



INVESTMENT BANK

(Registered under Financial Services Act)

KYC REQUIREMENTS FOR OPENING CORPORATE ACCOUNTS

Please arrange to bring the following documents for our file and tick the corresponding boxes

☐ Identification documents (National ID, Passport or Driver's Licence)

☐ Proof of earnings/income e.g. Bank Statement

☐ Utility Bill or tenancy agreement as proof of residency

☐ Partnership agreement

☐ Company registration certificate

☐ Certificate of incorporation

☐ Certified copy of memorandum and articles of association

☐ Trust deed for trust accounts

☐ Board resolution

☐ Initial Deposit: ☐ Current Account: MK1,000,000.00

VERIFIED BY: _____ SIGNATURE: _____

DATE / /

Application form for opening a current account

(Corporate or Registered Business)

Dear Esteemed Customer,

CDH Investment Bank Limited wishes to provide its customers with the highest standard of service delivery. In order to ensure that we serve you best, it is essential that we know you as a customer. Accordingly, we would be grateful if you complete this application form with your personal and contact details, sign the form and return it to us for processing. This information will enable us to manage your business in an efficient and timely manner through the accurate notation of your personal details on our database. We thank you sincerely for your cooperation in this regard and look forward to a mutually beneficial relationship with you.

Note: Please complete in block letters, tick in applicable block(s) and complete where necessary. Existing clients need only complete name and identity number on section A (personal details)

(fill all sections unless marked optional)

- | | |
|--|------------------------------|
| <input type="checkbox"/> Body corporate | Section A, C, D, I, K, L & M |
| <input type="checkbox"/> Partnership | Section A, C, D, E, L & M |
| <input type="checkbox"/> Sole proprietor | Section A, C, D, F, L & M |
| <input type="checkbox"/> Non-profit organization | Section A, C, D, G, L & M |
| <input type="checkbox"/> Estate/Trust | Section A, B, C, H, L & M |

Section A: Business details

Name of business..... Date established.....

Type of business ☐ Partnership ☐ Sole proprietor ☐ Estate/Trust ☐ Limited ☐ Non-profit organisation

Nature of business (specify).....

List of shareholders – Please list all direct shareholders*

Name	Share-holding %	Postal and email address	ID # (for physical persons)	Physical address

*(Use separate sheet if required)

Ultimate beneficial owners (list all corporate or individual persons owing directly or indirectly 10% or more of the company)

Name	% Ownership	Postal and email address	ID # (for physical persons)	Physical address

(Use separate sheet if required)

Ownership

Locally owned business Foreign owned business (specify country)

Business registration number Monthly turnover K

Tax payer ID number (TPIN) Financial year end

Contact person (Mr./Mrs./Miss/etc) Capacity (e.g. Secretary)

Tel. number Fax number Mobile number

Ever been declared insolvent Yes No If yes, state date rehabilitated

Address details

Registered address Physical address

Special address

Business information

Total number of employees

Annual turnover (*Audited/Unaudited*)

Source of initial funds

Current net asset value

Registered name in foreign country

Trade name in foreign country

Business address abroad

Section B: Trustees details

	1	2	3
Surname
First name
ID no. & type
Address
Telephone
Ever been declared insolvent	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, state date rehabilitated

Beneficiaries	1	2	3
Surname
First name
ID no. & type
Address
Telephone

Section C: Products/Services request

<input type="checkbox"/> Investment account	<input type="checkbox"/> Foreign currency denominated account	<input type="checkbox"/> Current account
<input type="checkbox"/> Secure loan facility	<input type="checkbox"/> Guarantee	<input type="checkbox"/> International trade
<input type="checkbox"/> Financial instruments	<input type="checkbox"/> Notice deposits	<input type="checkbox"/> Call accounts
<input type="checkbox"/> Other (<i>specify</i>)		

Do you want to receive marketing or economic information? ☐ Yes ☐ No

If yes, provide email address

Section D: Existing accounts at other institution(s)

Name of institution	Account number	Date opened	Account title	Type of account	Approximate Balance
.....
.....
.....
.....

