

Account Opening Form: Entities (Incorporated/Non-incorporated)



The form should be completed in CAPITAL LETTERS.

1. Account Information

Date Branch

(Please indicate the business category and type of account to open by ticking the applicable box below)

Category of Business: (Tick as appropriate) Limited Liability Company Sole Proprietorship MDA's Schools
 Partnership Others (please specify) _____

Account Type (Tick as appropriate) Savings Account Current Account Investment Account

USD \$	GBP £	EUR €	Others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have an existing account with us? Yes No

If Yes, state account number Branch

Customer Classification MSME Commercial Corporate Public Sector

Documentation Required

Proof of Address and Reference Utility Bill Residence Permit Reference(s)

Currency/Account Transaction Charges Account Maintenance Fee Yes No (If NO, please select an option below)
 Minimum Balance Credit Turnover Bands (Terms and conditions apply)

Tax Identification Number

CRM No/Borrower's Code (Where Applicable)

Special Control Unit Against Money Laundering (SCUML) Reg. No.

Average Annual Turnover

Less than N24m N24m-N120m N120m-N600m N600m-N4.8b above N4.8b

Is your company quoted on any Stock Exchange? Yes No

If YES, indicate which Stock Exchange and the Stock Symbol

Company Details

Company/Business Name

Certificate of Incorporation/Registration Number

Date of Incorporation/Registration Day Month Year

Jurisdiction of Incorporation/Registration

Type/Nature of Business

Operating Business Address 1

Operating Business Address 2

Email Address

Phone Number(s)

Account Services (please select)

Transactional Alert Preferences Email alert (free) SMS Alert (Fees applies)

Statement Preferences Email Collection at Branch

Statement Frequency Monthly Quarterly Semi-Annually Annually

Cheque Book Requisition (Fee applies) Crossed Cheque 50 Leaves

Cheque Confirmation: Will you like to pre-confirm your cheques? Yes No

Cheque Confirmation

Threshold: (if the answer to the above is YES, please specify the threshold from N150,000.00)

Sterling Mobile Internet Banking (Corporate) ATM POS

Cards

Verve Verve Prepaid Visa Prepaid Master Debit Others (Specify) _____

Account Signatory Details

SIGNATORY 1

Title Mr. Mrs. Others (Specify) _____

Gender: Male Female

Surname	
First Name	Other Name
Date of Birth <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Place of Birth <input type="text"/>
Mother's Maiden Name	Nationality
Religion (Optional)	State of Origin

L.G.A.	Occupation
Status/Job Title	CERPAC/Resident Permit No. (For Non-Nigerians)
Type of Identification	Identification No.
Bank Verification Number (BVN)	

Do you have any political affiliation/or a relationship with a public office holder? Yes No

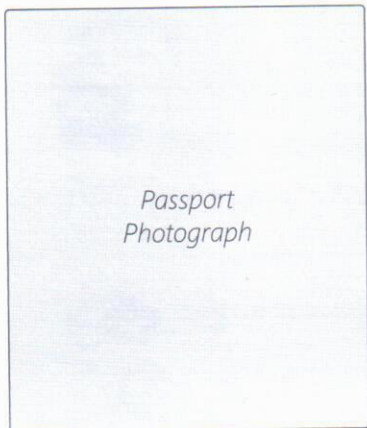
If yes, state the relationship _____

Do you hold any political position presently or held any in the past? Yes No

If yes, state the position _____

Residential Address _____

State	City/Town	L.G.A. (Residential)
Nearest Bus Stop/Landmark		
Phone Number 1		Phone Number 2
Email Address		



Signature _____ Date

Class of Signatory (A,B,C, etc)

Mandate Authorization/Combination Rule (please tick as appropriate) Sole Signatory Either to Sign Both to Sign

Mandate Instruction _____

FOR BANK USE ONLY (SERVICE MANAGER)

Name	Signature
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FOR BANK USE ONLY (BUSINESS MANAGER)

Name	Signature
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SIGNATORY 2

Title Mr. Mrs. Others (Specify) _____

Gender: Male Female

Surname	
First Name	Other Name
Date of Birth <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Place of Birth <input type="text"/>

Mother's Maiden Name	Nationality
Religion <i>(Optional)</i>	State of Origin
L.G.A.	Occupation
Status/Job Title	CERPAC/Resident Permit No. <i>(For Non-Nigerians)</i>
Type of Identification	Identification No.
Bank Verification Number (BVN)	

Do you have any political affiliation/or a relationship with a public office holder? Yes No

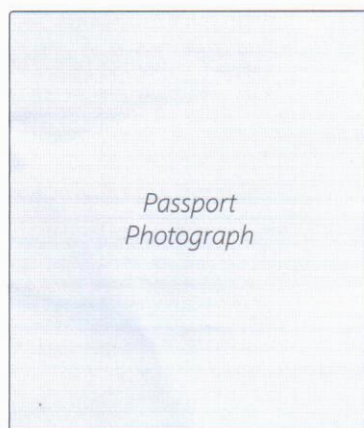
If yes, state the relationship _____

Do you hold any political position presently or held any in the past? Yes No

If yes, state the position _____

Residential Address		
State	City/Town	L.G.A. <i>(Residential)</i>
Nearest Bus Stop/Landmark		
Phone Number 1		Phone Number 2

