

CORPORATE DEPOSIT ACCOUNT
APPLICATION FORM



www.angloirishbank.co.in

CORPORATE DEPOSIT ACCOUNT APPLICATION FORM
GUIDANCE NOTES

The Bank is obliged to verify the identity of all of the following, as appropriate:

- Any person who ultimately owns or controls more than 25% of the share of the company
- Any person who exercises control over the management of the company. This includes any person who holds less than 25% of the shares but nevertheless holds a controlling interest
- All Directors
- All Signatories
- Any other person who has the power to direct the activities of the company or bind the company

To enable us to verify the identity **of each of the above**, we need to see the relevant pages of one of the items listed in **Section A** below showing name, signature, identification number, nationality, date of birth, place of birth, expiry date and date and place of issue and one item from Section B (originals or certified copies – see below*):

Section A – verification of identity

- Current valid passport bearing the photograph and signature of the applicant
- Current national identity card bearing the photograph of the applicant
- Armed forces ID card bearing the photograph of the applicant
- Current valid provisional or full driving licence incorporating photographic evidence of identity

*Copy documents should be certified with the wording “I certify that this is a true copy of the original document and that the photograph is a true likeness of the individual concerned”

Section B – verification of address

- A recent (dated within the last 3 months) utility bill or bank statement showing the physical permanent residential address (please note mobile phone bills are not acceptable).
- Photographic Driving licence or National Identity Card containing current residential address (if the document has not been used to verify identity as per Section A above).

In all cases, we also require:

An original or certified copy of the Certificate of Incorporation (or jurisdictional equivalent for the company).

Copy documents should be certified with the wording “I certify that this is a true copy of the original document”

Information regarding certified copy documents.

The certifier should affix their stamp, sign and date the original copy, printing their name clearly below the signature and state their position and business address.

Suitable certifiers acceptable to the Bank are:

- A member of the judiciary;
- A Senior Civil Servant or a serving police officer or customs officer;
- An officer of an embassy, consulate or high commission of the country of issue of the documentary evidence of identity;
- A lawyer or notary public who is a member of a recognised professional body;
- An actuary who is a member of a recognised professional body;
- An accountant who is a member of a recognised professional body;
- A Company Secretary who is a member of a recognised professional body’
and
- A director, company secretary or manager of a regulated business (e.g. Bank Manager or IFA).

Please note, the applicant’s direct family members cannot certify.

We must be able to satisfactorily identify the certifier of any documents and reserve the right to make further enquiries in this regard.

Company Details

| | |
|---|------------------------------|
| Company Name : <small>Details of any trade names</small> | (the 'Company') |
| Date & Country of Incorporation: | Company Registration Number: |
| Registered Office address: | |
| Principle place of business/operations (if different from registered office): | |
| Correspondence Address (if different): | |
| Name of Regulatory Body (if applicable): | |

First Director**Second Director**

| Title <small>Mr/Mrs/Dr etc</small> | Forename(s) | Title <small>Mr/Mrs/Dr etc</small> | Forename(s) |
|--|----------------------------|--|----------------------------|
| Surname | | Surname | |
| Maiden/Previous names or any alias <small>(and reasons why)</small> | | Maiden/Previous names or any alias <small>(and reasons why)</small> | |
| Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | | Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | |
| Postcode | | Postcode | |
| Telephone (Home) | Telephone (Business) | Telephone (Home) | Telephone (Business) |
| E-mail address | | E-mail address | |
| Date of Birth | Country and Place of Birth | Date of Birth | Country and Place of Birth |
| Nationality | | Nationality | |
| Occupation | | Occupation | |

Third Director**Fourth Director**

| Title <small>Mr/Mrs/Dr etc</small> | Forename(s) | Title <small>Mr/Mrs/Dr etc</small> | Forename(s) |
|--|----------------------------|--|----------------------------|
| Surname | | Surname | |
| Maiden/Previous names or any alias <small>(and reasons why)</small> | | Maiden/Previous names or any alias <small>(and reasons why)</small> | |
| Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | | Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | |
| Postcode | | Postcode | |
| Telephone (Home) | Telephone (Business) | Telephone (Home) | Telephone (Business) |
| E-mail address | | E-mail address | |
| Date of Birth | Country and Place of Birth | Date of Birth | Country and Place of Birth |
| Nationality | | Nationality | |
| Occupation | | Occupation | |

If there are more than 4 directors, please provide the above details for each additional director on a separate sheet.

