

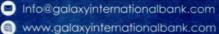
Serving To Empower You

Account Opening Form Business Account

PLEASE COMPLETE IN BLOCK CAPITAL LETTERS AND TICK WHERE APPLICABLE

Branch:	
Customer Name:	
	74.
A/C Number:	







BUSINESS ACCOUNT OPENING FORM

APPLICATION TO OPEN CORPORATE OR BUSINESS ACCOUNT

I/We hereby apply to open the following account and undertake to comply, observe and be bound by the terms and conditions that shall be accessed in the banking hall and at Galaxy International Bank's official website https://www.galaxyinternationalbank.com.

Please tick ($$) the appropriate box	below	
1. Account Details Faahfaahinta Xisaabta		
a. Account Type Nooca Xisaabta		
Supreme Current Account		
GIB Transactional Account		
Business Current Account		
Corporate Current Account		
Other (Please specify):		
b. Currency		
USD		
Other (Please specify): Si kale (Fadlan tibaax)		
c. Cheque Book Required Ma u baahantahy cheque buug		
Yes No No Maya If Yes, number of cheque leaves required	50 leaves 100 leaves	
Haddii ay haa tahay, tibaax tirada xaanshiyaha je d. Online Banking	e. Mobile Banking	
Adeegga Online-ka Yes Haa No Maya	Adeegga Mobile-ka Yes Haa	No Maya
f. Please indicate email address for	statement delivery Fadlan gor emai	I-ka warbixinta laguugu soo dirayo
2 Customer Type (please complete Please state your legal status:	this section 2 in full):	
Company	Association	
Partnership Iskaashi	Society	
Sole Proprietorship Lahaasho kali ah	School	
Government Institution Hay'adaha dowliga ah	Club Naadi	
NGO Hay'adaha aan dowliga aheyn	Other (Please specify):	



BUSINESS ACCOUNT OPENING FORM

3. Customer Details

Faahfaahinta Macmiilka							
Account Name:		14					
_							
Nature of Business:	- + -	17-0-10		ř, = _	T I	Tark T	
Registration Certificate Number ambarka shahaadada diiwaangelinta	er:			Date of Registrati Taariikhda diiwaangeli	on/Incorporation:		
P.O. Box	Postal Code			Region Gobol			
Physical Location Town		Area of To	own		Road		
el (nos) Office		Mobile			TIN		
Vebsite			Email				
4. Expected annual to	urnover (in USD)		_		m	è.	
Fagiidada la filaayo sanadkii	, (602)						N :
5. Account/Facilities h Xisaabaha aad ku leedahay bangi	neld with us or o geena ama bangiyada kale	ther bank	cs:				14
Bank Name: Magaca Bangiga		Branch:		Account No Lam Xisaabta		Facilities Take	∍n
i.)							ī.,
ii.)						12.	
iii.)							

iv.)



BUSINESS ACCOUNT OPENING FORM

5. Details of the Shareholders/Owners/Managing Members

Faahfaahinta Saamileyda/Milkiilayaasha/maamulayaasha xubanaha

Name of SoleProprietor Director/Partner/Shareholders /Member Magacyada Xubnaha Shirkadda	Designation Jagada	ID/Passport/Alien Certificate number Lambarka Aqoonsiga	Gender Jinsiga	Percentage Ownership Boqoleyda Lahaanshaha	Address Cinwaanka	Signature Saxiixa
1.	_					
2.						
3.		-			10001	
4.						
5.						

6. Details of Next of Kin: Faahfaahinta Xigtada

Name Magaca	Relationship Xiriirka	Expected annual term
Tel No. Taleefan Lambar	Road/Street Wadada	. Account/Edgilles hel
District. Degmada	Region Gobolka	
Physical Location Town Magaalada	Country of Residence Dalka Degenaanshada	



BUSINESS ACCOUNT OPENING FORM

7. Details of the Authorised Signatories:

(Faafaahinta saxiixayaasha idman)

Photo & signature of 1st signatory 1st Signatory Photo

Signature of 1st Signatory: Saxiixa Saxiixaha Koobaad Name: Magaca ID/PP Number: Lambarka Aqoonsiga Mobile Number: Moobel Lambar ID/PP Expiry Date: DD / MM / YYYY DD / MM / YYYY Visa Expiry Date: Taariikhda Dhicidda Aqoonsiga Taariikhda Dhicidda Dal-ku-galka

Photo & signature of 2nd signatory 2nd Signatory Photo

Signature of 2nd Signatory: Saxiixa Saxiixaha Labaad Name: Magaca ID/PP Number: Lambarka Aqoonsiga Mobile Number: Moobel Lambar ID/PP Expiry Date: DD / MM / YYYY Visa Expiry Date: DD / MM / YYYY Taariikhda Dhicidda Aqoonsiga Taariikhda Dhicidda Dal-ku-galka

3rd Signatory Photo

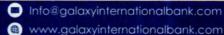
Photo & signature of 3rd signatory

Signature of 3rd Signatory: Saxiixa Saxiixaha Sedexaad Name: Magaca ID/PP Number: Lambarka Aqoonsiga Mobile Number: Moobel Lambar ID/PP Expiry Date: DD / MM / YYYY DD / MM / YYYY Visa Expiry Date: Taariikhda Dhicidda Aqoonsiga Taariikhda Dhicidda Dal-ku-galka

4th Signatory Photo

Photo & signature of 4th signatory

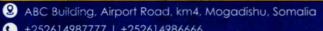
Signature of 4th Signatory: Saxiixa Saxiixaha Afaraad Name: Magaca ID/PP Number: Lambarka Aqoonsiga Mobile Number: Moobel Lambar ID/PP Expiry Date: DD / MM / YYYY Visa Expiry Date: DD / MM / YYYY Taariikhda Dhicidda Aqoonsiga Taariikhda Dhicidda Dal-ku-galka

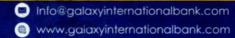




BUSINESS ACCOUNT OPENING FORM

lease indicate how you	wish to be signing on your account:		
Solely			
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Either			
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All to Sign			
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Other (specify)			
Si kale (Tibaax)			
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7			
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1. mod 1.	AND AND DESCRIPTION OF THE PARTY OF THE PART	- Inc. 1	
By Signing below	v I/We unequivocally agree a	nd accept:	
By Signing below	v I/We unequivocally agree a	nd accept:	
		nd accept:	
		nd accept:	
) This mandate and	d agreement.		d at any time in the future for t
) This mandate and		es about me / us now and	d at any time in the future for th
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BUSINESS ACCOUNT OPENING FORM

For Brach Use Only (Ugaar ah Bar	ngiga)			
a) Initial deposit received USD		— In form of Cas	h Cheque	Transfer
b) Customer information checklist (P	Please tick ($$) the bo	x if the requirement	is satisfied):	
National ID /PP/Alien ID/Birth Cert - certific	ed and copy obtained			
Photographs obtained and authenticated	d			
Bank statement verified and copy obtained	ed			
Cheque book ordered				
Debit card ordered				
Certificate of incorporation				
Board resolution				
Constitution for societies				
Customer contact information available				
OFFICER ID CODE	RC	OLE CODE		
c) Account Opened by:				
Name:		Sign at us		
Name:		signature):	
Date: DD / MM / YYYY				
d) Account Authorised by:				
Name:		Signature	»:	
Date: DD / MM / YYYY				



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