



# MALAWI SAVINGS BANK LIMITED

\_\_\_\_\_ BRANCH/AGENCY

Date: \_\_\_\_\_

## APPLICATION TO OPEN A PERSONAL ACCOUNT

### Type of Account

Please tick in the appropriate box

Savings Account  
 Current Account

Premium Savings Account  
 Fixed Deposit Account

Residential status  
 Resident  
 Non resident

Account Name \_\_\_\_\_

### Customer Information

Please write in full

Surname ..... Title: Mr/Mrs/Miss/Dr/Prof, etc  
First Name ..... Nationality .....  
Other Names ..... Date of Birth .....  
Marital Status ..... Identity Particulars.....  
Identity Number.....

### Spouse Details

Spouse's full names.....  
Spouse's address .....  
.....  
Spouse's occupation .....

### Customer's signatures

Name 1):.....Specimen signature.....

Name 2):.....Specimen signature.....

### Customer's Contact Address

Mailing Address ..... Physical Address (Residential Address)  
..... Plot/House Number  
..... Constiteuncy  
..... Town  
..... District  
..... Duration  
Telephone Number..... Cell Number  
E-mail .....

### Permanent Address

..... (Village)  
..... (T/A)  
..... (District)

**Nature of Business/Occupation**

Occupation.....  
Employer .....  
Employment Duration.....  
Employer's Postal Address ..... Employer's Physical Address .....  
.....  
.....  
Duration at this address.....  
  
Monthly Income .....  
Type of Business .....  
Activity expected on the account.....

**References**

Name ..... Name .....  
Address ..... Address .....  
.....  
.....  
Tel/Cell ..... Tel/Cell .....  
Occupation ..... Occupation .....

**Accounts with other banks**

Name of Bank	Account Name	Account number
.....	.....	.....
.....	.....	.....
.....	.....	.....

**Declaration**

I, \_\_\_\_\_ hereby certify that the information contained in this form is true and correct, and I am aware that the wilful supplying of inaccurate/misleading information may lead to prosecution and closure of the account. I accept the terms and conditions for operation of the account, which may be varied from time to time, as stipulated by the bank.

I give my consent to the bank to supply the information contained on this form and/or that of the account concerned to other third parties including the Credit Reference Bureau, for purposes of credit referencing

Customer's signature.....Date:.....

**For Bank's Use**

Account Approved by: Name..... Signature.....  
Date.....  
Account Created by: Name..... Signature.....  
Date.....  
Account Checked by: Name .....Signature.....  
Date.....  
Opening Balance :.....  
Account Number



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**MAP FOR CUSTOMER'S PLACE OF RESIDENCE**

A large, empty rectangular box with a black border, intended for the customer to draw a map of their place of residence.