



**ACCOUNT INFORMATION**

<b>ACCOUNT 3</b>	Name of Account:	<b>UCIN (For Official Use Only)</b>
	Mailing Address (if different from registered address):	<b>CIF</b>
	<b>Select one of the following Account Types:</b> <input type="checkbox"/> Savings Account <input type="checkbox"/> Current Account (available only in JAD) <input type="checkbox"/> Certificate of Deposit <input type="checkbox"/> Foreign "A" Account (available only in USD for non-residents)	
	Currency <input type="checkbox"/> JAD <input type="checkbox"/> USD <input type="checkbox"/> CAD <input type="checkbox"/> GBP <input type="checkbox"/> Euro	
	<b>For Current Accounts Only</b> Cheque Books Required: <input type="checkbox"/> 200 <input type="checkbox"/> 400 <input type="checkbox"/> 600 Details on Cheque Leaves: <input type="checkbox"/> Address <input type="checkbox"/> Mailing Address <input type="checkbox"/> No Address <input type="checkbox"/> Telephone Number (kindly specify)	
	Indemnity Required (Complete in conjunction with mandate instructions): <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Verbal	Internet Banking Access Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Purpose of Account:	Source of Funding:
	Expected Monthly Deposits:	Expected Monthly Withdrawals:
	Account Number (for Official Use Only):	



## SPECIMEN SIGNATURES

Signing Authority:  Any One to Sign  Any Two to Sign  Other (Specify)

Name of Account: \_\_\_\_\_

Name of Signee:
Job Title:
Signing Limitations:
Signer's Designation: <input type="checkbox"/> A <input type="checkbox"/> B

SIGNATURE MUST FIT WITHIN THE SIGNATURE BOX

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Job Title:
Signing Limitations:
Signer's Designation: <input type="checkbox"/> A <input type="checkbox"/> B

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Job Title:
Signing Limitations:
Signer's Designation: <input type="checkbox"/> A <input type="checkbox"/> B

Documents will be examined to confirm or determine the persons authorized to sign on behalf of the company/entity.

**FOR USE BY COMPANIES**

\_\_\_\_\_  
Director's Signature

\_\_\_\_\_  
Secretary's Signature

Date (dd/mm/yyyy): \_\_\_\_\_

**FOR PARTNERSHIP/ASSOCIATIONS/CLUBS/  
UNINCORPORATED ENTITIES**

\_\_\_\_\_  
Authorised Signer

\_\_\_\_\_  
Authorised Signer

Date (dd/mm/yyyy): \_\_\_\_\_

**For  
Official  
Use  
Only**

Entered by:

Authorised by:

Date (dd/mm/yyyy):

Scanned by:

Authorised by:

Date (dd/mm/yyyy):