Section E: Partnership

We, the undersigned carrying on business

In partnership under the name or style of

(Name of partnership)

Hereby authorize and request you to open an account with **CDH Investment Bank**, subject to terms and conditions.

Signing instructions.....

We hand you herewith the following:

☐ Partnership agreement ☐ Trading license ☐ Power of Attorney

Section F: Sole Proprietorship

1, the undersigned (Mr. / Mrs. / Miss etc).....

(full names)

Identity type..... Identity number.....

Carrying on business under the name or style of

(name of business)

Hereby authorize and request you to open an account with **CDH Investment Bank**, for me subject to terms and conditions on page 13-14.

Business address.....

References 1..... 2.....

Do you have a will? ☐ Yes ☐ No (if no, please state an administrator in the section of authorized signatories)

Section G: Non-profit organizations

☐ Body corporate ☐ Association ☐ Trust ☐ Club ☐ Society ☐ Other

We warrant that, at a meeting of members, it was resolved and requested that an account be opened with **CDH Investment Bank**, subject to the conditions under section O on page 13 to 14 in the

Name.....
(Hereinafter referred to as "the organization")

Registered address.....

References 1..... 2.....

Section H: Estate/Trust

I/we the undersigned representing
(Name of estate/trust)

Hereby authorize and request you to open an account with **CDH Investment Bank** subject to terms and conditions.

Registered address.....

References 1..... 2.....

I/we hand you herewith the following:

☐ Letter of executorships ☐ Certificate of appointment ☐ Trust deed

Section I: Body corporate (compulsory)

Company type Country of incorporation

We warrant that, at a meeting of directors/members, it was resolved and requested that an account be opened with CDH Investment Bank, subject to the conditions under section O on page 13 to 14 in the name of

.....
(Hereinafter referred to as "the body corporate")

Registered address.....

References 1..... 2.....

We hand you herewith the following:

<input type="checkbox"/> Certificate of approval by Registrar of Companies	<input type="checkbox"/> Certificate of incorporation
<input type="checkbox"/> Memorandum and articles of association	<input type="checkbox"/> Proof of authority to open an account
<input type="checkbox"/> A full list of present signing officials as resolved at a meeting of directors/members/partners/trustees, with their respective signatures and valid identity documents	<input type="checkbox"/> Latest balance sheet and income statement of the company
<input type="checkbox"/> Proof of physical residence	<input type="checkbox"/> The Current ownership structure of the Company
<input type="checkbox"/> A completed transaction profile form	<input type="checkbox"/> Valid identity documents and proof of Residence of all ultimate beneficial owners

Section J: Internet banking application form for corporate customers

Banking Centre.....

We hereby apply to be enrolled on CDHIB on-line banking. Details are provided as under

Secret Question : Answer:

Viewer Rights only

Name and Signature			
Email & Cell No.			

Inputter (Initiate transaction)

Name and Signature			
Email & Cell No.			

Authorizer (Authorize Transaction)

Name and Signature			
Email & Cell No.			

Transaction limits (please provide amounts)

Minimum Daily

Services required (please tick)

Account details	<input type="checkbox"/>	Cheque status Enquiry	<input type="checkbox"/>	Stop Payment	<input type="checkbox"/>
Forex rate Enquiry	<input type="checkbox"/>	Cheque book request	<input type="checkbox"/>	Bill Payments	<input type="checkbox"/>
Interest rate enquiry	<input type="checkbox"/>	Funds transfer	<input type="checkbox"/>		

Disclaimer of warranties

The client expressly agrees that use of website is at their sole risk. The website is provided on an 'as is' and as available 'basis'. CDH Investment Bank expressly disclaims all warranties of any kind, whether express or implied or statutory, including, but not limited to the implied warranties of merchantability, fitness for a particular purpose, data accuracy and completeness, and any warranties relating to non- infringement in the services.

CDH Investment Bank does not warrant that access to the website and services will be uninterrupted, timely, secure or error free or does it make any warranty as to the results that may be obtained from the website or use of the services or as to the accuracy or reliability of the services. CDH Investment Bank makes no warranty regarding the transactions entered into through website and hence will not be liable for any virus that may enter the clients system as a result of client accessing the services through the website. CDH Investment Bank does not guarantee to the client or any other third party that the services would be virus free.

