wnmve †Lvjvi dig A-e"w3K wnmve **AOF Archival Ref:** Account Title wnmv‡ei bva **Account Number** wnmve b¤^i **Unique Customer ID** BDwbK MÖvnK AvBwW BANK USE ONLY SL No: Required Documentation to Open Account Guidance to fill up the AOF Account Opening Form duly ■lled up. Duly attested NID/Passport/Birth Registration Certi∎cate (along with Photo ID), Photograph, utility bill of the Proprietor/ Partner(s)/ Signatories/ O■ce Bearer(s) as applicable. Copy of Valid Trade License (for Business account only). Proof of Submission of Income Tax Return (If not submitted, additional source tax will be applied. However Proof of Submission of Income Tax Return is mandatory for opening and continuing bank accounts of any sort with credit balance exceeding BDT Ten Lakhs). Please ■II up the form in CAPITAL letter in English. Please ■II up all ■elds carefully & strike-out the ones which are not applicable. Please con■rm any overwriting by full signature For verilecation please present the original documents for each photocopy submitted. Please use separate Individual Information Form (CIF) for Signatories/Mandatee/Bene∎cial Owner(s). For foreign citizen(s), collecting photocopy of Passport with valid VISA, Work permit, BIDA Permission, QA 22, etc. (if applicable Please use separate Nominee Information Form for Sole Proprietorship account. A. General documents for ALL types of Accounts: Copy of Partnership Deed of the Firm. List of Partners with their addresses. Resolution for opening the account and authorization for its operation duly certi∎ed by the Managing Partners of the Firm. Copy of Certi∎cate of Registration of the Firm for Registered Partnership. Certi∎ed true copy of the Memorandum & Articles of Association and Certi**■**cate of Incorporation of the Company. Certi∎ed copy of the Letter of Commencement of Business (in

Account Opening Form Non-Individual Account

case of Public Limited Company). Certi∎ed true copy of Form- XII. Resolution / Extract of the resolution of the Board/General Meeting of the Company for opening the account and authorization for its operation duly certimed by the Chairman/Managing Director/ Company Secretary. List of the Directors with addresses. Bene**■**cial owner's NID copy, Photographs and Other Documents (if applicable). Certi∎ed true copy of the constitution/By-Laws/Trust Deed/Memorandum and Articles of Association(where applicable). Copy of Certi**■**cate of Registration of the Association/-Club/Charity/Trust/Society(if applicable). Resolution/ Extract of Resolution of the Association/-Club/Charity/Trust/Society for opening the account and authorization for its operation duly certimed by the Chairman/Secretary. List of members of the Governing Body/Executive Committee of the Association/Club/Charity/Trust/Society with their addresses. B. Additional documents for Business Accounts: **B.1 Partnership Account** B.2 Limited Company (Public/Private) Account C. Additional documents for Association/Club/Charity/ Trust (provident fund/gratuity fund)/Society Account Government Order/ O■cial letter from the competent authority to open the account stating the authorized signatories. Copy of relevant Government Order/ Gazette noti ■cation/ Provision of Law/ Constitution / By-laws / Trust Deed / Memorandum & Articles of Association(where applicable). D. Additional documents for Government Entity Enclosed mshyw³ ■ Duly Signed General Account's Rules and T erms & Conditions ■ Customer Information Form(s) (In case of more than one Signatory) ■ Others: (please specify) ■ Others: (please specify) SBS Code Risk Grade Cheque Book Requisition given in CBPS? ■ Yes ■ No RM Code

Deposit Code

Estimated Monthly Transaction Profile (TP) AbywgZ gvwmK †jb‡`b weeiYx

T otal Deposits

‡gvU Rgv

Cash- Deposits (Including Online)

Deposit Through Transfer/Instruments

Foreign Remittance Deposit (inward)

