

SHILPA CHILDREN'S SAVINGS ACCOUNT OPENING MANDATE

National Development Bank PLC
Branch
 (Company Reg. No. PQ 27)

Please open a Shilpa Children's Savings account as details below,

Currency type

LKR USD EUR AUD GBP SGD JPY HKD Other (Specify) _____

For Bank Use Only									
Date									
A/C No									
CID Minor									
CID Guardian									

Account holder's Information									
Full Name (As per birth certificate)	Master/Miss	Date of Birth	D	D	M	M	Y	Y	Y
Birth Certificate Number	Nationality	Place of Birth							
Contact Numbers	HOME	MOBILE							
Address for Correspondence									

Parent's / Guardian's Information									
Full Name (Underline the surname)	Mr./Mrs./Miss/Dr.	NIC / PP / DL No							
		Date of Birth	D	D	M	M	Y	Y	Y

Other Services (Please tick (✓) if you wish to obtain any of below mention services)									
(I) e-Statement	<input type="checkbox"/>	Email address							
(II) SMS alert for Accounts	<input type="checkbox"/>	Mobile number							

Source of Funds									
Initial Deposit	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>	Transfer from <input type="checkbox"/>	Other (Specify) _____					
Expected source and nature of credits into the account	Gift <input type="checkbox"/>	Family Remittances <input type="checkbox"/>	Other (Specify) _____						
Anticipated Volume	Less than LKR 1,000,000 <input type="checkbox"/>	LKR 1,000,000 to LKR 5,000,000 <input type="checkbox"/>	Over LKR 5,000,000 <input type="checkbox"/>						
Purpose for opening the account	<input type="checkbox"/> Savings	Other (Specify) _____							
Non residents – Reason for opening the account in Sri Lanka									
Monthly Savings Pledge Amount	Rs _____								
Is the minor or any member of minor's immediate family a politically exposed person * (PEP) or a Close Associate of a PEP?	<input type="checkbox"/> Yes (If "yes" please specify Name and Relationship)	<input type="checkbox"/> No							

I/We having read and understood the Terms and Conditions governing National Development Bank PLC Shilpa Children's Savings Accounts, do agree to abide by them at all times and authorize you to open a Shilpa Children Saving's Account subject to the terms and conditions.

Signature (Please sign inside the cage)

Parent / Guardian **	Minor (If able to sign)	Date
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** Parent / Guardian proposed for insurance cover.

* Financial Intelligence Unit (FIU) Definition for PEP (Politically Exposed Persons)

An individual who is entrusted with prominent public functions either domestically or by a foreign country, or in an international organization and includes a Head of a State or a Government, a politician, a senior government officer, judicial officer or military officer, a senior executive of a State owned Corporation, Government or autonomous body but does not include middle rank or junior rank individuals.

FIU Definition for

"Immediate family member" includes – the spouse, children and their spouses or partners, parents, siblings and their spouses and grandchildren and their spouses

"Close associate" includes –

(a) a natural person having joint beneficial ownership of legal entities and legal arrangements, or any other close business relationship; and

(b) a legal person or legal arrangement whose beneficial owner is a natural person and is known to have been set up for the benefit of such person or his immediate family members.

FOR BANK USE ONLY									
Account Opening Check List									
Copy of Birth Certificate <input type="checkbox"/>	Guardian's / Parent's NIC/PP/DL Copy <input type="checkbox"/>	Copy of address verification document of Parent/Guardian <input type="checkbox"/>							
KYC profile for the Parent / Guardian <input type="checkbox"/>	Risk Rating Form <input type="checkbox"/>								
Account Opened by		Authorized by		Date					
E-Statement Input by		Authorized by		Date					
For Shared Services Use									
Instructions input by		Authorized by		Date					

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(Detach here)

Standing Order

Manager,
 _____ Bank PLC

Please transfer/remittance a sum of Rupees _____ (SL Rs)
 from my current/savings account No _____ to the Shilpa Children's savings account No _____
 of Master / Miss _____ at National Development Bank PLC _____
 Branch on the _____ day of every month commencing from _____
 until further notice.

For Shared Services Use		
SO number		
Duplicate check		
	Name	Initial
Input		
Authorized by		

 Signature of Parent / Guardian