Deferral/Waiver of Documents (if any) authorised by

Full Name: _____ Signature: _____

Day	

Month	

Year			

Documents Required

	Checked	Deferred (Please specify deferral period)	Waived
1) Account opening form duly completed	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
2) Specimen signature card duly completed	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
3) Approval from the Accountant- General/ Governor/ Minister/ Commissioner/ Director General/ Local Government Chairman/ Secretary/ Sole Administrator (whichever is applicable) authorizing the opening of the account or a Certified true copy of the Board of Directors/ Executive Council resolution authorizing the opening of the account	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
4) Confirmatory letter from the Special Duties Office of the Accountant- General authorising the opening of the account (for Federal accounts)	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>

5) Enabling Act/ Decree or Certificate of Incorporation	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
6) Copy of BRELA Memorandum and Articles of Association (certified as True copy by the Registrar of Companies)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
7) Form 14A Particulars of Directors (certified as True copies by the Registrar of Companies and a certification by a Notary Public for Foreign Companies)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
8) Two (2) passport sized photographs of each Signatory to the account with name written on the reverse side	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
9) Introduction Letter (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
10) Status Report from Banker (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
11) Power of Attorney (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
12) Letter of Indemnity (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
13) Copy of Financial Regulations (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
14) Business Premises visitation certificate	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
15) Proof of identity of all Signatories and Directors/Officers whose name appear on the account opening form/document (Preferred Identity card are Int'l Passport, National Identity Card, National Driver's Licence, and Valid Tanzanian Voter's card)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
16) Proof of Address of all Signatories and Directors/Officers whose name appear on the account opening form/document Utility bill (Certified true copy is acceptable if original is not held)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>
17) Others (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>

Account Opening Authorised

A/C Manager's Code:

A/C Opened by: Name: _____
CIS

Signature : _____

Date: _____

Approved by: Name: _____
OPERATIONS HEAD

Signature : _____

Date: _____