Export Proceeds

From BO or Stock Market

Others (Specify)

bM` AbjvBbmn UavÝdvi ev BÝUay‡g‡, Ui gva ‡g Rgv %e‡`wkK †iwg‡UÝ Rgv (Af"šĺixb) ißvwb cÖwµqv cuywR evRvi wnmve n‡Z Rqv Ab"vb" (wbw`©ó Kiæb) Particulars welg Deposits / Rgv Number of Transaction (Monthly) gvwmK †jb‡`‡bi msL"v Maximum Size (per transaction) m‡e©v"P cwigvY (cÖwZ †jb‡`b) T otal Amount (monthly) †gvU cwigvY (gvwmK) Number of Transaction (Monthly) gvwmK †jb‡`‡bi msL"v Maximum Size (per transaction) m‡e©v"P cwigvY (cÖwZ †jb‡`b) T otal Amount (monthly) †gvU cwigvY (gvwmK) Particulars welg T otal Withdrawals ‡qvU D‡Ëvjb Cash- Withdrawals (including online/ ATM) Withdrawals Through Transfer/Instruments Withdrawals of Foreign Currency/Remittance Import Payments Transfer to BO Accounts or Stock Market Others (Specify) bM` D‡Ëvjb (AbjvBb/GwUGg mn) UavÝdvi/BÝUay‡g‡›Ui gva¨‡g D‡Ëvjb %e‡`wkK gy`av/‡iwg‡UÝ D‡Ëvjb Avg`vwb wej cyuwR evRvi wnmv‡e Rgv/~'vbvšĺi Ab"vb" (wbw`©ó Kiæb) Withdrawals / D‡Ëvjb Duplicate Customer ID in UBS (De-dup) checked? Customers' Cell phone number - Call back confirmed? Customers' NID verified with EC database? AML Screening? ■ Yes ■ No ■ Yes ■ No N/A ■ No Yes Yes ■ No

Yes

■ No

```
Yes
         ■ No
Yes
        ■ No
Yes
        ■ No
Yes
        ■ No
Yes
        ■ No
Yes
        ■ No
1st ApplicantEntity 2nd Applicant 3rd Applicant
Yes
         ■ No
Yes
        ■ No
        ■ No
Yes
Yes
        ■ No
4th Applicant
Yes
        ■ No
Yes
        ■ No
Yes
         ■ No
■ Yes
        ■ No
Comments:
For Bank Use Only e"vs‡Ki e"env‡ii Rb"
P2 of 4
For Liability Operations Use Only
Account Document Output Control Scan for DMSAccount
Maintenance OthersParticulars
Maker/
Checker
A/C Opening Officer:
                                                                     Checked & Authorized by:
(Seal with Name, Signature & Date) Br. Manager/ Br. Ops. Manager/ Br. Sales & Service
Manager/ BDM (Seal with Name, Signature & Date)*First Part : Account Related Information cÖ_q Ask : wnmve msuvšĺ Z "vw
Second Part : Institution Related Information wØZxq Ask : cÖwZôvb msµvšĺ Z_"vw"
Dear Sir, I/We hereby apply to open a/an
My/ our account related & detailed personal information are given below.
Account Number
(wnmve b¤^i)
Unique Customer ID
(BDwbK MÖvnK AvBwW)
Date (ZvwiL)
(Product Name) ‡h wnmve Lyj‡Z Pvb Zvi bvg
Branch Manager (kvLv e"e"'vcK)
Eastern Bank PLC. (B+vb© e"vsK wcGjwm.)
    Branch (kvLv)
(wcÖq g‡nv`q), Avwg/ Avgiv Avcbvi kvLvq GKwU
Avgvi/ Avgv‡`i wnmve msµvšĺ I e"w³MZ we-ĺvwiZ Z_" wb‡¤œ cÖ`vb KiwQ|
wnmv‡ei cÖK...wZ (wUK w`b)
gy`av (wUK w`b)
cwiPvjbv cxwZ (wUK w`b)
cÖv_wgK Rgv
(In English)
(evsjvq)
DDMMYYYY
P3 of 4
For Customer Use MÖvn‡Ki e"env‡ii Rb"
Amount (As‡K):
                                     In words (K_vq):
Singly GKKfv‡e
                   Jointly †hŠ_fv‡e
                                      Any one †h ‡Kvb GKRb
                                                                Others Ab"vb":
T aka UvKv
              USD Wivi
                          Euro BD‡iv
                                         Pound cvDÛ
                                                         Others Ab"vb":
Savings mÂqx
                 Current PjwZ
                                 SND GmGbwW
                                                   FC Gdwm
                                                                 RFCD AviGdwmwW
                                                                                       ERQ BAviwKD
                                                                                                        Others Ab
Account Title
Type of Account (Please tick)
Currency (Please tick)
```

