

NON RESIDENT GHANAIAN ACCOUNT OPENING FORMS



Guaranty Trust Bank (Ghana) Limited

INDIVIDUAL ACCOUNT

Please complete form and tick where necessary. (CAUTION - Kindly note that the use of correction fluid renders this form invalid)

Current Easy Savers Savings Target Save Smart Kids Save Smart Teens Save GT Crea8
 Seniors GT Max Others Currency: ₵ \$ £ €

Account Number (for official use only)

1. PERSONAL INFORMATION

Title Surname First Name
 Middle Name Educational level
 Marital Status (Please tick) Single Married Others Gender M F Date of Birth
 Place of Birth Nationality
 Mother's Maiden Name
 Length of stay at resident address Ownership: Owned Rented Living with parents
 Name of first child Child's date of birth
 Country of Residence Tax Identification Number (TIN)
 If US Citizen, please provide Social Security Number:
 For Smart Kids/Smart Teens Save, provide name of minor Date of Birth

2. CONTACT DETAILS

Residential Address
 Country City/Town
 State / Province Nearest Landmark
 Mailing address
 Mobile Number Telephone Number
 E-mail address

3. MEANS OF IDENTIFICATION

National ID Driver's License Passport Voter's ID SSNIT ID NHIS
 ID Number ID Issue Date ID Expiry Date

4. ADDITIONAL DETAILS

Purpose of Account: Savings Investment Others (Specify)
 Source of Funds: Investment Salaries Others (Specify)

5. EXPECTED MONTHLY ACCOUNT ACTIVITY

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

6. ACCOUNT SERVICE(S) REQUIRED (Please tick where applicable)

Card Preferences: Visa Gold Visa International Visa Domestic MasterCard Debit MasterCard GTCrea8
 Cheque Book Internet Banking Bank *737# e-Statement E-mail Alert (free) SMS Alert

7. EMPLOYMENT DETAILS

Employment Status Employed Self Employed Unemployed Retired Student Others

Employer's Name Date of Employment (if employed)

Employer's Address

City/Town Region

Nature of Business / Occupation E-mail

Office Phone Number Mobile Number

Monthly Salary/Income: Less than GH¢ 5,000 GH¢ 5,001 - 10,000 GH¢ 10,001 - 20,000 More than GH¢ 20,000

8. DETAILS OF NEXT OF KIN

Surname First Name Middle Name

Date of Birth Gender M F Title (specify) Relationship

E-mail Address Mobile Number

House Number Street Name

City / Town MMDA

9. DECLARATION

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

I/We agree to be bound by the 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:

10. DATA PROTECTION CONSENT

To enable Guaranty Trust Bank Ghana Limited. ("the Bank"), its affiliates and its contracted agents in managing and administering my/our account with the Bank, I/We hereby fully authorize the Bank and its affiliates and contracted agents, to share all information relating to me/us and my/our accounts, including, without limitation, any personal information, reference provided and other credit information maintained with or obtained by the Bank and its affiliates (including those obtained from credit reference agencies).

I/We further authorise the Bank, its affiliates and its contracted agents to use, store, process, share, disclose and transfer (whether within or outside the jurisdiction concerned) all information (including, without limitation, information relating to the debts), relating to me/us, as they shall consider necessary in connection with administering my 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 affiliates 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.

This consent does not limit any consent I/We have given (or may give) to the Bank to process or disclose my/our personal details.

I/We agree that the consent above is to be read in conjunction with the terms and conditions contained in the Bank's account opening form.

Name: _____ Signature: _____ Date:

11. JURAT (For non-literate and blind customers only)

I agree to abide by the content of this agreement and acknowledge that it has been truly and audibly read over and explained to me by an interpreter.