Indemnity

The client agrees, at its own expense, to indemnify, defend and hold harmless CDH Investment Bank, its directors and employees, representatives, agents and its affiliates against any claim, suit, action or other proceeding brought against CDH Investment Bank, its directors, employees, representatives, agents, and affiliates by third party, to the extent that such claim suit, action or other proceeding brought against CDH Investment, its directors and employees, representatives, agents and affiliates is based on or arises in connection with the use of the internet service with reference to; (1) any deletions, additions, insertions to, or any unauthorized use of, the services by the client; (2) any misrepresentation or breach of representation or warranty made by the client contained herein; or (3) any breach of any covenant or obligation

to be performed by the client hereunder. The client agrees to pay any and all costs, damages and expenses, including, but not limited to, reasonable attorneys' fees and costs awarded against it or otherwise incurred by or in connection with or arising from any such claim, suit, action or proceeding attributable to any such claim.

Section K: FOR A LIMITED COMPANY

Name of Company:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of Incorporation:

--	--

 /

--	--

 /

--	--	--	--

Registration Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BOARD RESOLUTION TO OPEN ACCOUNT

At a meeting of directors duly covered on/ 20....., it is reported that it was desirous for the company to open a bank account with **CDH Investment Bank Limited. IT WAS RESOLVED;**

1. That the company proceeds to open a current account

With CDH Investment Bank Limited

2. That for the mean time the following shall be signatories to the said account:

2.1. _____

2.2. _____

2.3. _____

Certified true extract of the resolution

COMPANY SECRETARY/DIRECTOR

Section L: Cheque Book Application

Please supply me/us with a new cheque book containing

--

 cheque forms and charge cost thereto my/our current account in your books.

For bank use only

From.....

To.....

Issued by.....

Recorded in register by

.....

Authorized signatories for and on behalf of the account holder (list of management/directors)

Surname	1	2	3
First names	1	2	3
ID type	1	2	3
ID number	1	2	3
Capacity	1	2	3
Signature	1	2	3
Surname	4	5	6
First names	4	5	6
ID type	4	5	6
Capacity	4	5	6

List of Directors and Management

Name	Postal and email address	ID # (for physical persons)	Physical address

Section M: Customer Transaction Profile

We would like you to help us gain a better understanding of how you intend to use your new account so we can better service your needs. Please provide the information requested in the boxes below.

Please note your preferences will not affect the way you operate your CDHIB account, and the transaction fees applicable to your transactions.

1. Please indicate the purpose and intended nature of the business relationship (Reason for Account):- [] Daily Banking [] Savings [] Term Deposits [] Other (Please Specify)
2. Details of any existing relationship with the bank:

3. Please state the amount of the initial deposit:
4. Please state the source of the initial deposit (generated from what transaction or business):
5. Please state the type, volume and value of expected monthly activity and the estimated turnover in the transaction currency of the account(MWK/US\$/GBP/EUR)
6. Estimated number of transactions per month: <input type="checkbox"/> 1-10 <input type="checkbox"/> 5-10 <input type="checkbox"/> 20-50 <input type="checkbox"/> 50-100 <input type="checkbox"/> 100-200 <input type="checkbox"/> 200-500 <input type="checkbox"/> Above 500
7. Please state the estimated largest transaction on the account: <input type="checkbox"/> 1-5 <input type="checkbox"/> 10-20 <input type="checkbox"/> 20-40 <input type="checkbox"/> 60-100 <input type="checkbox"/> 100-1000 <input type="checkbox"/> Over 1000
8. Types of incoming transactions (MWK) to be received: Estimated volume: <input type="checkbox"/> 1-5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-20 <input type="checkbox"/> 20-50 <input type="checkbox"/> 50-100 <input type="checkbox"/> 100-200 <input type="checkbox"/> 200-500 <input type="checkbox"/> Above 500
9. Types of payments (MWK) to be transacted: Estimated volume:
10. Types of incoming transactions (foreign currency) to be received: Estimated volume:
11. Types of payments (Foreign currency) to be transacted: Estimated volume:
12. Please state the main source(s) for ongoing deposits into this account (generated from what transaction(s) or business):
13. Please state the currency and monthly amount generated from other sources of income (investments, shares, donations, etc):

