



Private Banking Account Opening Form

REQUIREMENTS FOR ACCOUNT OPENING

- Fully Completed And Endorsed Application Form
- Two Passport Photographs
- Form of Identification of signatory to Account (Any Valid National I.D)
- Confirmation of Residential Address
- Initial Deposit

JOINT HOLDER 1

Mr/Mrs/Ms/Dr

* Name: [T][I][T][L][E] [L][A][S][T] [F][I][R][S][T] [M][A][I][D][E][N] [O][T][H][E][R]

* Date of birth: [D][D][M][M][Y][Y][Y][Y] *Marital Status: [] Single [] Married [] Divorced [] Widowed

* Gender: [] Dependents: [] SSNIT No.: []

* Nationality: [] Ghanaian [] Others Please specify []

* Hometown: []

* Identification Type: [] NIA ID [] Passport [] Driver's License [] Voter's ID [] NHIS Card [] Student ID

* ID No.: [] Expiry Date: [D][D][M][M][Y][Y][Y][Y]

* Issuing Country []

TIN: []

Residence Type: [] Self Owned [] Rented [] Family Owned [] Employer Provided

* Residential Address: [H][O][U][S][E][N][O.] [B][U][I][L][D][I][N][G][N][A][M][E] [S][T][R][E][E][T.] []

Nearest Landmark: [] City: []

MMDA: [] Region: []

Country: [] Ghana [] Others Please specify []

* Postal Address: *Please enter postal address if different from Residential Address [P][O][B][O][X][N][O.] []

City: [] Region: []

Country: [] Ghana [] Others Please specify: []

Contact Details: Mobile 1: [] Mobile 2: []

Email: []

Next of Kin: [T][I][T][L][E] [L][A][S][T] [F][I][R][S][T]

Residential Address: []

MMDA: [] Region: []

Relationship: [] Date of Birth: [D][D][M][M][Y][Y][Y][Y]

Spouse Name: [] Date of Birth: [D][D][M][M][Y][Y][Y][Y]

Wedding Anniversary: [D][D][M][M][Y][Y][Y][Y] Mother's Maiden Name: []

JOINT HOLDER 2

Mr/Mrs/Ms/Dr

* Name: [T][I][T][L][E] [L][A][S][T] [F][I][R][S][T] [M][A][I][D][E][N] [O][T][H][E][R]

* Date of birth: [D][D][M][M][Y][Y][Y][Y] *Marital Status: [] Single [] Married [] Divorced [] Widowed

* Gender: [] Dependents: [] SSNIT No.: []

* Nationality: [] Ghanaian [] Others Please specify []

* Hometown: []

* Identification Type: [] NIA ID [] Passport [] Driver's License [] Voter's ID [] NHIS Card [] Student ID

* ID No.: [] Expiry Date: [D][D][M][M][Y][Y][Y][Y]

* Issuing Country []

TIN: []

Residence Type: [] Self Owned [] Rented [] Family Owned [] Employer Provided

* Residential Address: [H][O][U][S][E][N][O.] [B][U][I][L][D][I][N][G][N][A][M][E] [S][T][R][E][E][T.] []

Nearest Landmark: [] City: []

MMDA: [] Region: []

Country: [] Ghana [] Others Please specify []

* Postal Address: *Please enter postal address if different from Residential Address

[P][O][B][O][X][N][O.] []

City: [] Region: []

Country: [] Ghana [] Others Please specify []

Contact Details: Mobile 1: [] Mobile 2: []

Email: []

Next of Kin: [T][I][T][L][E] [L][A][S][T] [F][I][R][S][T]

Residential Address: []

MMDA: [] Region: []

Relationship: [] Date of Birth: [D][D][M][M][Y][Y][Y][Y]

Spouse Name: [] Date of Birth: [D][D][M][M][Y][Y][Y][Y]

Wedding Anniversary: [D][D][M][M][Y][Y][Y][Y] Mother's Maiden Name: []

TRANSACTIONS YOU EXPECT TO PERFORM

Operation Purpose: Personal Savings Investments Loan Servicing Salary Remittances
 Personal Transactions

Transaction Type	Total Amount of Withdrawals expected in a month (In GHS)			
	0-5k	5-20k	20-50k	Above
Cash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheques/Drafts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funds Transfer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Transaction Type	Total Amount of Deposits expected in a month (In GHS)			
	0-5k	5-20k	20-50k	Above
Cash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheques/Drafts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funds Transfer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Transaction Type	Total number of expected Withdrawals in a month			
	0-10	11-25	25-50	50 & Above
Cash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheques/Drafts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funds Transfer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Transaction Type	Total number of expected Deposits in a month			
	0-10	11-25	25-50	50 & Above
Cash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheques/Drafts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funds Transfer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SOURCE OF FUNDS