Email Address _____



Signature	Date <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YY"/> <input type="text" value="YY"/>
Class of Signatory (A,B,C, etc) <input type="text"/> <input type="text"/> <input type="text"/>	
Mandate Authorization/Combination Rule <i>(please tick as appropriate)</i> Sole Signatory <input type="checkbox"/> Either to Sign <input type="checkbox"/> Both to Sign <input type="checkbox"/>	
Mandate Instruction _____	
FOR BANK USE ONLY (SERVICE MANAGER)	
Name _____	Signature _____
FOR BANK USE ONLY (BUSINESS MANAGER)	
Name _____	Signature _____

SIGNATORY 3

Title Mr. Mrs. Others *(Specify)* _____ **Gender:** Male Female

Surname	
First Name	Other Name
Date of Birth <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YY"/> <input type="text" value="YY"/>	Place 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"/>
Mother's Maiden Name	Nationality
Religion <i>(Optional)</i>	State of Origin
L.G.A.	Occupation
Status/Job Title	CERPAC/Resident Permit No. <i>(For Non-Nigerians)</i>
Type of Identification	Identification No.
Bank Verification Number (BVN)	

Do you have any political affiliation/or a relationship with a public office holder? Yes No

If yes, state the relationship _____

Do you hold any political position presently or held any in the past? Yes No

If yes, state the position _____

Residential Address		
State	City/Town	L.G.A. <i>(Residential)</i>
Nearest Bus Stop/Landmark		

Phone Number 1 _____ Phone Number 2 _____

Email Address _____



Signature _____

Date

DD	MM	YY	YY
----	----	----	----

Class of Signatory (A,B,C, etc)

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Mandate Authorization/Combination Rule (please tick as appropriate) Sole Signatory Either to Sign Both to Sign

Mandate Instruction _____

FOR BANK USE ONLY (SERVICE MANAGER)

Name _____ Signature _____

FOR BANK USE ONLY (BUSINESS MANAGER)

Name _____ Signature _____

Details of the Directors/Executives/Trustees/Promotees/Executors/Administrators/Principal Officers

DIRECTOR 1

Title Mr. Mrs. Others (Specify) _____ **Gender:** Male Female

Surname _____

First Name _____ Other Name _____

Date of Birth

DD	MM	YY	YY
----	----	----	----

 Place of Birth

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mother's Maiden Name _____ Nationality _____

Religion (Optional) _____ State of Origin _____

L.G.A. _____ Occupation _____

Status/Job Title _____ CERPAC/Resident Permit No. (For Non-Nigerians) _____

Type of Identification _____ Identification No. _____

Bank Verification Number (BVN) _____

Do you have any political affiliation/or a relationship with a public office holder? Yes No

If yes, state the relationship _____

Do you hold any political position presently or held any in the past? Yes No

If yes, state the position _____

Residential Address _____

State _____ City/Town _____ L.G.A. (Residential) _____

Nearest Bus Stop/Landmark _____

Phone Number 1 _____ Phone Number 2 _____

Email Address _____

DIRECTOR 2

Title Mr. Mrs. Others (Specify) _____ **Gender:** Male Female

Surname _____

First Name _____ Other Name _____

Date of Birth

DD	MM	YY	YY
----	----	----	----

 Place of Birth

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mother's Maiden Name _____ Nationality _____

Religion (Optional) _____ State of Origin _____

L.G.A. _____ Occupation _____

Status/Job Title _____ CERPAC/Resident Permit No. (For Non-Nigerians) _____

Type of Identification _____ Identification No. _____

Bank Verification Number (BVN) _____

Do you have any political affiliation/or a relationship with a public office holder? Yes No

If yes, state the relationship _____

Do you hold any political position presently or held any in the past? Yes No

If yes, state the position _____

Residential Address _____

State	City/Town	L.G.A. (Residential)
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Nearest Bus Stop/Landmark _____

Phone Number 1	Phone Number 2
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Email Address _____

At the meeting of the Board of Directors of _____

Held at _____ On the _____ Day of _____

Whose business/registered address is at _____

The following resolutions were passed.

