



GUIDE TO OPENING YOUR ACCOUNT

Please complete all relevant portions of the application form and account opening mandate card and return this package along with the original (for sight seeing only) and copies of the following documents:

1. Completed signature/mandate card
2. Valid identification of signatory to the account (International Passport/Driver License/Voter ID/NHIS/National Identification)
3. One passport photograph of each signatory to the account
4. Proof of address (Utility Bill in the customer's name or Directional Map)
5. Residence/Work Permit (for foreign nationals only)
6. Reference (included in this package)

“CAUTION”

Kindly note that the use of correction fluid renders this form invalid

GENERAL ACCOUNT INFORMATION



Account Type:

TICK AS APPLICABLE: Current Easysavers Seniors GTMax
Individual Joint Individual Joint Individual Joint Individual Joint

Account Name: _____

Account Number: _____ Branch: _____

Additional account to be opened (If applicable) Savings Target Other _____

Customer Details

Title: Mr Mrs Other (specify) _____

Gender: M F Marital Status: Married Single Other _____

Name _____
Surname _____

First Name _____ Other _____

Previous Name (If applicable) _____

Mother's Maiden Name _____

_____ Date of Birth (DD/MM/YY) _____ Place of Birth _____ Hometown _____

_____ Region _____ Nationality _____ Country of Origin _____

_____ Country of Residence _____ Resident Permit No. (If applicable) _____ Permit Issue Date (DD/MM/YY) _____

_____ Permit Expiry Date (DD/MM/YY) _____ Place of Issue _____ SSNIT No: _____

_____ Profession/Occupation: _____ Name & Occupation of Spouse _____

Identification

National ID Card DVLA Passport Voter's ID NHS

_____ ID No. _____ Date of Issue (DD/MM/YY) _____ Expiry Date (DD/MM/YY) _____ Country of Issue _____

Contact Details

Residential Address _____

City/Town _____ Nearest Landmark _____

Metropolitan , Municipal District Assembly Area (MMDA) _____

Proof of Address _____

(Indicate Type & Serial No.where applicable) _____

Mobile No. _____ Telephone (Home): _____

Email Address _____ Mailing Address _____

EmploymentEmployed Self Retired Student Others(please specify) _____

Profession/Occupation: _____

Name of Employer/Institution _____

Employer/Institution Address _____

Nearest Landmark _____ City/Town _____ MMDA _____

Telephone No _____ Fax _____ Email Address _____

Nature of Business _____

How long have you been with current employer/institution _____

Monthly Salary: Less than GHS 1000 1001-5000 Other (specify) _____**Purpose of Account**Personal Savings Investment Business Operations Other (specify) _____**Source of Funds**Investment Salaries Business Proceeds Others(specify) _____**Expected Monthly Account Activity**

Transaction Types	Anticipated No. of Transactions	Anticipated Amount of Transactions (GHS)
Deposits	0-10 <input type="checkbox"/> 11-50 <input type="checkbox"/> above 50 <input type="checkbox"/>	0-5,000 <input type="checkbox"/> 5,001- 10,000 <input type="checkbox"/> above 10,000 <input type="checkbox"/>
Withdrawals	0-10 <input type="checkbox"/> 11-50 <input type="checkbox"/> above 50 <input type="checkbox"/>	0-5,000 <input type="checkbox"/> 5,001- 10,000 <input type="checkbox"/> above 10,000 <input type="checkbox"/>

2ND APPLICANT PERSONAL DATA (JOINT ACCOUNT)



Account Type:

TICK AS APPLICABLE: Current Easysavers Seniors GTMax
Individual Joint Individual Joint Individual Joint Individual Joint

Account Name: _____

Account Number: _____ Branch: _____

Additional account to be opened (If applicable) Savings Target Other _____

Customer Details

Title: Mr Mrs Other (specify) _____

Gender: M F Marital Status: Married Single Other _____

Name _____
Surname

First Name _____ Other _____

Previous Name (If applicable) _____

Mother's Maiden Name _____

_____ Date of Birth (DD/MM/YY) _____ Place of Birth _____ Hometown _____

_____ Region _____ Nationality _____ Country of Origin _____

_____ Country of Residence _____ Resident Permit No. (If applicable) _____ Permit Issue Date (DD/MM/YY) _____

_____ Permit Expiry Date (DD/MM/YY) _____ Place of Issue _____ SSNIT No: _____

_____ Profession/Occupation: _____ Name & Occupation of Spouse _____

Identification

National ID Card DVLA Passport Voter's ID NHIS

_____ ID No. _____ Date of Issue (DD/MM/YY) _____ Expiry Date (DD/MM/YY) _____ Country of Issue _____

2ND APPLICANT PERSONAL DATA (JOINT ACCOUNT)