FAILURE TO COMPLETE ALL SECTIONS OF THIS FORM MAY RESULT IN A DELAY IN OPENING YOUR ACCOUNT

| First Beneficial Owner | | Second Beneficial Owner | |
|--|----------------------------|--|----------------------------|
| Title <small>Mr/Mrs/Dr etc</small> | Forename(s) | Title <small>Mr/Mrs/Dr etc</small> | Forename(s) |
| Surname | | Surname | |
| Maiden/Previous names or any alias <small>(and reasons why)</small> | | Maiden/Previous names or any alias <small>(and reasons why)</small> | |
| Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | | Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | |
| Postcode | | Postcode | |
| Telephone (Home) | Telephone (Business) | Telephone (Home) | Telephone (Business) |
| E-mail address | | E-mail address | |
| Date of Birth | Country and Place of Birth | Date of Birth | Country and Place of Birth |
| Nationality | | Nationality | |
| Occupation | | Occupation | |
| Specimen Signature | | Specimen Signature | |

If there are more than 2 beneficial owners please provide the above details for each beneficial owner on a separate sheet.

NOTE

It is a requirement of the Bank to satisfactorily identify all the beneficial owners i.e. any individual who ultimately owns or controls the company. For companies not listed on a recognised stock exchange, this includes any individual who ultimately owns or controls more than 25% of the shares of the company. It also includes any individual with less than 25% of the shares but who nevertheless has a controlling interest in the company. It is acknowledged that in certain circumstances, ownership of a corporate entity may not be in the name(s) of individuals or may involve more complex structures. Applicants are invited to contact the Bank to discuss our due diligence requirements in this regard before completing this form.

| First Signatory | | Second Signatory | |
|--|----------------------------|--|----------------------------|
| Title <small>Mr/Mrs/Dr etc</small> | Forename(s) | Title <small>Mr/Mrs/Dr etc</small> | Forename(s) |
| Surname | | Surname | |
| Maiden/Previous names or any alias <small>(and reasons why)</small> | | Maiden/Previous names or any alias <small>(and reasons why)</small> | |
| Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | | Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | |
| Postcode | | Postcode | |
| Telephone (Home) | Telephone (Business) | Telephone (Home) | Telephone (Business) |
| E-mail address | | E-mail address | |
| Date of Birth | Country and Place of Birth | Date of Birth | Country and Place of Birth |
| Nationality | | Nationality | |
| Occupation | | Occupation | |
| Specimen Signature | | Specimen Signature | |

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| Third Signatory | | Fourth Signatory | |
|--|----------------------------|--|----------------------------|
| Title <small>Mr/Mrs/Dr etc</small> | Forename(s) | Title <small>Mr/Mrs/Dr etc</small> | Forename(s) |
| Surname | | Surname | |
| Maiden/Previous names or any alias <small>(and reasons why)</small> | | Maiden/Previous names or any alias <small>(and reasons why)</small> | |
| Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | | Permanent Residential Address <small>C/O or PO Box addresses are not acceptable</small> | |
| Postcode | | Postcode | |
| Telephone (Home) | Telephone (Business) | Telephone (Home) | Telephone (Business) |
| E-mail address | | E-mail address | |
| Date of Birth | Country and Place of Birth | Date of Birth | Country and Place of Birth |
| Nationality | | Nationality | |
| Occupation | | Occupation | |

If there are to be more than 4 authorised signatories, please provide a current authorised signatory list together with a copy of the resolution confirming the authorised signatory list.

Additional Information

Nature of Business (Please provide details of the nature of business of the Company including the geographical locations the company is involved with)

Purpose of Account (Please confirm the purpose for which the account is being established)

Source of Wealth

In order to comply with legislation, we are obliged to ascertain details regarding source of wealth. Please therefore provide full details of the original source of wealth (e.g. sale of shares, trading profits, etc). Please submit a copy of the most recent financial statements of the Company.

Please state the amount of your initial deposit: Please state the expected number of transactions per year:

Please provide an estimate of the amount of money you expect to see going through the account in a year (please state currency here):

Less than 10,000
 10,001 to 50,000
 50,001 to 100,000
 100,001 to 250,000
 250,001 to 500,000

Other (please state amount)

“Cheque deposits must be made payable to the account holder and not Anglo Irish Bank.” Anglo Irish Bank primarily deals in the following currencies GBP, USD, EURO, CAD\$, AUD\$, CHF, ZAR for information on any other currency please contact the bank.”

DATA PROTECTION NOTICE

Anglo Irish Bank Corporation (International) PLC (“Anglo” or “we”) is the data controller of the information which is collected from you and/or from third parties in respect of your application/account or an account you are party to (“personal data”). Your data may be used for administration, marketing, research, analysis, product development, customer profiling, internal monitoring, fraud and money laundering prevention and customer services. Such processing may be carried out by us or on our behalf by our agents and service providers. We may disclose details of personal data to appropriate regulatory authorities, to anyone having a legal right to the data, to anyone whom you appoint to administer or operate your account and to another Branch of Anglo to facilitate a service being offered to you. Personal data may also be disclosed to the Society for Worldwide Interbank Financial Telecommunication (SWIFT) in relation to processing fund transfers and to US and other authorities for the prevention of terrorism, compliance with applicable laws and other security reasons. Personal data may also be transferred outside the European Economic Area where data protection laws may not be equivalent to those in the Isle of Man. If we do make such a transfer, we will put in place a contract to ensure that your information is adequately protected.