1. That a current account be opened with Sterling Bank Plc ("the Bank") and the officers and agents of the Company be and are hereby authorised to deposit any of the funds of the Company in the bank at its head office or any of its branches.
2. That the Bank be instructed to issue the Company with a new cheque book to operate the account and the charges debited to the Company's account.
3. That the Company agrees that in addition to any general lien or similar right to which bankers may be entitled by law, the Bank may at any time and without notice to the Company combine or consolidate all or any of the Company's account and/or liabilities to the Bank 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 the Company with the Bank, in or towards satisfaction of any of the Company's liabilities including accrued interest to the Bank or any other account or in any other respect whether such liabilities be actual or contingent, primary or collateral, several or joint.
4. That the Bank be instructed to act on any instructions given on behalf of the Company for, or in relation to, any business requiring foreign exchange including but not limited to:
 - i) The purchase or sale of any foreign exchange;
 - ii) Opening documentary letters of credit to the intent that this shall not be a general authority but shall require specific instructions;
 - iii) The signing and settlement of exchange contracts;
 - iv) The signing and obtaining delivery of merchandise against Trust Receipts.
5. That in consideration of the Bank providing the Company with foreign exchange facilities from time to time, in the ordinary course of business, the Company agrees :-
 - i) To indemnify the Bank against any loss, liability, damages or expense that the Bank may incur as a result of our failure to comply with any of the Nigerian Customs or Exchange Control Regulations for the time being in force.
 - ii) To deliver to the Bank, as soon as possible and not later than sixty (60) days after shipment in the ordinary course of business, on any import transaction through the bank, the Exchange Control copy of the Customs Bills of Entry relating to such payment.
 - iii) To the debiting of our account or pay on demand to the Bank, the amount of any fine, loss, liability, damages and/or expense incurred by the Bank due to our failure to produce the required Customs Bill of Entry or our having been in breach of the Nigerian Customs or Exchange Control Regulations.
6. That the Company is not in default of any obligation, whether to a bank, insurance company or any other creditor and that obtaining credit from the Bank, whether actually utilized or not will not cause the Company to be in default of any obligation, whether to a bank, insurance company or any other creditor. That the Company is not in default of any provision of its Memorandum and Articles of Association and that obtaining credit from the Bank, whether actually utilized or not, will not cause the Company to be in default of any provision of its Memorandum and Articles of Association.
7. That the Bank be instructed to accept any indemnities, counter indemnities or other undertakings of any nature given on behalf of the Company.
8. That in connection with the opening of this account with the Bank, the Bank is required to carry out a search at the Corporate Affairs Commission to verify the authenticity of the information that the Company has supplied to it. The Company hereby authorizes the Bank to debit its account with the Bank with costs associated with this Search. The Company understands that these costs may change from time to time. The Bank is not obliged to inform the Company of any changes in these costs. The Company also agrees that in the event that there are insufficient funds in its account to cover the costs associated with the search, it undertakes to immediately pay into its account a sum sufficient to satisfy such cost as may be advised by the Bank.
9. That the Bank will pay interest income on the daily balances in your classic current account as negotiated and agreed with the Bank.
10. That the authorised signatories as stated herein are hereby authorised on behalf of the Company.
 - i) To borrow money and to obtain credit for the Company from the Bank on any terms and to make delivery notes, drafts, acceptances, instruments of guarantee, agreements and any other obligations of the Company thereof in a form satisfactory to the Bank.
 - ii) To grant security interests in and/or pledge or assign and deliver, as security for money borrowed or credit obtained, stocks, bond, instruments, bills receivable, accounts, mortgages, merchandise, bill of lading, warehouse receipts and other documents, insurance policies, certificates and any other property now or hereafter held by or belonging to the Company, with full authority to endorse, assign or guarantee any of the same in the name of the Company.
 - iii) To discount any bills receivable or any paper held by the Company with full authority to endorse the same in the name of the Company.
 - iv) To withdraw from the Bank and give receipt for, or to authorize the Bank to deliver to bearer or one or more designated persons, all or any documents and securities or any other property held by it, whether held as collateral security or for safekeeping or for any other purpose.
 - v) To authorize and request the Bank to purchase or sell through the account of the company stocks, bonds or other securities.
 - vi) To execute and deliver all security and other agreements, financing statements and other papers required by the Bank in connection with any of the foregoing matters.
11. That any and all withdrawals and borrowing of money and/or other transactions on behalf of the Company with the Bank are hereby ratified, confirmed and approved, and that the Bank may rely upon the authority conferred by the entire resolution until the receipt by it of a certified copy of a resolution of the Board revoking or modifying the same. The Company understands and agrees:
 - i) That the Bank is authorised to debit from its account (s) the usual banking charges, interest, commissions, and any sums wrongly credited to the account (s) and to take such steps to recover such sums with interest thereon. That the Bank is not bound to honour any cheque(s) drawn on the account (s) unless the account (s) is/are adequately funded.
 - ii) All drawings above approved limits will be subject to debit interest charge at the bank's default interest rate, which may change from time to time. The bank is not obliged to inform the company of any changes in its default rate. Any subsequent resolution of the coy will not remove this right from the bank.
 - iii) To be responsible for repayment of any overdraft with interest.
 - iv) To assume full responsibility for the genuineness, correctness and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments and receipts or other documents deposited in my/our account.
 - v) To comply with and be bound by the terms and conditions governing the operation of the account(s).
12. That the Company shall not be entitled to the value of a cheque lodged with the Bank until after the requisite clearing period in accordance with the clearing rules in force at the time of lodging the said cheque. Where the Bank, however, allows drawings by the Company against uncleared cheque(s) and the cheque(s) is returned thereafter, it shall have a right to hold on to the returned cheque(s) and take any further action it deems appropriate to recover the value of the cheque from the Company, with interest.
13. (i) That the Bank shall whenever it deems appropriate, have a right to confirm the issuance of a cheque drawn on the Company's account(s) directly from the signatories of the account(s) failing which the Bank may return the cheque(s) with "Drawer Confirmation/Attention Required" endorsed thereon.
- (ii) That the Company shall not in any instance issue third party cheque(s) against unfunded account(s) and where the Company defaults in three instances, the Bank has a right to report to the CBN as required by Regulations
14. That we agree and undertake to safe guard our cheque book so that unauthorized persons shall not have access to it and to the fact that neglect of this precaution may be a ground for any consequential loss being charged to our account and shall exempt the Bank from liability thereof.
15. That the Bank may at its discretion close our accounts in the event that it is dissatisfied with the operation thereof whether or not the account be in credit or debit.
16. That the Company shall provide the Bank with a list of the names of the officers of the Company, and shall from time to time, inform the Bank in writing of any changes which may take place.
17. That the Bank is hereby authorised to honour the instructions of the persons stated below and whose names are in the specimen signature card delivered to the Bank.
18. That until the Bank receives any written notice by way of the Company's resolution to the contrary, the Bank is hereby instructed to honour signature (s) appearing hereunder for all purposes on the Company's accounts as mandated above.
19. That no liabilities whatsoever shall be ascribed to the Bank for funds handed to members of staff of the Bank outside banking hours or outside the Bank's premises, unless by specific agreement in writing with the Bank, and hereby indemnify and keep the Bank indemnified against all loss, claim, damages or action that may arise therefrom.
20. That we shall notify the Bank of any disagreement with entries on our Bank statement within 15days of receipt of the Bank statement via any medium including but not limited to electronic mail, printed statement or internet Banking screen shot, failing which the Bank is expressly permitted to assume that the statement as rendered is correct, and that we have no objections.
21. That the Bank may close any of our accounts with the Bank, 7 days after dispatch of notice in writing, of the Bank's intention to do so, to us at our last known address.
22. If a fraudulent activity is associated with the operation of your account, you agree that we have the right to apply restrictions to your account and report to appropriate law enforcement agencies
23. That the Bank may act on any instruction to counter and/or revoke any cheque, draft or other instrument before payment is effected.
24. That we hereby indemnify and keep the Bank indemnified against all loss, claim, damages, action, liabilities or request for repayment of any loss or damage to funds, instruments or documents deposited with the Bank, which occurs as a result of any Government order, law, levy, tax, embargo, moratorium, exchange restriction and/or other causes beyond the Bank's control.
25. That all funds standing to our credit in our accounts are payable on demand only in such currency as they were remitted or deposited.