Operating Instruction (Please tick)

```
Initial Deposit
Nature (aiY)
(cÖwZôv‡bi bvg)
(†UaW jvB‡mÝ b¤^i)
e"emvi "'j/Awd‡mi wVKvbv
wbeÜbK...Z wVKvbv
KviLvbv/BÛvwóai wVKvbv
(In English)
(evsjvq)
Cash bM`
             Cheque/P.O. †PK/‡c AW©vi
                                            BEFTN weBGdwUGb
                                                                     RTGS AviwUwRGm
                                                                                            Others Ab"vb":
Sole Proprietorship (GKK gywjKyby) Partnership (Askx`vwi) Joint Venture (±hŠ D±`"vM) Pvt. Limited (cÖvB±fU wit) Public Lin
Trust (Uav÷)
Govt./Semi Govt./ Autonomous (miKvwi/Avav miKvwi/^vqZikvwmZ)
Trading (‡UawWs) Service (†mev) Manufacturing (Drcv`b)
Others (Ab"vb") t
Others (Ab"vb") t
NGO/NPO (GbwRI/GbwcI) Club/Society (K¬ve/‡mvmvBwU) Educational Institute (wkÿv cÖwZôvb) Religious Institution (ag©xq
*Institution's Name
Trade Licence Number
Issuing Authority (Bmy Kvix KZ...©cÿ):
Registration Number (wbeÜb b¤^i)
Issuing Authority (Bmy Kvix KZ...©cÿ):
VAT Registration Number
E TIN No. (U"v. AvBwW b¤^i)
Non-Individual Account Opening Form A-e"w3K wnmve †Lvjvi dig
SL No:
wnmv‡ei wk‡ivbvg
D D M M Y Y Y YDate (ZvwiL)
D D M M Y Y Y YDate (ZvwiL)
Issuing Country
(Bmy"Kvix †`k)
BIN (weAvBGb)
 Phone (†dvb):
 Phone (†dvb):
*Business Premises/Office Address
*Registered Address
*Factory/Industry Address
6. Address: (Please tick any of the below address as mailing/ correspondence address)
1.
2.
3.
4.
5.
6.
1.
2.
3.
4.
Note: Debit Card is applicale for Sole Proprietorship account only.
f"vU †iwR‡óakb b¤^i
e"emv‡qi aiY
cY" ev †mevi aiY
e"emv‡qi cÖK...wZ (we-ÍvwiZ)
evwl©K Uvb©lfvi
*Type of Institution
```

Type of Business

Type of Product/Services

```
Nature of Business (In details)
Annual Turnover
7.
8.
9.
10.
11.
cÖwZôv‡bi aiY
PSR (wiUvb© Rgv iwm`)
Assessment Year (Ki el©)
Yes (nu"v) No (bv)
Other Facilities Ab"vb" myweavmg~n
Debit Card Type (‡WweU Kv‡W©i aib) Card RM Code (KvW© AviGg †KvW)
Delivery Branch (‡Wwjfvix kvLv)
Debit Card (†WweU KvW© eB) Yes (nu"v)
                                              No (bv)
Cheque Book (†PK eB)
Mobile No. (†PK eB) E-mail in Block Letter. (B-‡gBj eo nv‡Zi Aÿi)
               No (bv)P4 of 4
Yes (nu"v)
DDMMYYYY
*Account Operator's Name
*Date of Birth (Rb¥ ZvwiL)
Father's Name (wcZvi bvg)
Mother's Name (gvZvi bvg)
Spouse Name (^vgx/~¿xi bvg)
*Foreign Account T ax Compliance Act (FATCA)
Signature Verified by:
                                                                                   Approved by:
(Seal with Name, Signature & Date) Account Opening Officer: Br. Manager/ Br. Ops. Manager/ Br. Sales & Service
Manager/ BDM (Seal with Name, Signature & Date)
English
Bangla
(Bs‡iRx)
(evsiv)
(wnmve cwiPvjbvKvixi bvg)
E TIN No.
3. Unique CIF
1.
2.
4.
5
6.
7.
9.
10.
11.
12.
13.
14.
15.
*Relationship with Organization/Designation
*Nationality
*Resident Status:
Marital Status:
*Profession Details:
Name of the Organization:
                    Female
                                    Third Gender
8. Gender
              Male
Resident (†iwm‡W>U)
                         Non-Resident (bb-†iwm‡W>U)
```

