



Branch

Date

/ /

Business Account (Please complete in BLOCK CAPITALS)

I / We wish to open (please tick)

Current Account	GBP	USD	EUR	Other
Time Deposit Account	GBP	USD	EUR	Other

Account title

Account number (Bank to supply)

Category (Type of business)

Sole Proprietor Partnership Private Limited Company Public Limited Company
Limited Liability Partnership Trust Account Registered Charity

if other, please specify

Country of incorporation / formation
(Country of incorporation, in case of company)
Country of operations
(Complete only if different from
'Country of incorporation')

Registered address

Number / Name / Street

City / County / State

Country

Postcode / Zip code

Trading address (if different from registered)

Number / Name / Street

City / County / State

Country

Postcode / Zip code

Date of incorporation (DD/MM/YYYY)

/ /

Registration number

Nature of business

Tax Status

Please choose one option

Your business derives more than 50% of its income from manufacturing, commercial business and/or creation sale of goods/services

Your business derives more than 50% of its income from interest, dividend, income equivalent to interest, rents and royalties, annuities, the excess of gains over losses from the sale or exchange of property etc
(Please complete Tax Status Declaration Form)

Please state the country(ies) in which the account holding entity is resident for tax purposes along with its tax identification number (TIN).
(If you have more than two countries information to provide, please use additional forms.)

Country 1

TIN/functional equivalent

Country 2

TIN/functional equivalent

	First applicant						Second applicant					
Business position	Director			Secretary			Director			Secretary		
	Authorised Signatory			Shareholder			Authorised Signatory			Shareholder		
	Other						Other					
<i>if other, please specify</i>												
Existing customer	Yes	No					Yes	No				
<i>if yes, please complete branch and account number</i>												
Branch												
Account number												
Prefix	Mr	Mrs	Miss	Ms	Dr	Other	Mr	Mrs	Miss	Ms	Dr	Other
<i>if other, please specify</i>												
First name												
Middle name												
Surname												
Gender	Male		Female				Male		Female			
Marital status	Single		Married		Other		Single		Married		Other	
<i>if other, please specify</i>												
Nationality												
Dual Nationality 1												
Dual Nationality 2												
Date of birth (DD/MM/YYYY)			/			/			/			/
City of birth												
Country of birth												
Profession												
Type of ID	Passport		UK Driving Licence		Other		Passport		UK Driving Licence		Other	
<i>if other, please specify</i>												
ID number												
ID expiry date (DD/MM/YYYY)			/			/			/			/
Are you a UK resident	Yes	No	Other				Yes	No	Other			
<i>if other, please specify</i>												
Are you registered on the UK voters roll	Yes	No					Yes	No				
<i>if no, do you have any County Court Judgements (CCJs)</i>												
Visa type												
Visa reference number												
Visa expiry date (DD/MM/YYYY)			/			/			/			/

Residential address	First applicant	Second applicant
Number / Name / Street		
City / County / State		
Country		
Postcode / Zip code		
Date moved to this address (DD/MM/YYYY)	/ /	/ /
Proof of address (dated within 3 months)	Utility bill Bank statement Government issued document	Council tax bill Driving licence Government issued document
<i>please specify government issued document</i>		

Please give your previous address if you've been at your present address for less than three years.

Number / Name / Street		
City / County / State		
Country		
Postcode / Zip code		
Date moved to this address (DD/MM/YYYY)	/ /	/ /

Personal contact details

Phone (mobile)		
Phone (work)		
Phone (residence)		
Email address		
Fax number		

Account operation

Account operation	Single	Either or Survivor	Jointly	Other
<i>if other, please specify</i>				

Correspondence address

Correspondence address	
Postcode / P.O. Box	

Type of services

Cheque book	Yes	No		
Statement (please select one)	Paper statement	E-statement		
<i>if E-statement, please provide email address</i>				
Statement frequency	Monthly	Half-yearly	Annually	
Internet banking	Yes	No		
preferred login name A (at least six characters)				
preferred login name B (at least six characters)				
preferred login name C (at least six characters)				
GSM services				
Balance enquiries	Daily balance	All debit balance	Credit balance only	
Transaction enquiries	All transactions	All debit transactions	All credit transactions	
Other enquiries	Other bank's cheque cleared	Other bank's cheque returned	Your cheque returned	Your cheque cleared
Accept fax/electronic instruction	Yes	No		
<i>if yes, it is mandatory to have GSM Mobile Debit Notification</i>				
	Mobile number			

Introduction / reference

Name of Introducer (Bank details if applicable) of individual / entity who maintains account with our Bank:

Branch

Account number

Signature

Declaration of identity of the beneficial owner

I / We the contracting partner hereby declare that the individual(s) / partnership(s) / legal (entities) listed below is / are the beneficial owner(s) of the assets, deposited under the above relationship. If the contracting partner is also the sole beneficial owner of the assets, the contracting partner's details must be set out below.