14. Please state what the other sources of income are:
15. Please state the main source(s) for ongoing deposits into this account (generated from what transaction(s) or business):
16. Please state the country of origin for ongoing deposits into this account:
17. Please state the name of the ultimate beneficial owner of the account:

Section N: Waiver and Indemnity in Respect of Telephone, Fax and Email Instructions

Whereas
 (Name of individual client, company, partnership or trust)

has expressly requested CDH Investment Bank Limited of P.O. Box 1444, Blantyre (“the bank”) to carry out certain financial transactions on the basis of instructions given telephonically, by fax, and/or by email,

and whereas the bank has agreed, insofar as it may be possible within its normal policies and procedures, to allow such instructions,

and whereas I/we understand, confirm and acknowledge that:

- 1 authorizing the bank to act upon telephonic, fax and or/email instructions may not be the safest or most prudent way of managing my/our portfolio of accounts as a result of the inherent shortcomings in relation to each of the methods.
- 2 aside from asking questions relating to personal, private and confidential information, it is not possible for the bank to confirm the identity of any person providing instructions telephonically and that, should this personal, private and confidential information fall into the hands of a third party, it may be used for the purpose of committing fraudulent transactions.
- 3 instructions sent by fax can very easily be tampered with, intercepted, fraudulently abused by outsiders, be the cause of delay in carrying out instructions contained therein, inadvertently be mislaid or not be properly legible and it may furthermore not be possible to verify any signature that has been faxed.
- 4 the bank cannot confirm that any instruction sent by email has indeed been sent by me/us and that the risk of email facilities being fraudulently abused by unauthorized persons cannot be excluded.

- 5 by instructing and authorizing the bank to accept telephone, fax and email instructions, I/we may be exposing myself/ourselves to risk, including but limited to aforementioned.

NOW THEREFORE:

- 1 I/We hereby indemnify the bank against and waive any rights in connection with any demand, claim or action, whether directly or indirectly relating to or in connection with any telephonic, fax and/or email instruction given, unless the matter is as a result of gross negligence or willful misconduct of the bank or any of its employees, in which case the matter shall be dealt with on its legal merits.
- 2 I/We undertake that should any claim or action be made or instituted against the bank as a result of such gross negligence or willful misconduct, any claim shall be limited to direct damages and that no indirect, special or consequential damages shall be claimed.
- 3 I/We furthermore specifically indemnify the bank and hold it harmless from all demands, claims, actions, losses and damage of whatever nature in relation to:
- 3.1 infringements of confidentiality arising from the use of the telephone, fax and/or email to convey instructions to the bank;
- 3.2 malfunctions, failures or unavailability of any hardware, software or equipment.
- 3.3 damage arising from any event beyond the bank's control;
- 3.4 damage arising from the reliance of any person on incorrect, illegible, incomplete or inaccurate information or data contained in any instructions received by the bank;
- 3.5 damage arising from sending of false, fraudulent or altered instructions by telephone, fax and/or email;
- 3.6 damage caused by the misplacement or loss, however caused, of any instructions sent to the bank by fax or email; and
- 3.7 damage caused by the bank's delay to act immediately upon any instruction sent to the bank by telephone, fax or email;

provided that the aforementioned loss or damage is not a result of negligence or willful misconduct of the bank's or any of its employees, in which case the matter shall be dealt with on its legal merits.

I/we hereby waive the necessity of confirmation of receipt of any instruction issued to the bank by telephone, fax or email.

Signed aton...../...../.....
(place) (day) (month) (year)

FOR AND ON BEHALF OF THE CLIENT

Signature

Witness 1: Full name(s) and surname.....signature.....

Witness 2: Full name(s) and surname.....signature.....

FOR AND ON BEHALF OF THE BANK

Signature

Witness 1: Full name(s) and surname.....signature.....

Witness 2: Full name(s) and surname.....signature.....