Married

```
Service
(PvKzix)
Business
(e"emv)
Others
(Ab"vb")
(Please Specify)
(wbw`©ó K‡i ejyb)
Single
(AweevwnZ)
Others
(Ab"vb")
Please tick (wUK wPý w`b)
PSR (wiUvb© Rgv iwm`)
Assessment Year (Ki el©)
Yes (nu"v) No (bv)
Road/Vill (moK/MÖvg):
                                                            P.O (†cvt):
                                                                                                          P.S (_vbv):
District (‡Rjv):
                                                        Mobile (†gvevBj):
Road/Vill (moK/MÖvg):
                                                            P.O (†cvt):
                                                                                                          P.S (_vbv):
District (‡Rjv):
                                                        Mobile (†gvevBj):
Present Address
Permanent Address
16. *Address:
17.
16.1
16.2
*Identification Document National ID/Passport/Birth Certificate/Others:
(RvZxq cwiPq cl/cvmtcvU© bx^i/Rb\text{mb`/Ab"vb")
(eZ©gvb wVKvbv)
("vqx wVKvbv)
(cwiwPwZ cl)
Name
Designation
Date
bvg
c'ex
ZvwiL
(U"v. AvBwW b¤^i)
(cÖwZôv‡bi mv‡_ m¤úK©/c‡`i bvg)
(RvZxqZv)
(‡iwm‡W÷ ÷"vUvm)
(%eevwnK Ae-'v)
(†ckvi we<sup>-</sup>ĺvwiZ)
(cÖwZôv‡bi bvg)
(wj\frac{1}{2})
           (cyiæl)
                     (gwnjv)
                                 (Z...Zxq wj\frac{1}{2})
*E-mail (B-‡gBj)
FPP, Dec.- 2024
I/We undersigned declare that the information provided in the application is true, complete and accurate. I/We am/are fully awai
```

(weevwnZ)

I/We undersigned declare that the information provided in the application is true, complete and accurate. I/We am/are fully awaring Money Laundering Prevention Rules and Anti-T errorism Rules and I/We shall not do any act/ transaction in contravention of the mentioned rules. I/We will provide updated information/ necessary documents required by the Bank from time to time and to rules and policies of the Bank for the conduct of such account. Avwg /Avgiv ^Avţb †NvIYv KiwQ †h, D‡jøwLZ Z_"vw` mZ"| Avweţivax AvBb m¤úţK@ m¤ú~Y@ AewnZ AvwQ Ges †`ţk we`"gvb gvwb jÛvwis c³wZţiva AvBb Ges mš¿vm weţivax AvBţbi we †h mgţq mgţq e"vsţKi c³ţqvRb †gvZvţeK Ges D³ wnmve cwiPvjbvi Rb" c³ţqvRbxq Z_"/bw_ c³`vb Kie| (1) (2) (3)

Disclaimer: If any confusion arises between Bangla & English version of the text mentioned above, the Bangla version shall be we‡kl `áoe": Dc‡i D‡jøwLZ evsjv Ges Bs‡iwR ms⁻⟨i‡Yi (†U·Gi) g‡a" †Kvb ai‡Yi weåvwšĺi D™¢e n‡j evsjv ms⁻⟨i‡Yi (†U·U) ¸‡jv I hereby consent for Eastern Bank PLC to share my information with domestic or overseas regulators or T ax Authorities where

my tax liability in any jurisdiction. Where required by domestic or overseas regulators or tax authorities, I consent and agree tha withhold from my account(s) such amounts as may be required according to applicable laws, regulations and directives.

1. Are you a US Resident? 2. Are you US Citizen?

US T ax Identification Number/Social Security No. (SSN)

Yes No Yes No Yes No3. Do You hold US Green Card?

Eastern Bank PLC., 100 Gulshan Avenue, Dhaka-1212, Bangladesh

T el: (PABX) + 88-02-55069018, IP: +88-09666777325, E-mail: info@ebl-bd.com, Web: www.ebl.com.bd