Contact Details

Residential Address _____

City/Town _____ Nearest Landmark _____

Metropolitan , Municipal District Assembly Area (MMDA) _____

Proof of Address _____

(Indicate Type & Serial No.where applicable) _____

Mobile No. _____ Telephone (Home): _____

Email Address _____ Mailing Address _____

Employment

Employed Self Retired Student Others(please specify) _____

Profession/Occupation: _____

Name of Employer/Institution _____

Employer/Institution Address _____

Nearest Landmark _____ City/Town _____ MMDA _____

Telephone No _____ Fax _____ Email Address _____

Nature of Business _____

How long have you been with current employer/institution _____

Monthly Salary: Less than GHS 1000 1001-5000 Other (specify) _____

Purpose of Account

Personal Savings Investment Business Operations Other (specify) _____

Source of Funds

Investment Salaries Business Proceeds Other (specify) _____

Expected Monthly Account Activity

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Withdrawals	0-10 <input type="checkbox"/> 11-50 <input type="checkbox"/> above 50 <input type="checkbox"/>	0-5,000 <input type="checkbox"/> 5,001- 10,000 <input type="checkbox"/> above 10,000 <input type="checkbox"/>

Additional Account Opening Information

2nd Applicant Personal Data (Joint Account)

Are you a U.S citizen YES NO

Are you a U.S citizen YES NO

Do you hold a U.S passport YES NO

Do you hold a U.S passport YES NO

Do you hold a US green card YES NO

Do you hold a US green card YES NO

If you have answered YES to any of the above questions, please provide the following information.

Full name _____

US residential address _____

US place of Birth _____

US mailing address _____

US Telephone number _____

US Tax Identification Number _____

2nd Applicant Personal Data (Joint Account)

Full name _____

US residential address _____

US place of Birth _____

US mailing address _____

US Telephone number _____

US Tax Identification Number _____

Undertaking

(To be signed by only clients who answered YES to any of the questions above)

Subject to the applicable local laws, I hereby give my consent for Guaranty Trust Bank (Ghana) Ltd (the Bank) or any of its subsidiaries to share any information with foreign (U.S) tax authorities where necessary to establish my tax liability.

Where required by domestic or foreign (U.S) tax authorities, I give my consent and agree that the Bank may withhold from any account(s) such amounts may be required according to applicable laws, regulations and directives.

Signature.....

Date.....
(DD/MM/YY)

Signature.....

Date.....
(DD/MM/YY)

Next of Kin

Name _____
Surname Forename

Relationship: _____

Telephone Number Mobile Home

Residential Address Region MMDA

Remarks (if necessary) _____

Additional Details

Full Name of Beneficiary: _____

Owner(s) of the Account (If applicable) _____

Name of Associated Account in GTBank _____
(If applicable)

Type of Associated Account _____
(If applicable)

Associated Account Number _____
(If applicable)

Currency of Account requested in addition to Ghana Cedis (please tick where applicable)

US Dollar Pound Sterling Euro Others _____

Type of Account Foreign Forex

If foreign currency, kindly provide source of anticipated foreign funds _____

I/We hereby request you to establish a domiciliary account in the chosen currency and agree that:

1. Cash withdrawals from my/our account shall be subject to availability.
2. The Bank shall have no responsibility/liability for the following:
 - (i) Any diminution due to taxes, charges 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 name and subject to your control.
 - (ii) The unavailability of such funds due to restrictions on convertible, requisitions, involuntary transfers, distrains of any character, exercise of military, or usurped power or other similar causes beyond your control
3. The operation of this account is subject to the laws and regulations at any time existing in the Republic of Ghana.

Accounts Held with other Banks

S/N	NAME OF BANK	BRANCH	ACCOUNT NAME	ACCOUNT NUMBER

Card Preference and Account Information (Tick as applicable)

Visa
 MasterCard
 Prepaid (Visa/MasterCard)
 Other (Please specify) _____

Internet Banking
 Cheque book

Transaction Notification: SMS/Gens
 By Email

Please provide email address _____

Statement Frequency: Monthly
 Quaterly
 Semi Annually
 Annually

ACCOUNT MANDATE

TO: Guaranty Trust Bank (Ghana) Limited

I/WE HEREBY REQUEST AND AUTHORIZE YOU TO:

1. Open Current Account/Easy Savers Account/seniors Account in my/our name and at any time subsequently to open further accounts as I/We may direct.
2. Cheque Confirmation Policy: GT Bank will mandatorily confirm all cheques of Three thousand Ghana Cedis (GHS 3,000.00) and above presented for payment. You may however confirm in advance through our Internet Banking Service or inform your Account Officers or Branch Managers when issuing cheques of Three Thousand Ghana and above as unconfirmed cheques will not be honoured or paid. This is to protect against the use of fake cheques to withdraw money from your account.

I/We agree:

- (a) to assume full responsibility for the genuineness or correctness and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments, receipts and/or other documents deposited in my / our account.
- (b) to be responsible for the repayment of any overdraft with interest and to comply and be bound by the Bank's rules for the conduct of a current account receipt of which/We hereby acknowledge.
- (c) to free the Bank from any responsibility for any loss or damage to funds deposited with the Bank due to any future government order, law, levy, tax, embargo, causes beyond the Bank's control.
- (d) that all funds standing to my / our credit are payable on demand only in such local currency as may be in circulation.
- (e) to be bound by any notification of change in conditions governing the account directed to my / our last known address and any notice or letter sent to my / our last known address shall be considered as duly delivered and received by me / us at the time it would be delivered in the ordinary course of post.
- (f) that if a cheque credited to my / our individual Current/Easy Savers/Seniors account is returned dishonoured, the same may be transmitted to me / us through my / our last known address either by bearer or by post
- (g) that I/We note that the Bank will accept no liability whatsoever for funds handed to members of the staff outside banking hours or outside the Bank's premises.