We /I _____ agree that all such instructions are binding on us/me subject to the Bank's confirmation of such transaction via either Recorded voice call to my registered phone number or Email notification to my registered email address. _____

We /I _____ of _____ hereinafter called " _____ " hereby irrevocably undertake to indemnify Sterling Bank against any liability, loss, damage, injury, claim, distress, action or proceedings which may be incurred, sustained, paid or made against Sterling Bank occasioned or in consequence of the execution of any instruction in line with the above.

Signature	Signature
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Note: Please ensure total compliance with mandate.

E-mail address and Phone number MUST be indicated if Electronic mail and/or Text messages is/are selected.

The following terms and conditions shall govern Sterling Bank Plc. electronic products and services.

DEFINITIONS

"**Bank**" refers to Sterling Bank PLC (Sterling), an institution incorporated in Nigeria with registered office at Sterling Towers, 20 Marina, and Lagos.
"Electronic products" refers to the electronic products issued by Sterling Bank, to its customers for use on their mobile devices, computers, and electronic gadgets and at ATMs and POS terminals. "**Customer**" refers to the customer of Sterling Bank PLC authorized to use the e-products and services chosen. "**Account**" refers to the customers current and, or savings account or any other type of account authorized by the bank as eligible accounts to operate through the use of the e-products. "**Personal Identification Number (PIN)**" refers to the four digit secret password used by the cardholder to access provided services. "**InterSwitch Ltd**" is a transaction switching and processing company that provides support for debit card related networks. "**InterSwitch Network**" refers to the network of ATMs and POS terminals owned by InterSwitch member banks located across the country. These machines accept debit cards and are identifiable by the InterSwitch logo or Acceptance mark displayed on them. "**Hotlist**" refers to the deactivation of an e-product from use on the InterSwitch network when it is reported lost or stolen. "**Username**" refers to a sequence of characters that identifies a customer when logging onto his account via a computer, mobile device or any electronic gadget. "**Password**" refers to a secret series of characters that allows you to log onto his account via a computer, mobile device or any electronic gadget. "**Token**" refers to a round piece of plastic issued to the customer which authenticates his transactions on the Internet Banking Platform. "**Electronic cards**" refers to our **visa debit, visa prepaid, verve prepaid, verve debit** electronic cards.