To help us to make decisions about you, to prevent fraud, to check your identity and to prevent money laundering, we may search the files of credit reference agencies who will record the results of the search against your file. Individuals have a right to request a copy of the information we hold about them for which we may charge a small fee, and to have any inaccuracies in their information corrected by writing to us at the address below. Proof of identity will be required. Please note that telephone calls may be recorded to confirm instructions given and for training and quality control purposes. By completing this form, each signatory agrees and explicitly consents to our use and disclosure of their personal data in the manner outlined in this application.

We and other companies in Anglo Irish Bank Corporation plc group may contact you (by post, telephone, e-mail or otherwise) to let you know about financial and related products or services which may be of interest to you. Please tick this box if you do not wish to receive such information

Individuals may at a later date request that we cease using the information for marketing purposes by writing to us at Anglo Irish Bank Corporation (International) PLC, Jubilee Buildings, Victoria St., Douglas, Isle of Man, IM1 2SH.

Resolution

We certify that at a meeting of the directors of (the "Company")
 whose registered office is

held on the day of the following resolution was passed:

That Anglo Irish Bank Corporation (International) PLC ("the Bank") be and is hereby requested and authorised to open in the name of the Company such account(s) as may now or from time to time be considered appropriate for receipt and disbursement of the Company's monies and to give effect to any order, direction, request or instruction given by the Company to the Bank relating to withdrawals and transfers from such account(s) from time to time effected, made or given in accordance with the signing instructions supplied to the Bank by the Company from time to time.

Declaration

1. We hereby request and authorise you to open an account in the name of the Company.
2. We have read and understood the Terms and Conditions applicable to the account, which may be amended from time to time, and agree to be bound by them.
3. We certify the accuracy of the statements given and authorise you to make any enquiries which you may consider necessary for confirmation of such statements.
4. We authorise you to honour all cheques and other negotiable instruments drawn, made, endorsed, or accepted and to act on all instruments relating to the account affairs, and transactions made or given in accordance with the mandate appearing below (as the same may be amended and notified to you from time to time), notwithstanding that such action may cause any of the accounts to be overdrawn or any overdraft to be increased.
5. We undertake to notify you from time to time of any change in the composition of the directors, secretary and other officers of the Company as and when any such change occurs.
6. We hereby authorise you to accept any instructions in relation to this account in accordance with the mandate appearing below (as the same may be amended and notified to you from time to time).
7. We hereby agree to hold ourselves jointly and severally liable for all monies due and liabilities incurred under the above authorisation in any manner whatsoever and jointly and severally undertake to indemnify and hold harmless the Bank and its officers against all losses, damages, costs and expenses which they or any of them may incur or be put to for or in relation to any claim or demand that may hereafter arise by reason of their acting under the above authorisation.

N.B. In the absence of any express instructions to the contrary, the Bank, in its absolute discretion, may act on the instructions or signature of one signatory only in operating any account(s). The Bank may also, in its absolute discretion, cancel or revoke any mandate relating to the account(s) and require the signatures of all of the signatories of the Company to operate the account(s).

Signed and accepted on behalf of the Company by:

| | | |
|-----------------------------------|---|-----------------------------------|
| Full Name <input type="text"/> | Capacity (e.g. director/secretary) <input type="text"/> | Signature <input type="text"/> |
| Full Name <input type="text"/> | Capacity (e.g. director/secretary) <input type="text"/> | Signature <input type="text"/> |
| Date <input type="text"/> | NB: The above persons must be authorised by the Company to sign this form on behalf of the Company. | |

Account Signature Mandate

MANDATE – The following person/persons are authorised to sign on this account

| | | |
|-----------------------------------|--|-----------------------------------|
| Full Name <input type="text"/> | Capacity (e.g. director/secretary) <input type="text"/> | Signature <input type="text"/> |
| Full Name <input type="text"/> | Capacity (e.g. director/secretary) <input type="text"/> | Signature <input type="text"/> |
| Full Name <input type="text"/> | Capacity (e.g. director/secretary) <input type="text"/> | Signature <input type="text"/> |
| Full Name <input type="text"/> | Capacity (e.g. director/secretary) <input type="text"/> | Signature <input type="text"/> |

If there are to be more than 4 signatories, please provide, on a separate sheet, an Authorised Signatory List stating full names and capacity (e.g. director/secretary) of each signatory.

It must state on the Authorised Signatory List that it forms part of this Corporate Account Application Form.

Please complete below as applicable

Any one of the authorised signatories may sign All of the authorised signatories must sign

Other (please specify)

Anglo Irish Bank Corporation (International) PLC, Jubilee Buildings, Victoria Street, Douglas, Isle of Man IM1 2SH
 Tel: +44 (0)1624 698000 Fax: +44 (0)1624 698001 Email: iomdealers@angloirishbank.co.im www.angloirishbank.co.im

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