- (h) that my /our attention has been drawn to the necessity of safe guarding cheque book so that unauthorized persons are unable to gain access to it and to the fact that neglect of this precaution may be a ground for any consequential loss being charged to my/our account.
- (i) that the Bank is under no obligation to honour any cheque(s) drawn on this account unless there are sufficient funds in the account to cover the value of the said cheque(s). Cheques may be returned to me/us unpaid but if paid, I am/we are obliged to repay the Bank on demand.
- (j) that any disagreements with entries on my/our Bank Statements will be made by me/us within 15 days of the dispatch of the Bank Statement failing receipt by the Bank of a notice of disagreement of the entries within 15 days from the date of dispatch of my/our Bank statement, it will be assumed by the Bank that the statement as rendered is correct.
- (k) that I/We in respect of our easy savers accounts will make a maximum of four withdrawals per month. That in any month I/we make more than four (4) withdrawals, commission on Turnover charge shall be applied on transactions for the month.
- (l) I/We also agree that in addition to any general lien or similar right to which you as bankers may be entitled by law you may at any time and without notice to me/us combine or consolidate all or any of my/our accounts without liabilities to you and set off or transfer any sum or sums standing to the credit of any one or more of such accounts or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other Assets belonging to me/us with you in or towards satisfaction of any of my/our liabilities to you or any other account or in any other respect whether such liabilities be actual or contingent primary collateral and several or joint.

Terms and Conditions -EASY SAVERS ACCOUNT

Easy Savers Account is a Hybrid of a regular current and a regular savings account as it seeks to incorporate some of the feature of one into the other.

It is essentially a savings account with some features of a current account.

COT charges will be applied if withdrawals exceed four (4) times in a month.

Minimum opening amount is GHS200.00 (Two Hundred Ghana Cedis) only, for individual

Minimum account balance of GHS100.00 (One Hundred Ghana Cedis) only, for individual.

Non-Borrowing account.

Terms and Conditions-GTMAX ACCOUNT

GTMAX account is a hybrid of a regular current and a regular savings account as it seeks to incorporate some of the features of one into the other. It is essentially an interest bearing current account with the following features:

- ✍ Minimum opening amount is GHS50,000 (fifty thousand Ghana cedis) only.
- ✍ Minimum account balance of GHS30,000 (thirty thousand Ghana cedis) only.
- ✍ Earn 2% interest on account if minimum balance is at least GHS30,000.
- ✍ No COT charge
- ✍ Flat monthly service fee of GHS20.00

Mode of Sending Monthly Statements of Accounts is Via E-mails.

We confirm that we have read the terms and conditions guiding the deployment of electronic products as contained in this application and hereby agree to the provisions therein.

Dated this _____ day of _____ 20____

Name: _____ Signature: _____

Name: _____ Signature: _____

REFERENCE

To:

The Manager,
Guaranty Trust Bank (Ghana) Ltd.,

Dear Sir/Madam,

NAME OF ACCOUNT HOLDER

I/We _____
wish to confirm that I/WE have known the above named individual(s)

I/We would like to comment on their suitability for the purposes of maintaining a current/easysavers seniors/GTMax account with yourselves as follows:

I/We maintain a current account With:

Name of Bank: _____

Address: _____

My/Our Account No. is: _____

And my/our Phone No(s). Is /are: _____

Yours faithfully,

Signature

Date

Name: _____

Address: _____

"CAUTION"

IT IS VERY DANGEROUS TO INTRODUCE A PERSON WHO IS NOT WELL KNOWN TO YOU

DECLARATION



I/We hereby apply for the opening of account(s) with Guaranty Trust Bank (Ghana) Ltd. I/We understand that the information given herein is the basis for opening such account(s) and therefore warrant that such information is correct.

I/We agree to be bound by terms and conditions governing the operations of the account(s).

I/We further undertake to indemnify the bank for any loss suffered as a result of any false information or error in the information provided to the Bank.

Name Signature Date

Name Signature Date

DISCLOSURE TO CREDIT REFERENCE BUREAUS

The Bank will obtain information about you from the credit reference bureaus to check your credit status and identity . The bureaus will record our enquiries which may be seen by other institutions that make their own credit enquiries about you.

The bank shall also disclose your credit transactions to credit reference bureaus in accordance with the Credit Reporting Act,2007(Act 726).