ELECTRONIC CARD USAGE AT ATMS

The electronic cards are acceptable at all Sterling Bank ATMs and at all other ATMs within and outside Nigeria displaying the InterSwitch logo, Visa logo or Acceptance Mark and belonging to institutions other than the bank. The Sterling electronic cards are valid for the service period stated on the card. Upon expiration, the cardholder is advised to destroy the card by cutting it in half diagonally and returning the halves to the bank. A fresh card will be issued upon request for renewal. The Card can be used with the help of a confidential PIN at the ATM locations mentioned in clause 1 herein above. The cardholder must ensure that the PIN received is changed at first use and is responsible for maintaining the confidentiality of the PIN. The ATM generates a slip once a transaction is completed. The amount of the transaction is debited immediately from the account of the cardholder that is linked with the electronic card. For all transactions, the receipt produced by the ATM shall be binding on the cardholder. Transaction fees payable for use of the electronic cards at Sterling or non-Sterling ATMs will be as prescribed from time to time.

Any dispute or difference arising between the cardholder and the bank (of the nature not covered by clause 2 herein above) arising out and, or related to these terms and conditions shall be settled by mutual conciliation / discussions failing which the same shall be referred to the InterSwitch arbitration Board for resolution. The Card will be retained by an ATM following repeated keying of the wrong PIN three consecutive times in a day, due to technical failure or if a card has been reported lost or stolen and subsequently hot-listed. While Sterling Bank will ensure that the electronic card is re-issued as soon as possible, the bank accepts no liability for any losses arising from non-availability of the electronic card or service technical failure. The cardholder shall immediately notify the bank upon loss or theft of the electronic card or forgotten, compromised or accidentally divulged PIN. Any financial loss arising out of unauthorized use of the electronic card till such a time as the bank receives notice of loss of the electronic card will be the liability of the cardholder.

RULES AND REGULATIONS GUIDING THE USAGE OF THE ELECTRONIC PRODUCTS

The issuance and use of the electronic products shall be in accordance with the Central Bank of Nigeria (CBN) regulations. The customer shall use the electronic products strictly in accordance with the banking and financial control regulations of the CBN. Non-compliance of these regulations shall make the customer liable and in such event, the customer may be deactivated, either by the bank or regulatory authorities, from holding or using the electronic products. In case of multiple bank account ownership, the bank reserves the right to decide on the number of customers' accounts which may be linked to or accessed by the electronic products. The PIN can be changed at any time through authorized channels. The PIN shall not be revealed to a third party under any circumstances and shall be the responsibility of the customer. The bank shall not be responsible for the disclosure or misplacement of the PIN or token by the customer. The allocation of a new PIN, token and / or the replacement of the electronic products shall not be construed as the commencement of a new contract. The use of the electronic products is subject to the availability of funds in the customer's account with the bank. The transaction record generated by the bank will be conclusive and binding on the customer unless verified otherwise and corrected by the bank. The verified and corrected amount will thereafter be binding on the customer. The bank reserves the right to cancel the electronic products and stop its use at any time. A customer shall be permitted to withdraw or transfer cash up to the maximum amount and transaction number per day, as prescribed by the bank from time to time. In case of joint accounts where electronic cards are issued to joint account holders, the other joint account holder(s) shall expressly agree with and give consent on the application form for issuance of such electronic cards. In case any signatory to a joint account gives a card deactivation instruction to the bank in respect of operations of the electronic cards on any of the accounts held jointly by them, no transaction shall thereafter be allowed on such electronic cards. The electronic products are not transferable. Customers shall be sent computer generated PINs, usernames, passwords through selected mediums, or as other wise selected by the bank, that will enable them activate and use the electronic products. The Pin, token and usernames are confidential and restricts use of the electronic products to the authorized user only. The customer is required to specify the account(s) through which transactions with respect to the specific electronic products are to be routed. Availability of the ATM service and, or acceptability of the electronic cards accepting ATMs and PoS terminals, Internet and Mobile Banking is subject to the availability of funds in the customer's account with the bank. The bank has the express authority to debit the account(s) linked to the customers' electronic products for the value of the cash transactions and any other applicable fees affected by the use of the electronic products. The customer expressly authorizes the bank to debit the designated account(s) with the transaction fees and service charges from time to time.

The bank may at its absolute discretion amend the terms of use governing the usage of the electronic products. The bank from time to time in accordance with industry standards shall prescribe the fees for the use of service. We may change the terms of this agreement, including our charges upon notification to you about the change. Changes will arise from changes in market conditions, changes in cost of providing the service to you, changes in legal or other requirements affecting us or for any other good reason. We may introduce a charge for any service provided under or in connection with this agreement. We will notify you on changes made on any means of communication that can reasonably be used.