Section O: Terms and conditions

Relative to

The current account named..... (The account holder)

To: **CDH Investment Bank ("the Bank")**

In consideration of the Bank opening account, and continuing the same from time to time at the Bank's discretion, the account holder hereby agree as follows:

- 1) The deposits of cheques or other commercial items (whether or not drawn or payable by the Bank) shall not be available for withdrawal until collected and/or paid by the Bank, and that bank's usual statements with respect to the account may be sent by mail from time to time at the risk of the account holder to the address as approved.
- 2) That account may be charged at any time (s) with such amount (s) as the bank may determine to be necessary to compensate for service rendered to or on behalf of the account holder whether with respect to the account or otherwise; also for the time devoted and the expense incurred by the Bank at any prior time (s) relative to any legal process (es) served on the Bank with respect to the account holder. That said, rates of the charge may be changed by the Bank at any time (s) by sending to the account holder by ordinary mail at least ten (10) days before the change becomes effective, a notice specifying the proposed change.
- 3) That with respect to each item drawn against the account as which the Bank shall have been asked by the account holder to stop its payment:
 - (a) To make such request or to confirm the same promptly in writing and to indemnify the bank against any loss resulting from the non-payment thereof;
 - (b) Should the item be paid or certified by the Bank through inadvertence or through misdirection of the Bank will in no way be held responsible, provided the bank have in good faith followed the Bank usual procedures in handling stop payment orders.
 - (c) To notify the Bank promptly in writing if the item (so stopped as to payment) is recovered or destroyed or destroyed or for any other reason the stop payment orders may be cancelled, and
 - (d) A written stop payment order shall be effective for six (6) months unless renewed in writing.
- 4) That the account holder understands that the account is subject to terms of the provisions of the bylaws, regulations and service, inherent and other rules and practices of the bank relating to the said account now in effect and hereafter adopted.
- 5) The Bank is relieved of all liabilities arising out of loss or non-receipt of any statement, voucher, advice or notice mailed or held as herein authorized. This agreement shall be governed by the laws of Malawi.

- 6) No overdrafts are permitted in the accounts without prior agreement with the Bank
- 7) That I/we understand that any sum outstanding to the debt of the account shall be liable to the interest charges at the rate fixed by the Bank from time to time.
- 8) I/we agree that in addition to any general lien or similar right to which the Bank as bankers may be entitled by law, the Bank may at any time and without notice to me/us combine or consolidate allow any of my/our account (s) with and liabilities to the Bank and set off or transfer any sums standing due to credit or any one or more such account or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging to me/us with the Bank towards satisfaction of any of my / our liabilities to the Bank or any other account or in other respect whether such liabilities be actual or contingent primary and several or joint.
- 9) Minimum balance requirements will be determined by the Bank from time to time, compliance of which is mandatory for the account holder.
- 10) That i/we agree that unless i/we object in writing to any of the matters contained in such statement within 24 days of the date of such statement, i/we shall be deemed to conclusively have accepted all matters contained in such statements as true and accurate in all aspects.
- 11) That the Bank may close at any time any of my/our accounts with the Bank by giving.

PEP Statement

Are you or any of the shareholders politically exposed person ☐ Yes ☐ No

Signature.....

Signature.....

Designation.....

Designation.....

Date.....

Date.....

For Official Use Only

Date received.....	
Client short name	Client account ref.
Account executive	Industrial/classification.
Prepared by.....	Signature.....

	<i>Input by</i>		<i>Checked by</i>		<i>Date</i>
<i>Database entered</i>	<i>Input</i>		<i>Chkd</i>		
<i>Email entered</i>	<i>Input</i>		<i>Chkd</i>		
<i>Marketing system</i>	<i>Input</i>		<i>Chkd</i>		
<i>Information printout to account executive</i>					
<i>Notes</i>					

Section P: Authorization

I/we have verified that the form is complete and compliant with account opening requirement in all respects.

Account Relationship Officer/Account Relationship Manager.

Name Signature

Date

General authorization (only one signature required, please include date of authorization)

Banking Centre Manager Signature..... Date

Chief Operating Officer Signature..... Date

Authorization for PEPS