Name Signature Date

Name Signature Date

JUDRAT (For non-literate and blind customers only)

I (name of client) hereby confirm that the content herein have been read and explained to me in the language by(state name and relation) and I perfectly understand and approve of and in testimony of which I hereby set my mark below;

.....
(Thumbprint/signature/ mark of client)

.....
(Thumbprint/signature/ mark of interpreter)

.....
(Thumbprint/signature/ mark of client)

.....
(Thumbprint/signature/ mark of interpreter)

INTERNET BANKING APPLICATION FORM



Account Number: _____ Other Accounts to be profiled _____

Please list the name(s) of Person(s) authorized to use this service

Name(s) ₁ :	E-mail Address:	Transactions allowed (as per list below)	Signature:
Name(s) ₂ :	E-mail Address:	Transactions allowed (as per list below)	Signature:
Name(s) ₃ :	E-mail Address:	Transactions allowed (as per list below)	Signature:
Name(s) ₄ :	E-mail Address:	Transactions allowed (as per list below)	Signature:

Please profile my/our account(s) for the services (please tick as appropriate)

Category A

- Own Account Transfer
- Pre-registered Transfer
(Kindly request for a pre-registered transfer account form)
- Transfer to any GTBank Account
(3rd Party)
- Cash in Transit
- Draft in Transit
- Pending Transfers
- Transfer to Other Banks

Category B

- Confirm Cheque
- Stop Cheque
- Standing Order to GTBank Account
- Cancel Standing Order

Category C

- View Account Balance only
- Account Statement
- Deposit Rate

Please issue me a token to enhance the security of my Internet banking transactions

Pick up option

Self Courier delivery (outside Ghana only):

Proxy (The customer should send the proxy with a duly signed letter of authorization)

Delivery address	Customer's Signature:	Date
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Customer Responsibility

You agree to take responsibility for protecting and ensuring safety of your user login profile (user ID and password) at all times. Registration for the Internet Banking services is for a single user only; you must not permit other persons to use your user login profile nor disclose your details to third parties. GTBank will not be liable for any losses arising from unauthorized access to, or use of your account arising from your negligence or failure to safeguard and protect you user login profile or any other customer information protection device or functionality provided by the bank to facilitate safety, confidentiality, integrity and accuracy of your data and online transactions.

Service Access

Your access to the internet banking service may be suspended at any time without notice to maintain in the integrity of this service or in instances of system maintenance of failure, or for any reasons beyond GTBank’s control. GTBank also reserves the right to temporarily or permanently change, modify or discontinue this service at any time without notice. You hereby agree that GTBank will not be liable to you or any third party for the exercise of these rights of suspension, modification or discontinuation.

SMS GeNS Request

Customer Name _____

Mobile Phone Number: _____

Account(s) to receive SMS Gens on: _____

- 1. Current Account
 Individual Joint
- 2. Easy Saver Account Foreign Exchange Account
- 3. Senior Account Foreign Currency Account
- 4. GTMAX Other (Please Specify) _____

(Please Tick as applicable)

Do you want to receive notification on all transaction? Yes No.

If No, please specify Debits only: Credits only:

Do you want to set a limit on transaction amounts to be notified? Yes No.

If yes, please state amount in figures:

I agree to pay a monthly service fee for this service _____

Customer’s Signature _____ Date: _____



Guaranty Trust Bank (Ghana) Ltd.
RC C-68,758

Release & Indemnity of Telephone/Fax/Email

A. **WHEREAS** I/We (name of individual company, business name or partnership)

of (Insert location or address/principal place of business) have requested Guaranty Trust Bank (Ghana) Limited (the Bank) to act on instructions transmitted by me/us to it by Facsimile/E-mail/ Telephone.

B. **AND WHEREAS** the Bank has informed me/us that it is prepared to act on faxed/e-mailed/ telephone instructions [~~delete inapplicable options~~] which purport to emanate from me/us if it receives a suitable release and indemnity against all claims, losses, damages, demands and actions howsoever sustained as a result of honoring such instructions.

C. **AND WHEREAS** I/We(name of individual, company, business name or partnership) are prepared to and have agreed to give such release and indemnity,

D. **NOW THEREFORE** I/We,(name of individual, company, business name or partnership)

represented by (*insert names of authorized signatory/signatories as per Mandate on file*)

with GTBank customer Number (six digit number)at the

.....Branch hereby irrevocably authorize the Bank to honor instructions transmitted by me/us to the Bank via:

Facsimile

Email

Telephone

[Please provide details of chosen mode of electronic communication to be used for transmitting instructions electronically]

Email address:

Telephone number:

Fax number:

Details of Type of transaction(s) to be undertaken by the customer

Cash Withdrawal	<input type="checkbox"/>	A/c to A/c Trf	<input type="checkbox"/>	Draft Request	<input type="checkbox"/>
Purchases/sale of FX	<input type="checkbox"/>	Swift trf	<input type="checkbox"/>	Stmt Printing	<input type="checkbox"/>
E-banking Services	<input type="checkbox"/>	VISA/MasterCard Related Issues	<input type="checkbox"/>	Cheque Book Request	<input type="checkbox"/>
Others	<input type="checkbox"/>	Please Specify;			

.....

.....

.....

.....