Savings Business Income *Inheritance Investments *Sale of Property *Others

* Additional Information about source of funds: _____

COUNTRIES WHERE FUNDS ARE LIKELY TO BE TRANSFERRED

INWARD	OUTWARD
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

REASONS FOR SUCH TRANSFERS

ASSOCIATED BUSINESS(ES)

Details of Associated Business(es) 1 _____
 (where applicable) 2 _____

Type of Associated Business: _____

Associated Business Address: _____

ACCOUNTS WITH OTHER BANKS

1. Bank Name: _____ Account No. _____
 2. Bank Name: _____ Account No. _____
 3. Bank Name: _____ Account No. _____
 4. Bank Name: _____ Account No. _____

DECLARATION ON U.S. PERSON STATUS

This section of the account opening form must be completed by any individual who wishes to open a banking account.

Please complete in BLOCK LETTERS.

Name:

Country of Residence:

Country of Birth:

Please tick "v" Yes or No for each of the following questions:

1. Are you a U.S. Resident? Yes No 2. Are you a U.S Citizen? Yes No

3. Do you hold a U.S. Permanent Resident Card (Green Card)? Yes No

If you answered yes to any of the questions above please provide the following.

4. U.S Social Security/Tax Identification number:

5. U.S Identification Document: Passport Driver's License

ID Number:

Expiry Date:

FATCA Form Completed W9 W8

Date Form Completed:

I hereby confirm that information provided above is true, accurate and complete.

Subject to the applicable local laws, I hereby consent to Fidelity Bank Ghana Limited or any of its affiliates sharing my information with local or foreign tax authorities where necessary to establish my tax liability in any jurisdiction.

Where required by local/domestic or foreign/overseas regulators or tax authorities, I consent and agree to the Bank to withhold from my account(s) such amounts as may be required according to applicable laws, regulations and directives.

I further consent to notify the Bank within a period of 30days of any changes to my personal circumstances which include but not limited to citizenship, marital status, residential and mailing addresses and contact telephone numbers.

Signature:

Signature:

Name in Full:

Name in Full:

Date:

Date:

I/We the undersigned hereby request you to establish in your books a Current account in (currency) herein after called (the Account) and to credit there to such currency as may from time to time be received by you for the Account. It is hereby agreed that:

Withdrawals from Accounts can be made only in the same currency as deposited or Cedi equivalent at the request of the undersigned in writing. Transmission or other charges related to withdrawals from the Account will be paid by the undersigned upon demand or charged to the said Account. All withdrawals are subject to the Bank of Ghana Foreign Exchange Regulations.

You will be indemnified and have no responsibility for or liability to the undersigned for any loss in value due to taxes or imports or depreciation in the value of funds credited to the Account (which funds may be deposited by you in your name and subject to your control with which depository (lies) as you may select) or for the unavailability of such funds due to restrictions on convertibility, requisition, involuntary transfers, or other similar causes beyond your control.

The operation of this Account is subject to the Laws and Regulations at any time existing in the Republic of Ghana.

Signature:

Signature:

Name in Full:

Name in Full:

Date:

Date:

Preferred mode of delivery of instructions to the Bank

- a) Written correspondence delivered to the bank
- b) Phone Instructions
- c) Written correspondence faxed to the bank
- d) E-mail to the bank

Please complete the following section if you responded positively to b,c and/or d, if not please skip to next section.

INDEMNITY

The Bank is hereby authorized but not obliged, to accept and act upon telephone, facsimile, or email or other electronic instructions. In consideration of the Bank accepting or acting upon my/our telephone instructions and/or any letter received by email or facsimile transmission (fax) from me/us, addressed to or otherwise communicated to any of the Bank's employees for the time being, I/we hereby confirm to you that you have made clear to me/us and I/we am/are fully aware of the risks of omissions, errors, misstatements, non-receipts of fax, fraud and/or interventions by third parties in these forms of communication. It is understood that any losses incurred whether the same shall have been caused by omissions, errors, mis-statements, fraud and/or the unauthorised interventions of third parties with or without the use of the password whether by myself or an authorized or unauthorized third party will be entirely my responsibility,

I/We acknowledge and accept that the Bank needs no further steps to confirm the identity and authority of the source of any such instructions and agree that the Bank shall be entitled to debit my account(s) with the amount of any payment made pursuant to such instruction. Further, I/We hereby undertake to indemnify the Bank, it officers and staff from and against all actions, proceedings, costs, claims, demands, expenses or losses sustained as a result of or in connection with the Bank having acted on such instructions notwithstanding any fault or negligence on the part of the Bank or any member of its staff. This indemnity shall continue until the Bank has received, and has had a reasonable time to act upon instructions in writing from me cancelling it. Further, I/We hereby agree that this indemnity shall be governed by and in accordance with the laws of the republic of Ghana.