Mark of Customer /Thumbprint Mark of Interpreter /Thumbprint Date:

Name & Address of Interpreter Language of Interpretation

TERMS AND CONDITIONS

1. Definitions

- (a) "You" means the account holder named above, where two individuals are named, either or both of those individuals,
(b) "Accounts" means a current, savings or call account maintained with us at any of our branches in Ghana,
(c) "Mailing Address" means your mailing address in our records.
(d) "The Bank" refers to Guaranty Trust Bank (Ghana) Limited, (GTBank), a banking institution incorporated in Ghana and having its registered office at 25A Castle Road, Ambassadorial Area, Ridge. P.M.B CT 416, Cantonments, Accra, Ghana

2. Account Mandate

I/we (Customer) hereby request and authorize you to open account in my/our name and at any time subsequently to open further accounts as I/We may direct.
I/we (Customer) hereby undertake:

- I. To guard against access to my account (s) by unauthorized person(s)
II. To act as sole/co-signatory to the account (s)
III. To notify the Bank immediately there is any change in my/our address and other relevant information for the smooth running of my/our account (s)

3. The Account

All mandatory KYC documentation must be completed by the customer before the opening of the account. If you do not provide the required document during account opening, the account will be automatically restricted.

The customer shall assume full responsibility for the genuineness, correctness, and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments, receipts or other instructions deposited into account.

GTBank will not be responsible for any loss of funds deposited with it arising from any future government order, law, levy, tax, embargo, moratorium, exchange restriction or any other cause beyond its control.

Foreign Currency/Foreign Exchange Account(s) cash withdrawal from my/our account shall be subject to availability.

4. Cheque Confirmation Policy

GTBank will subject to review from time to time 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 may not be honoured or paid. This is to protect against the use of fake/forged cheques to withdraw money from your account(s).

5. Customer Responsibilities

- a) 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.
b) That all funds standing to my/our credit are payable on demand only in such local currency as may be in circulation.
c) To be bound by any notification of change in conditions governing the account directed to my/our last known address or e-mail address and any notice or letter sent to my/our last known address or e-mail address(s) shall be considered as duly delivered and received by me/us at the time it would be delivered in the ordinary course of post.
d) That if a cheque credited to my/our individual current/easy savers/seniors, corporate account is returned dishonored, the same may be transmitted to me/us through my/our last known address either by bearer or by post.
e) That I/We note that the Bank will accept no liability whatsoever for funds handed to members of its staff other than the cashiers/Tellers in the bank premises with the appropriate deposit slip.
f) That my/our attention has been drawn to the necessity of safe guarding my passwords, access codes, PINS and 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.
g) That the Bank is under no obligation to honour any cheques(s) drawn on this account unless there are sufficient funds in the account to cover the value of the said cheques(s). Cheques may be returned to me/us unpaid but if paid, I am/we are obliged to repay the Bank on demand.
h) That any disagreements with entries on my/our bank statements will be made by me/us within 15 days of receiving the bank statement failing receipts by the bank of a notice of disagreement of the entries within 15 days from the date of receipt of my/our bank statement, it will be assumed by the bank that the statement as rendered is correct.
i) That I/we in respect of our easy savers accounts will make a maximum of four withdrawals per month. That if in any month I/we make more than four (4) withdrawals, commission on turnover charge shall be applied on transactions for the month.

6. Right to set off

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 collateral and several or joint.

7. Bank *737#, SMS, E-Statements, E-Alert

Mode of Sending Monthly Statements of accounts is via e-mails.

- i. You are responsible for any information given by means of your passcode. This means that the Bank would not be responsible for any fraudulent, duplicate or erroneous instruction given to us by means of your passcode.
ii. The Bank will not be liable for any failure to provide the service or to comply with these terms and conditions for any reason that is beyond our control.
iii. The Bank may, for any valid reason, alter, suspend or terminate the service without giving you notice and shall not be liable for doing this.

8. Internet Banking

You must understand that giving your Account Number/Passcode shall be sufficient confirmation of the authenticity of any instruction given or transaction initiated. Therefore, the Bank 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 the Bank shall not be liable for complying with instructions given with your passcode if it is disclosed to a third party.