I/WE DO HEREBY:

1. Acknowledge that it is not practicable for the Bank to establish the authenticity of all telefaxed/e-mailed/telephone instructions communicated to the Bank which purports to emanate from me/us.
2. Agree that all telefaxed/emailed/telephone instructions, mandates, consents, commitments and the like which purport to emanate from me/us ("purported faxed/e-mail/telephone instruction") shall be deemed to have been given by me/us in the form actually received by the Bank and I/we shall be bound thereby.
3. Release the bank from all claims, demands, actions, losses and damages of whatsoever nature which may be brought against me/us or which I/we may suffer or incur as a result of the Bank acting or for reasonable cause, not acting on any purported faxed/e-mailed/telephone instructions.
4. Agree to implement and adhere to any procedures and/or restrictions imposed on me/us by the Bank from time to time regarding the sending of faxed/e-mailed/telephone instructions to the Bank;
5. Agree that it is not my/our intention that the instruction given by me/us should be confirmed in writing and I/we hereby ratify and confirm that all that the Bank shall do on my/our behalf by virtue of such instructions provided only that the Bank acted in good faith.
6. Agree that the Bank will not be obliged to act on any purported faxed/e-mailed/telephone instructions and that it may at any time request verification of documents and instructions received by such means or withdraw from the arrangements envisaged in this document.
7. Agree that the Bank may at any time and without notice to me/us set off for transfer any sum or sums standing to the credit of any one or more of my accounts with it in or towards the satisfaction of my/our liabilities to it arising out of its honoring the instructions on my/our behalf.

8. Agree that if I/we fail to pay on demand any sums payable hereunder, that interest shall accrue thereon from the date of such demand until judgment and full liquidation at the Bank's Lending Rate or at a rate to be advised by the Bank from time to time.
9. Agree that no delay or omission or granting of any indulgence on the Bank's part in exercising any right, power, privilege or remedy in respect of this indemnity shall be construed as a waiver thereof, nor shall any single or partial exercise of any other right, power, privilege or remedy preclude any further exercise of any right, power, privilege or remedy. The rights, powers or remedies provided in this indemnity are cumulative and not exclusive of any rights, powers or remedies provided by law.
10. Agree that this release and indemnity will not be affected by any failure by the Bank to impose any or sufficient procedures or restrictions or to ensure that any, or all of them are adhered to;
11. Release and indemnify the Bank and hold it harmless from all claims, demands, actions, losses and damages of whatsoever nature howsoever incurred or which may be brought against the Bank or which it may suffer or incur arising from the honoring of my/our purported faxed/ emailed/telephone instruction received by the Bank or out of the malfunction, failure or unavailability of any facsimile transceiver/email/telephone, the loss or destruction of any data, the failure, interruption or distortion of communication links, or the reliance by any person on any incorrect, incomplete or inaccurate information or data contained in any purported faxed/e-mailed/telephone instruction received by the Bank.

SIGNED atthis.....day of/.....
(Month) (Year)

NAME

SIGNATURE

.....

.....

1. ON THESE TERMS AND CONDITIONS
 - (a) “You” means the individual named overleaf, where two individuals are named, either or both of those individuals,
 - (b) “We” “Us” and “Our” refers to Guaranty Trust Bank Ghana Limited’s Service,
 - (c) “Service” means the Guaranty Trust Short Message Service (SMS) Banking Service,
 - (d) “PASSCODE” means the code you use to access the system,
 - (e) “Accounts” means a current, savings or all account maintained with us at any of our branches in Ghana,
 - (f) “Mailing Address” means your mailing address in our records.
2. This service will allow you to issue instructions by the use of a mobile phone in conjunction with your PASSCODE. The instructions, which can be given in this way, are set out in the attached brochure. We will endeavor to carry out your instructions promptly. You can not use this service to transfer funds or transact a business which attracts a fee unless you have sufficient available fund in that account.
3. If you want to use the service, you must have
 - (a) An account with us,
 - (b) A Passcode,
 - (c) A mobile phone on a GSM network
4. You must not allow anyone else to have access to your account through this service.
5. You must understand your PASSCODE is used to give instructions. You must not disclose your PASSCODE to anyone. You must not write your PASSCODE down. You instruct us to comply with any instruction given to us through the use of the service, if we are given instructions by means of your PASSCODE. You must change your PASSCODE immediately if it becomes known to anyone else.
6. We shall not be liable for complying with instructions given with your PASSCODE if it is disclosed to a third party. You should also inform us if your PASSCODE is forgotten so that we can re-create another PASSCODE for you.
7. You must read the brochure and familiarize yourself with its content before using the service. You must also understand that giving your PASSCODE shall be sufficient confirmation of the authenticity of any instruction given.
8. You are responsible for any information given by means of your PASSCODE. This means that we would not be responsible for any fraudulent, duplicate or erroneous instruction given to us by means of your PASSCODE.
9. We will not be liable for any failure to provide the service or to comply with these terms and conditions for any cause that is beyond our reasonable control.
10. We may, for any valid reason, alter suspend or terminate the service without giving you notice. We shall not be liable for doing this.
11. We may, for any reason, vary these terms and conditions
12. We can send you notifications using the address we have in our records.
13. These terms and conditions will be governed by laws of Ghana.

The website under the domain name www.gtbghana.com (“Guaranty Trust Website”) is operated by Guaranty Trust Bank, Ghana (“Guaranty Trust”). The Guaranty Trust Website is operated on behalf of Guaranty Trust and its related bodies corporate (together called the “Guaranty Trust Group”). Your use of the Information, graphics and materials on the Guaranty Trust Website (“Material on this web site”) are governed by these Terms of Use and the Privacy and Security Statement. In addition to the terms contained in this document, there are also specific terms, which form part of the Terms of Use and govern your use of, and access to, certain sections of the Guaranty Trust Website. Since you are also bound by these additional terms, you should review them wherever they are accessible by you on the Guaranty Trust Website.