CUSTOMERS' RESPONSIBILITIES

The customer undertakes to be absolutely responsible for safeguarding his username, access code, password, PIN, and under no circumstance shall the customer disclose any or all of these to any person. The Bank is expressly exempted from any liability arising from unauthorized access to the customer's account and/or data which arises as a result of inability and/or otherwise of the customer to safeguard his username, access code, password, PIN and/or failure to log out of the system completely by allowing on screen display of his account information. The Bank is further relieved of any liability as regards breach of duty of secrecy arising out of customer's inability to safeguard his username, access code, password, PIN. Under no circumstance will the Bank be liable for any damages, including without limitation to direct or indirect, special, incidental or consequential damages, losses or expenses arising in connection with any failure of performance, error, omission, interruption, defect, delay in operation, transmission, computer virus or line or system failure, even if the Bank or its representatives thereof are advised of the possibility of such damages, losses or hyperlink to other internet resources are at customer's risks. The Bank shall not be responsible for any electronic virus or viruses that the customer may encounter in course of making use of these electronic products.

The PIN, username, access code, password, token, shall remain in the customer's possession and shall not be handed over to anyone else. The PIN shall remain a secret known only to the cardholder. The electronic products are issued on the condition that the bank bears no responsibility or liability for its unauthorized use. The responsibility lies fully with the customer to safeguard the electronic products once issued. The electronic products remain the property of the bank and is required to be returned unconditionally and immediately to the bank upon request by the bank or upon closure of the account linked to the electronic products.

TERMINATION OF AGREEMENT

This agreement will come to an end if either party gives a written notice to the other to that effect and you have returned all electronic products materials such as token, cards etc. and made all payments due under this agreement.

I, the undersigned applicant, warrant that the above information supplied by me is true and correct. I agree that I have read, understood, and am hereby bound by the Terms and Conditions as stated above.

Customer Information

I/We hereby apply for the opening of any account or account(s) with Sterling Bank Plc. I/we understand that the information given herein is the basis for opening such account(s) and hereby warrant that such information is correct. I/We further undertake to indemnify the Bank for any loss as a result of any false information or error in the information provided to the Bank.

In witness whereof, the common seal of is hereby affixed this day of 20

(Name of Company)

In the presence of:

Affix postage stamp (customer to sign across)	Affix postage stamp (customer to sign across)
Director (Name and Signature)	Director/Secretary (Name and Signature)

Signed, Sealed And Delivered By The Within Named Person

Name	<i>Surname</i>	<i>First Name</i>	<i>Other Name</i>
Status	Signature		Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name	<i>Surname</i>	<i>First Name</i>	<i>Other Name</i>
Status	Signature		Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

In The Presence Of:

Name	<i>Surname</i>	<i>First Name</i>	<i>Other Name</i>
Address			
Occupation			
Signature			Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

FOR BANK USE ONLY

Mandatory For Relationship Officer

Account Introduced by:

Name	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Authentication of Politically-exposed Persons

Is any Signatory or Director a politically-exposed person? Yes No

Customer Segment

RB_SBB_M RB_SBB_S RB_SBB_MD CIB.BNK PS.BNK CB.BNK

Account Opened by:

Name	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Referral/Waiver of Document (IF ANY) Authorized by

Name	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Address Verification Carried Out by

Name	
Signature	Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Name	
Signature	Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Comment(s) <i>(Address description and result finding)</i>	

Account Opening Authorized/Approved by

Name	
Signature	Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Name	
Signature	Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

Requirement Checklist (For Bank Use Only)

S/N	Documents Required	Checked	Deferred	Waived
1.	Duly completed Account opening form			
2.	Specimen signature card duly completed			
3.	Copy of CAC Certificate of Registration			
4.	Board Resolution			
5.	Copy of Memorandum and Article of Association <i>(certified as true copy by the Registrar of Companies)</i>			
6.	Identity Verification Source and Date;			
7.	Form CO7 Particulars of Directors <i>(Certified true copies by the Registrars of Companies)</i> and a certification by a notary public for Foreign companies			
8.	Form CO2 Allotment of shares <i>(Certified true copies by the Registrars of Companies)</i> and a certification by a notary public for Foreign companies			
9.	Partnership Deed <i>(where applicable)</i>			
10.	Approval Letter <i>(for Government Agency)</i>			
11.	Act/Gazette for Government Agency <i>(where applicable)</i>			
12.	Two (2) passport sized photographs of each signatory to the account with name written on the reverse side			
13.	Introduction letter <i>(where applicable)</i>			
14.	Status report from Banker <i>(where applicable)</i>			
15.	CERPAC/Resident Permit <i>(for non -Nigerians)</i>			
16.	Evidence of Registration with Nigerian Investment Promotion Council (NIPC) <i>(where applicable)</i>			
17.	Evidence of Registration with Special Control Unit on Money Laundering (SCUML) <i>(where applicable)</i>			
18.	Search report			
19.	Power of Attorney <i>(where applicable)</i>			
20.	Letter of Indemnity			
21.	Proof of Company address			
22.	Business Premises visitation certificate			
23.	Proof of Identity of all signatories and Directors/Officers whose name appear on the account opening form/documents <i>(preferred Identity are Int'l passport, National Identity card, National Driver's License and valid Nigerian INEC voter's card)</i>			
24.	Proof of Address of all Signatories and Directors/Officers whose name appear on the account opening form/document utility bill <i>(Certified true copy is acceptable of original is not held)</i>			
25.	Two Completed satisfactorily reference forms			
26.	Copy of the audited Financial statements			
27.	Tax Identification Number (TIN)			
28.	Others <i>(please specify)</i>			