Signature:

Signature:

Name in Full:

Name in Full:

Date:

Date:

TERMS AND CONDITIONS

Please read this page carefully. It provides you with important information about your Fidelity Bank Ghana Limited Current/ Savings Accounts.

A. TERMS/SCOPE

The information on this page (and any further instructions and conditions that may be prescribed by the Bank from time to time) are the terms of the agreement between you and Fidelity Bank Ghana Ltd. When you sign the account application form you accept these terms as binding on you.

B. YOUR ACCOUNT

You will assume full responsibility for the correctness and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments and receipts, etc. deposited in your account.

The Bank will not be responsible for any loss or damage to funds deposited with the Bank due to any future Government Order, law, levy, tax, embargo, moratorium, exchange restriction or any other cause beyond our control.

Your account may be debited for any service charge that is set by the Bank from time to time.

All notices or letters will be sent to the address supplied by you and will be considered duly delivered and received at the time it is delivered or seven days after posting.

The Bank will not be liable for funds handed over to members of its staff outside the Bank's premises. Any anomaly in the entries on your bank statements must be brought to the attention of the Bank as soon as reasonably practicable from discovery. The Bank may exercise its general lien or any similar right it is entitled to or consolidate all or any of your accounts with any liabilities you may have to the Bank and set off or transfer any sum or sums standing to the credit of any one of more of such accounts or any other credit.

The Bank reserves the right to suspend or discontinue e-banking / SMS or any part of our services without notice. The Bank shall in no circumstances be liable to you if access to e-banking /SMS is not available for any reason, including but not limited to force majeure, fault in network or hardware error.

The Bank will not be liable to you if it is unable to carry out its responsibilities as a result of anything it cannot control.

C. CHEQUES

All cheques or other orders signed by you (or either or both of you if a joint account) will be honoured by the Bank and your account will be debited for such cheques whether such account be for the time being in credit or overdrawn or may become over-drawn in consequence of such debit.

The Bank is under no obligation to honour any cheque drawn on your account unless there are sufficient funds in the account to cover the value of the said cheque and such cheques may be returned to you unpaid.

The Bank may exercise its discretion in allowing withdrawals against an uncleared cheque. Where a cheque is returned unpaid thereafter the Bank shall have the right to hold on to the returned cheque and take any action it deems appropriate to recover the value of the

cheque from you. The Bank shall have the right whenever it deems appropriate to confirm the issuance of a cheque drawn on the current account failing which the cheque may be returned with Drawer's Confirmation Required endorsed thereon.

D. ATM CARD

You can use your card to access funds at any ATM worldwide that displays the VISA sign or any other payment company and to pay for charges incurred by the Merchant. The Merchant reserves the right at any time to refuse to permit the use of the card at the outlet for any reason whatsoever. You must sign your card as soon as you receive it and follow any relevant instructions that we give. You can use your card if you have adequate funds in your Account. Limits and restrictions may vary for each ATM' and Merchants, the Bank will not be liable for any losses this may cause you..

We will convert all overseas transactions into Ghana Cedis currency using the prevailing exchange rate and will factor in a percentage commission on the amount of the transaction. The exchange rate we use may not be the same as the rate when the transaction was completed.

If we have good reason, we may: (a) refuse to approve a transaction, (b) cancel or suspend your right to use the card for any or all purposes; or refuse to replace any card without prior notice to you (c) limit number or frequency of transactions within any period.

We will credit your account with a refund for a transaction if the retailer asks us to or if you notify us that a transaction with retailer has been incorrectly debited to your account. You cannot use a claim you may have against someone else to make a claim against us, or refuse to pay us, unless you have a legal right to do so. You cannot transfer any rights of action against us to anyone else.

E. OVERDRAWN ACCOUNT

Overdrafts may be available to customers upon arrangement with the Bank. If you do not have such arrangement and your account becomes overdrawn, the Bank may charge you an extra fee and interest at its current rate for unauthorized borrowing. If your account does not have enough cleared funds to cover an amount you want to withdraw the Bank may return your cheque unpaid.

The Bank reserves the right to use the credit balance on your account(s) to set off any outstanding exposures on any of your accounts.

F. PAYING INTEREST AND CHARGES

You will be liable for the payment of interest charges at the rate fixed by the Bank from time to time for any sum(s) outstanding to the debit of the current account. The current account may also be debited for the Bank's usual banking charges, interest, commissions, etc. The Bank's current charges and fees including those applicable to cheques and ATM cards can be found on www.fidelitybank.com.gh and at our branches.

G. JOINT HOLDERS

As joint Account holders you are individually and jointly liable for complying with the Bank's terms and conditions, running the Account and for repaying any money owed to us. We may demand from any of you, some of you or all of you repayment of all or part of any money owed.