Links to Other Website

The Guaranty Trust Website may contain links to other websites operated by third parties (“third party Websites”). Guaranty Trust does not endorse, or approve of the operators of Third Party Websites, or the information, graphics and material on those third Party websites (“Third Party Material”). Guaranty Trust makes no warranties or representations:

Regarding the quality, accuracy, merchantability or fitness for purpose of Third Party Material or products or services available through Third Party Websites; or that third party material does not infringe the intellectual property rights of any person. Guaranty Trust is not authorizing the reproduction of Third Party Material by linking material on this website to Third Party Material. When you follow a link on the Guaranty Trust Website, material at a Third Party website may be displayed in your browser framed by material on this website. The material so displayed is also Third Party Material for the purpose of these Terms of Use.

All offers to sell and statements relating to goods and services available on third party websites are the responsibility of and given by the third party website operator, in so far as such offers and statements are made on the Guaranty Trust Website, expressly disclaims acting in any capacity on behalf of Third Party website operators. Guaranty Trust shall be at liberty to use for any purpose, any idea concept, know how or technique contained in any material delivered to Guaranty Trust Website by a visitor and Guaranty Trust shall not be subject to any obligations of confidentiality regarding such material except as required by law in relation to information supplied by customers. Guaranty Trust Product Information and Supply Material on this Website may contain general information about Guaranty Trust products and services. Unless expressly stated otherwise, this information:

Does not constitute an offer or inducement to enter into a legally binding contract; and
Does not form part of the terms and conditions for Guaranty Trust products and services.

For further information about a particular product or service please complete the e-form on the product or service page. All applications for credit are subject to the Guaranty Trust’s normal credit approval criteria.

Unless expressly agreed otherwise:

Products and service discussed in the section of the Guaranty Trust Website which refers to the Ghana operations of any Guaranty Trust member (the “Ghanaian Section”) will be provided only to Ghanaian residents. These products and services are generally not available to non-Ghana residents because they may not comply with non -Ghana laws. Again, product and services discussed in the sections of the Guaranty Trust Website which refer to the various non-Ghana operations of any Guaranty Trust member or discussed in websites operated by any Guaranty Trust member outside Ghana and linked to the Guaranty Trust Website (the “International Sections”) will be provided only to residents of the jurisdiction to which a particular International Section applies, and only to the extent those products and services comply with the laws of that jurisdiction.

Internet Banking

To have access to this service you must be a Guaranty Trust customer. The service grants you access to all the functions listed in this brochure, through the use of your Account Number and Passcode. Your passcode is used to give instructions and initiate transactions on your account. Do not disclose your passcode to anybody. If your passcode becomes known to a third party, you must immediately change it. You must inform us if your passcode is forgotten so that we can re -create another one for you.

You must understand that giving your Account Number/Passcode shall be sufficient confirmation of the authenticity of any instruction given or transaction initiated. Therefore, Guaranty Trust will assume that any instruction given with your Account Number/Passcode is originating from you. This means that we will not be responsible for any fraudulent, duplicate or erroneous instruction given to us or any such transaction initiated by means of your Account Number/passcode. Also note that we shall not be liable for complying with instructions given with your passcode if it is disclosed to a third party.

Please read the Internet Banking Brochure before using the service. We will not be liable for any failure to provide the service or to comply with these terms and conditions for any cause that is beyond our reasonable control.

Warranties

While we have made every effort to ensure that information is free from error, the Guaranty Trust does not warrant the accuracy, adequacy or completeness of material on this web site. No warranty of any kind, implied, express or statutory, including but not limited to the warranties of non -infringement of third party rights, title, merchantability and fitness for particular purpose if given with materials on the Guaranty Trust Website, all information is subject to change without notice. Guaranty Trust recommends that you seek independent advice before acting upon Material on this Website or Third Party Material. Guaranty Trust does not guarantee that the Guaranty Trust Website or Third Party Websites will be free from viruses, or that access to the Guaranty Trust Website or Third Party Websites will be uninterrupted.

Termination

These Terms of Use (and agreement constituted by your use of the information, graphics and materials on the Guaranty Trust Website) and your access to the Guaranty Trust Website may be terminated at any time by Guaranty Trust without notice. All disclaimers and limitations of liability by Guaranty Trust will survive termination.

Jurisdiction**Unless expressly agreed otherwise:**

The Ghanaian section is provided for use only by Ghanaian residents. The law applicable to use of the Ghanaian section and to disputes arising out of the Ghanaian section is the law of the Republic of Ghana; and each International Section is provided for use only by residents of the jurisdiction to which that International Section applies. The law applicable to use of each International Section and to disputes arising out of the International Section is to the extent possible, the law of the Republic of Ghana, and otherwise, the law of the jurisdiction in question.

Linking to Guaranty Trust Website

Please contact Guaranty Trust if you would like to place a link to any part of the Guaranty Trust Website.