Foreign Account Tax Compliance Act (FATCA) Form

Information of Authorised Signature (FATCA US Indication)

Please confirm the signatory's FATCA status by checking the relevant box

1. Please list all countries for which you hold citizenship	
2. What is your birthplace? <i>If you were born in the U.S. Provide form W-9 or W-8BEN; and Non-U.S. Passport or similar documentation establishing foreign citizenship; and written explanation regarding U.S. Citizenship</i>	
3. Are you a U.S. citizen or lawful permanent resident?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, please provide form W-9</i>
4. Is there Power of Attorney or signatory authority granted to person with U.S. Address?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, please provide form W-9 or W-8BEN; and Non-U.S. Passport or similar documentation establishing foreign citizenship</i>
5. Will there be instructions to transfer funds to U.S. Accounts or directions regularly received from a U.S. address?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, please provide form W-9 or W-8BEN; and documentary evidence establishing non-U.S. Status</i>
6. Will there be an address on file which is (U.S. Address in care of) or U.S. Address in hold mail) or U.S. P.O. Box and/or U.S. Telephone number:	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, please provide form W-9 or W-8BEN; and documentary evidence establishing non-U.S. status</i>
7. U.S. Residence address or a U.S. Correspondence address (including a U.S. P.O. Box)	<input type="checkbox"/> YES <input type="checkbox"/> NO
8. Additional information	

TO BE FILLED BY RELATIONSHIP MANAGER

No.	Indicia of U.S. Status	Account Status	Bank action required
1	Has/Have the account holder(s) provided any standing instructions to transfer funds to an account maintained in the U.S.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If any question answers YES, request RM to collect additional documentation from the customer</i>
2	Does the account have a U.S. Address (including P.O. Box or U.S. Phone number?)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	(a) has/Have the account holder(s) granted a Power of Attorney?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	(b) If answer to above question is "Yes", then does the Attorney have a U.S. Address?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Does this account have a "hold mail" status or have "in care" address in the U.S. that is the sole address for this account?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If all questions answer NO, classify the account in Section C. No further action required</i>

BANK'S ASSESSMENT OF CUSTOMER'S FATCA CLASSIFICATION: Customer is US Non-US

Declaration and Acknowledgment

I declare that: the required account opening checks have been performed for the customer(s) listed above; and that the information provided is true, correct and updated.

Sterling Bank Relationship Officer/Manager's Name	Signature
Business Manager's Name	Signature

Date

D	D	M	M	Y	Y	Y	Y
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REFERENCE FORM

To:
The Manager
Sterling Bank Plc.

Dear Sir,

NAME OF INDIVIDUAL(S) OPENING 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 wish to maintain a current account with (Please state name of Bank) _____

Address of Bank _____

My/Our Account Name is	
and My/Our Account No. is/are	BVN

Yours Faithfully,

Signature	Date	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>
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Name of REFEREE
Address of REFEREE <i>(Not P.O.Box)</i>

CAUTION: It is dangerous to introduce a person who is not well known to you

REFERENCE FORM

To:
The Manager
Sterling Bank Plc.

Dear Sir,

NAME OF INDIVIDUAL(S) OPENING 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 wish to maintain a current account with (Please state name of Bank) _____

Address of Bank _____

My/Our Account Name is	
and My/Our Account No. is/are	BVN

Yours Faithfully,

Signature	Date	<input type="text" value="D"/>	<input type="text" value="D"/>	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>
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Name of REFEREE
Address of REFEREE <i>(Not P.O.Box)</i>

CAUTION: It is dangerous to introduce a person who is not well known to you

Customer Due Diligence (CDD) Checklist Corporate Accounts



Tick the appropriate boxes

The information on Sections (A) and (B) must be obtained and retained for all Non-personal accounts, Customers including their authorized signatories, principal beneficial owners, Directors and Persons with control over the company's assets. (Note: Control is determined as owners entitled to exercise or control the exercise of 5% or more of voting rights)