9. Debit Cards

- a) I/We understand that the GTBank Card remains the property of the Bank and I/we will surrender it unconditionally and without reservation upon demand by the Bank.
b) 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 unauthorised transactions on my/our account during this period.
c) 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 the Bank and has been given to me/us in trust and is therefore not transferable.
d) I/We hereby authorize the Bank to debit my/our account directly with all transactions undertaken at the Point Of Sale Terminals or 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.
e) The Bank is authorized to debit my/our account with fees in respect of the Card, for issue, use, and renewal or for providing the service herein.
f) The Bank reserves the right to terminate the services at any time without notice to me/us and without any liability whatsoever.
g) The Bank and its agents reserve the right to ask for proof of a Cardholder's identity if the Card is presented at its teller counters or Merchant points. This measure maybe followed from time to time in order for the Bank to protect its esteemed customers against any possible fraud.
h) I/We understand that if I/we fail to collect my/our card(s) after six months of issuance the Bank will destroy the card.

10. Termination

Either party may terminate this agreement by giving seven days written notice to the other party. However, the Bank may terminate this agreement with or without notice if the circumstance so warrant.

11. Jurisdiction

The operation of this account/relationship is subject to the laws and regulations at any time existing in the Republic of Ghana.

12. Disclaimer Clause

The Bank disclaims liability for any funds /assets deposited by you which are subsequently found to have been derived from illegal source or activities. You confirm that the funds/assets deposited or to be deposited are not derived from any illegal source or activities.

13. Amendments and Variations

GTBank reserves the right to vary these terms and conditions at its discretion without notice to the applicant.

FOR OFFICIAL USE ONLY

Risk Level Assessment Score: Low Medium High AML Manual Screening

Completed Mandate Card Passport Photograph Identification Proof of Residential Address Reference (if applicable)

ID or Birth Certificate of Minor (if applicable) Residence Permit Others

Account Opened by

CIS Officer

Signature & Date

Approved by

Name

Signature & Date

Banker's Confirmation



Guaranty Trust Bank (Ghana) Limited

To the Manager,
Guaranty Trust Bank (Ghana) Limited,
25A, Castle Road Ambassadorial Area, Ridge,
PMB CT 416, Cantonments, Accra-Ghana.
E-mail: nrgaccount@gtbank.com

Dear Sir/Madam,

Subject _____
(applicants name)

To Be Completed by Applicant

please provide us with information on the foreign account(s) you maintain presently

Name of Bank _____

Type of Account _____

Account Name _____

Account Number _____

Applicants address (Foreign) _____

Applicant's Authorisation

I hereby authorise my bankers to respond to this request for information from Guaranty Trust Bank (Ghana) Limited on my account relationship with you and mail this form directly to Guaranty Trust Bank (Ghana) Limited with the address stated above.

Last Name	First Name	Initial	Title
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Applicant's Signature and date

To Be Completed By Applicant's Bank

1. Date account was opened

2. Last date of transaction

3. Is account relationship satisfactory? Yes No

General Comments _____

We confirm to the best of our knowledge that the information provided as noted above is accurate.
This confirmation is given in good faith without prejudice to the organisation

_____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____
Officer's Name, Signature and Official Stamp	Date	Designation

Officer's e-mail address: _____

Officer's phone number: _____

REFERENCE FORM



Guaranty Trust Bank (Ghana) Limited

To the Manager,
Guaranty Trust Bank (Ghana) Limited,

Dear Sir/Madam,

Name of Individual(s) Opening An Account _____

I/We wish to confirm that I/We have known the above named individual(s) for _____ years and would like to comment on their suitability for the purpose of maintaining a current account with yourselves as follows:

I/We maintain a current account with: (please state name of Bank): _____

Address of Bank: _____

My/Our account number is: _____

and my/our phone no(s) is/are: _____

Yours faithfully,

Signature / Date

Signature / Date

Name of referee: _____

Address of referee: _____

"CAUTION"

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

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Where the referee is a GTBank current account holder

Is the account more than six (6) months? Yes No

Has signature/mandate been verified? Yes No

Is the account dormant Yes No

Is the account restricted Yes No

Confirm suitability of customer (please state) _____

Name: _____

CIS Officer

Signature & Date

Name: _____

Operations Head

Signature & Date