Acceptance and Changes to Terms of Use

You acknowledge and accept that your use of the Guaranty Trust Website indicates your acceptance of these Terms of Use and the Privacy and Security Statement. These are the current Terms of Use. They replace any other terms of use for the Guaranty Trust Website published on the Guaranty Trust Website to date. Guaranty Trust may at any time vary the Terms of Use by publishing the varied Terms of Use on the Guaranty Trust Website. You accept that by doing this, Guaranty Trust has provided you with sufficient notice of the variation.

Guaranty Trust reserves any rights not expressly granted in these Terms of Use.

1. I/We undertake that this application, signed by me/us, is for the issuance of a Guaranty Trust Bank (Ghana) Limited (GTBank) Card for myself/ourselves and that in doing so, I/We do not represent the interest of someone else.
2. I/We understand that GTBank may decline my/our application without any reasons given us.
3. I/We understand that the GTBank Card remains the property of GTBank and I/We will surrender it unconditionally and without reservation upon demand by GTBank.
4. I/We undertake not to use or attempt to use the Card without sufficient funds in my/our account to cover the ATM withdrawal or purchase transactions.
5. I/We undertake not to use or attempt to use the Card after the Bank has notified me/us of the cancellation or withdrawal.
6. I/We undertake to immediately advise GTBank, when the Card is lost, stolen or misplaced, giving details of surrounding circumstances. I/We understand that if I/we fail to do so, I/we may increase the chances of fraud occurring on my/our account, and the Bank would not be responsible in anyway whatsoever for any unauthorized transactions on my/our account during this period.
7. I/We understand that I am/we are liable for any transaction that occurs on my/our account prior to reporting loss of my GTBank Card to the Bank.
8. I/We undertake to promptly return all found cards, previously reported by me as lost, to GTBank in the event that I/we do find them.
9. Under no circumstances will I/we disclose my/our Personal Identification Number (PIN) to anybody, including family members, business colleagues and GTBank staff, and GTBank will not accept any liability should I/we disclose my/our PIN to another person.
10. I/We recognize that I am or we are not allowed to give my/our card to anyone except those involved when doing a Point of Sale transaction. The card is owned by GTBank and has been given to me/us in trust and is therefore not transferable.
11. I/We hereby authorize GTBank to debit my/our account directly with all transactions undertaken at the Point Of Sale Terminals at ATMs with my/our card and I/we take full responsibility for these transactions. I/we also agree to accept the Bank's receipt of withdrawals and transactions as conclusive and binding.
12. GTBank is authorized to debit my/our account with fees in respect of the GTBank Card, for issue, use, and renewal or for providing the service therein.
13. GTBank reserves the right to terminate the services at any time without notice to me/us and without any liability whatsoever.
14. GTBank reserves the right to vary these terms and conditions at its discretion without notice to the applicant.
15. GTBank and its agents reserve the right to ask for proof of a GTBank Cardholder's identity if the GTBank Card is presented at its teller counters or Merchant points. This measure may be followed from time to time in order for GTBank to protect its esteemed customers against any possible fraud.
16. These terms and conditions are governed by the laws of the Republic of Ghana.



GTBank Visa Card Application Form

Guaranty Trust Bank (Ghana) Ltd.
RC C-68,758

Date: _____

Branch _____

Please complete in block letters & tick where applicable.

PERSONAL INFORMATION	FIRST APPLICANT	SECOND APPLICANT (JOINT ACCOUNT)
Title (Mr./Mrs./Dr./Miss., etc.)		
Surname		
First name		
Date of Birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Type of Identification	Passport <input type="checkbox"/> Voters ID <input type="checkbox"/> DVL <input type="checkbox"/> Student ID <input type="checkbox"/>	Passport <input type="checkbox"/> Voters ID <input type="checkbox"/> DVL <input type="checkbox"/> Student ID <input type="checkbox"/>
Identification Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mother's Maiden Name		
ADDRESSES		
Street /House Address		
Postal Address		
E-mail Address		
Tel / Mobile Number (s)		
BANK INFORMATION		
Account Number	_____ / _____ / _____ / _____	Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Foreign
Other Accounts to be linked to card	_____ / _____ / _____ / _____ / _____ / _____ / _____ / _____	
Account Name		
Is this your first Visa card	Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, please state why you are applying for a new card: _____		
<i>I/We confirm that I/ we have read and understood the terms and conditions overleaf</i>		
Signature		
Date		

(BANK USE ONLY)

Card Type: Visa Electron (D) <input type="checkbox"/> Visa Electron (I) <input type="checkbox"/> Visa Gold <input type="checkbox"/> Students Card <input type="checkbox"/>

Bank Official Details

Name _____ Signature _____

Authorised by _____ Date _____



Guaranty Trust Bank (Ghana) Ltd.
RC C-68,758

GTBank MasterCard Application Form

Date: _____

Branch _____

Please complete in block letters & tick where applicable.