Mandatory checks applicable to the Account

1.	Status Verification	Name and/or identity search using prescribed "Special Reference Listing", e.g. Sanctions lists/PEP list, Blacklists etc?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.	Purpose of Account	Specify purpose for opening the account Investments <input type="checkbox"/> Transactional <input type="checkbox"/> Others, please specify _____		
3.	Source of Funds	Indicate the source(s) of funds (Tick as many boxes where appropriate) Sales Proceeds <input type="checkbox"/> Services Rendered <input type="checkbox"/> Trust Funds per Trust Deed <input type="checkbox"/> Others, please specify _____		
4.	Anticipated Volume and Type of Activity	Obtain information on the customer's anticipated volume and type of activity to be conducted across the account		
		Transaction Types	Anticipated No. of Transactions per Month	Anticipated Amount per Month
		Cash Deposits		
		Cheque Deposits		
		Total Deposits (Including inward remittances)		
	Total Withdrawals (Including outward remittances)			
5.	Unincorporated Business/ Partnerships	Have you established that the business has been set up for the legitimate purpose stated? (E.g. a visit to the trading address or sighting annual accounts/tax returns to confirm true nature of the business activities)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

To be completed by Relationship Officer

Name	Designation
Comments	Standard Due Diligence <input type="checkbox"/> Enhanced Due Diligence <input type="checkbox"/>
Name (Relationship Officer)	Date <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"/>

Reviewed by Branch Manager/Designated Officer

Name	Designation
Comments	
Initial (Officer)	Date <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"/>

Account opening for High Risk Business requires the approval of the Regional Business Executive or Group Head.

Examples of High Risk customers include Non-resident customers, Private Banking customers, Legal persons or legal arrangements such as trusts that are personal assets-holding vehicles, Companies that have nominee-shareholders or shares in bearer form, Politically-exposed Persons (PEP), Cross-border banking and business relationships etc.

EDD Approval by Regional Business Executive/Group Head

Name	Designation
Signature	Date <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"/>

Mandatory checks applicable to ALL Parties* to the Account including Authorized Signatories/Ultimate beneficial owners

(Note: Complete a separate table for each individual)

6.	Relationship between authorized signatories and underlying owners	State briefly an understanding of the relationship between the authorized signatory (as indicated above) and the underlying beneficial owners. Relationship _____
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This risk matrix applies to ALL Corporate Account opened in Sterling Bank

Name of Customer	
Account Number	Branch

S/No.	Question	Answer	Tick Here	Nest Step
1.	Is the Customer a PEP, family, close associate of a PEP or other high-risk customers (see the footnote at the bottom of the page for list of high risk customers?)	Yes	<input type="checkbox"/>	Performed EDD and rate as High Risk, Go to final statement directly
		No	<input type="checkbox"/>	Go to Question 2
2.	What is the product type?	Mortgage	<input type="checkbox"/>	Perform CDD and rate as low risk, go to final statement directly
		Commercial Loan	<input type="checkbox"/>	
		Loan	<input type="checkbox"/>	
		Current Account	<input type="checkbox"/>	Go to Question 3
		Overdraft/Working Capital	<input type="checkbox"/>	
		Joint/Co-operative Accounts	<input type="checkbox"/>	
		Flexi-investment Account	<input type="checkbox"/>	
		Public Sector Account	<input type="checkbox"/>	
		Term Deposit Account	<input type="checkbox"/>	
		Investment Service/Deposit	<input type="checkbox"/>	
Others (specify)	<input type="checkbox"/>			
3.	Customer Type: Is the customer opening the account as	A resident/non-resident national of "High-Risk" country	<input type="checkbox"/>	Perform EDD and rate as High-Risk. Go to final statement directly. For residents, go to question 4
		A resident/non-resident national of another country	<input type="checkbox"/>	
		A non-resident Nigerian	<input type="checkbox"/>	
		A resident Nigerian	<input type="checkbox"/>	Go to Question 4
4.	Is the customer's business a "High-Risk" business?	Yes	<input type="checkbox"/>	Perform EDD and rate as High-Risk. Go to final statement directly.
		No	<input type="checkbox"/>	Go to Question 5
5.	Does customer have any presence (i.e branch or subsidiary) in a "High-Risk" country?	Yes	<input type="checkbox"/>	Perform EDD and rate as High-Risk. Go to final statement directly.
		No	<input type="checkbox"/>	Go to Question 6
6.	What is the amount with which the account is being opened?	Below N5m	<input type="checkbox"/>	Perform CDD and rate as Low Risk. Go to final statement directly
		N5m & above	<input type="checkbox"/>	Perform EDD and rate as High Risk. Go to final statement directly

Final Statement	Assign final risk rating for customer and obtain information/documents as applicable to the risk rating
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Classification

AML Risk Level	High <input type="checkbox"/>	Low <input type="checkbox"/>	<i>Examples of High Risk customers include Non-resident customers, Private Banking customers, Legal persons or legal arrangements such as trusts that are personal assets-holding vehicles, Companies that have nominee-shareholders or shares in bearer form, Politically-exposed Persons (PEP), Cross-border banking and business relationships etc.</i>	
Probable balance fluctuation Level	High <input type="checkbox"/>	Medium <input type="checkbox"/>		Low <input type="checkbox"/>
Quarterly monitoring required	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

Justification/Comments for Classification

Relationship Manager's Name

Signature <input style="width:90%;" type="text"/>	Date <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>
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Business Manager's Name

Signature <input style="width:90%;" type="text"/>	Date <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/>
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