Last name, First name / (Company name)	%	Date of Birth	Nationality	Address / registered office and country
---	---	---------------	-------------	---

The contracting partner undertakes to automatically inform the bank of any changes.

I / We confirm that to the best of my / our knowledge and belief the information given above is correct. I / We agree to provide the Bank with any additional documentation which the Bank requires. I / We undertake to advise the Bank immediately of any changes affecting the above information. I / We authorise the Bank to make such enquiries and to take up such references as it may consider necessary with regard to the opening of such account.

I'd like to receive exclusive news and marketing material by email / post from Habib Bank Zurich plc

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
--------------------------	-----	--------------------------	----

Declaration

By signing this Account Opening Form, you will become legally bound by the Bank's General Banking Terms and Conditions for Business Accounts. For your own benefit and protection you should read these terms carefully before signing this Account Opening Form. If you do not understand any point please ask for further information.

By signing this form you are confirming that you have received, read and agreed to the Bank's General Banking Terms and Conditions for Business Accounts.

Name

Signature

Name

Signature

For official use only

Account opening officer

Relationship / Branch manager

Signature

Branch

Date

/ /

Dear Sir,

YOUR APPOINTMENT AS BANKERS OF OUR COMPANY:

We confirm that in the Board of Directors Meeting of our Company, the following Resolution was passed and entered in the Minute book.

“ IT WAS RESOLVED:

a. That an account or accounts be opened with **Habib Bank Zurich plc** with the instructions:

- (i) to honour and comply with all cheques, bills, drafts, promissory notes, acceptances, negotiable instruments and orders which may be drawn, accepted, made or given on behalf of this Company at any time or times whether the account or accounts of this Company be for the time being in credit or overdrawn or may become overdrawn in consequence of such debit,
- (ii) to honour and comply with all instructions to deliver or dispose of any securities or documents or property whether held as security or for safe custody by the Bank on behalf of the Company,
- (iii) to treat all cheques, bills, drafts, promissory notes, acceptances, negotiable instruments and orders as being endorsed, if required, on behalf of the Company and to discount or otherwise deal with them,
- (iv) to treat for and on behalf of the Company applications for financing / credit / debit card / internet banking and banking facilities including opening of letters of credit of any kind or Bank guarantees of Bonds of any kind, or instructions for sale of purchase of Foreign Exchange.

Provided that such cheques, bills, drafts, promissory notes, acceptances, negotiable instruments, or documents are signed by any of the following directors or Officers as stated below:

Names	Designation	Operation singly or jointly	Signature

- b. That a director of a Company has full authority in accordance with the Memorandum & Articles of Association; for and on behalf of the Company to arrange with the Bank from time to time banking or finance facilities whether secured or unsecured and to mortgage or charge all or any of the assets of the Company including goodwill and uncalled capital and to sign on behalf of the Company any documents from time to time required by the Bank relating to or for securing any liabilities of the Company to the Bank, and to sign any guarantees, indemnities or counter indemnities or other undertakings to the Bank.
- c. That the Bank be furnished with a copy of the Company's Memorandum and Articles of Association / Constitutional Documents and with copies of any amending special resolutions that may from time to time be passed.
- d. That the Bank be furnished with a list of the names of the directors, secretary and other officers of the Company and specimen signatures of authorised signatory on the account.
- e. That the resolutions shall be communicated to the Bank and remain in force until an amending resolutions shall be passed by the Board of Directors and a copy thereof certified by any two directors and the secretary shall be communicated to the Bank. “

2. We hereby certify the above Resolution to be a true copy from the Minutes of a properly and duly held meeting on

/ /

	Chairman / Director	Secretary / Director
Signature 1		
Signature 2		



Habib Bank AG Zurich is the trading name of Habib Bank Zurich plc.
Registered office: Habib House, 42 Moorgate, London EC2R 6JJ.
Registered in England and Wales: Company registered number: 08864609.

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority
and the Prudential Regulation Authority under registration number 627671.
Habib Bank Zurich plc is covered by the Financial Services Compensation Scheme.

HBUK 026 – 15.07.2020