PERSONAL INFORMATION	FIRST APPLICANT	SECOND APPLICANT (JOINT ACCOUNT)
Title (Mr./Mrs./Dr./Miss.,etc.)		
Last name		
First name		
Place of Birth		
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Type of Identity		
ID number		
Mother's maiden name		
ADDRESS	FIRST APPLICANT	SECOND APPLICANT (JOINT ACCOUNT)
Street /House Address		
Postal Address		
E-mail Address		
Tel/Mobile Number		
BANK INFORMATION		
Account Number	____ / ____ / ____ / ____ (Primary Account)	
2 nd Account to be linked	____ / ____ / ____ / ____ kindly note that this account will only be accessible on GTBank ATMs	
Account Name		
I/We confirm that I/we have read and understood the terms and conditions overleaf		
Signature		
Date		

(BANK USE ONLY)

Verified By:

Name _____ Signature / Date _____

Approved By:

Name _____ Signature / Date _____

KYC CHECKLIST – INTERNAL USE ONLY



(To be completed by Account Officer)

1. Customer Name: _____

2. Name of Signatory: _____

3. Account Type: _____

4. Accounts Number: _____

5. Identification of Account holder verified? Yes No

a. ID Type: _____ b. ID Number: _____

6. Name, Date of Birth, Nationality Verified (Via Document Submitted) Yes No

7. Residential Address Confirmed (Via Tenancy Agreement, Utility Bills, Income Tax Certificate, and other Bank's Statement etc) Yes No

8. Is the purpose of the account confirmed by applicant? Yes No Please state _____

9. Has applicant indicated source(s) of fund? Yes No Please state _____

10. I have information on the applicant's expected volume and type of activity to be conducted across the Bank Yes No

11. Transaction Types:
Inward transfers/Deposits (cash/cheque /salary) Please state _____

Outward transfers / Withdrawals Please state _____

Expected No. of transaction(s) per month Please state _____

Expected amount of transaction(s) per month Please state _____

12. Is the applicant 18 year or above? Yes No

13. Is the applicant resident in Ghana? Yes No

14. Does the applicant reside in a High Risk Country? Yes No

15. The applicant's funding is sourced from his / her normal business? Yes No

16. Is the applicant a PEP? Yes No

17. If the applicant is a PEP, specify details of PEP position

18. If an overseas customer resides or operate in High Risk Country (NCCT) specify the country

19. Where the customer's business involves gambling, defence or money services, give details

20. Where a customer is a PEP, resides in or sources funds from NCCT, then provide as follows

a. Sources of wealth generation: _____

b. Person's estimated net worth: _____

c. Estimated annual income: _____

21. Where the customer is a PEP or relates or transacts business linked to NCCT, seek management approval (i.e. MD, GM, Head, Compliance or SYSCON) before completing the account opening process.

Account Officer's Name: _____ Reviewer's Name: _____

Designation / Signature: _____ Designation / Signature: _____

Date: _____ Date: _____

Comments: _____ Comments: _____

Account Opening Approval (For High Risk Customer Only)

SYSCON / Compliance Head Name: _____ MD/GM Name: _____

Designation: _____ Designation: _____

Date: _____ Date: _____

Signature: _____ Signature: _____

KYC CHECKLIST – INTERNAL USE ONLY



(To be completed by Account Officer)

1. Customer Name: _____

2. Name of Signatory: _____

3. Account Type: _____

4. Accounts Number: _____

5. Identification of Account holder verified? Yes No

a. ID Type: _____ b. ID Number: _____

6. Name, Date of Birth, Nationality Verified (Via Document Submitted) Yes No

7. Residential Address Confirmed (Via Tenancy Agreement, Utility Bills, Income Tax Certificate, and other Bank's Statement etc) Yes No

8. Is the purpose of the account confirmed by applicant? Yes No Please state _____

9. Has applicant indicated source(s) of fund? Yes No Please state _____

10. I have information on the applicant's expected volume and type of activity to be conducted across the Bank Yes No

11. Transaction Types:
Inward transfers/Deposits (cash/cheque /salary) Please state _____

Outward transfers / Withdrawals Please state _____

Expected No. of transaction(s) per month Please state _____

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Designation / Signature: _____ Designation / Signature: _____

Date: _____ Date: _____

Comments: _____ Comments: _____

Account Opening Approval (For High Risk Customer Only)

SYSCON / Compliance Head Name: _____ MD/GM Name: _____

Designation: _____ Designation: _____

Date: _____ Date: _____

Signature: _____ Signature: _____

FOR BANK USE ONLY

DOCUMENTS OBTAINED – INDIVIDUAL ACCOUNT (CURRENT/EASYSAVERS/SENIORS/GTMAX)

	YES	NO	N/A	DEFERRED	WAIVED
1. Complete signature/mandate card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Reference form(Others)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Letter from Employer/School (for salary account and or student only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Identification(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Passport photograph(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. KYC(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Proof of Address(Current Utility Bill/ Tenancy Agreement) and Directional Maps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Resident Permit for Foreign Nationals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DOCUMENTATION CHECKED FOR;

- Scanned signature(s) and Scanned Picture(s)
- E-banking profiling (Internet Banking/SMS/GeNS/STMT)
- AML Profiling
- Other(s)

ACCOUNT OPENED BY

CIS _____
Name
Signature
Date

DEFERRAL/WAIVER OF DOCUMENT AUTHORIZED BY:

Name
Signature
Date

APPROVED BY

Name
Signature
Date