



**Indian Overseas Bank
Singapore**

INITIAL	
CUSTOMER ID	
ACCOUNT NUMBER	
CURRENCY	
DATE	

CORPORATE / NON-INDIVIDUAL ACCOUNT OPENING FORM

Account Type	:	<input type="checkbox"/> Current Account <input type="checkbox"/> Fixed Deposit <input type="checkbox"/> Savings Account <input type="checkbox"/> Others: _____ <i>(Please Specify)</i>
Currency	:	<input type="checkbox"/> Singapore Dollars <input type="checkbox"/> US Dollars <input type="checkbox"/> EURO <input type="checkbox"/> Others: _____ <i>(Please Specify)</i>
Customer Type	:	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Private Limited Co <input type="checkbox"/> Public Limited Co <input type="checkbox"/> Association/Club/Society <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Others: _____ <i>(Please Specify)</i>

<u>Registered Name:</u>	<u>Registration / Customer No</u>
<u>Country of Registration/Incorporation</u> <input type="checkbox"/> Singapore <input type="checkbox"/> Others: _____ <i>(Please Specify)</i>	<u>Date of Registration/ Incorporation</u>
<u>Registered Address</u>	<u>Telephone No:</u>
<u>Mailing Address (if Different from above)</u>	<u>Facsimile No:</u>
<u>E-Mail Address</u>	<u>Website(if any)</u>
<u>Name/s of Contact Person/s</u> 1) 2)	<u>Contact No</u> 1) 2)

Purpose of Account:
Source of Fund/Income:
<u>*Brief Details of Business</u>
Name of Countries Dealing With
Name of Buyers, Sellers
Name of Group Companies firm
Industry Classifications
Other Accounts with IOB
Expected Type of Transactions Eg: <i>Value ,Frequency & Volume</i>

Present Bankers(<i>if any</i>)		
Bank's Name	Type of Account(<i>Loan/Current</i>)	Year Account was opened
1)		
2)		

*Please attach brief profile of your business introducing Turnover and Annual Income and Balance Sheet [Case to Case Basis]

***Particulars of Sole-Proprietor / Partners / Directors and Authorized Signatories as per Resolution (if applicable)
Specimen Signature Card Enclosed**

SNo	Name	Particulars	Residential Address
1		Designation : Nationality : ID No /FIN No : Passport : Date of Birth :	
2		Designation : Nationality : ID No/FIN No:..... Passport : Date of Birth :	
3		Designation : Nationality : ID No/FIN No Passport : Date of Birth :	
4		Designation : Nationality : ID No/FIN No Passport : Date of Birth :	
5		Designation : Nationality : ID No/FIN No Passport : Date of Birth :	

Beneficial Ownership (*Please tick*)

NO, there are no other Beneficial Owners other than mentioned above

YES, there are other Beneficial Owners who ultimately own, control the company. Their details are as follows: (If the Beneficial Owner is a Corporate Entity the details of the ultimate ownership to be given)

Name*	NRIC No / PP No Registration No (for entity)	Nationality / Country of Incorporation (for entity)	% Shares

Should any of the above-mentioned details change subsequent to the submission of this form to you, we undertake to inform you accordingly.

* Individual KYC shall be filled up completely and signed along with necessary supporting documents

Chain of Corporate Ownership must be completed

Tax Status (if applicable) *

- Tax Resident in Singapore
- Non Tax Resident in Singapore (Please indicate Country of Residence)

Country of Residence: _____

* Enclose Latest Income tax Returns Form of account holders, Directors, Shareholders & Ultimate Beneficial Owners

FATCA Applicability : YES NO
(Please Fill in Separate Declaration Form)

Initial Amount of Deposit in SB/CA :

I/We are interested in receiving promotion material/
Marketing call from Bank for their Products : YES NO

<u>Introduction</u>	
Introduced By: (Name/Address/ contact No)	Signature:

DEPOSIT INSURANCE SCHEME

Singapore Dollar Deposits of non-bank depositors are insured by the Singapore Deposit insurance Corporation, for up to S\$75,000/- in aggregate per depositor per Scheme Member by law. Foreign currency deposits, dual currency investments, structured deposits and other investment products are not insured.

DECLARATION: I/We agree and confirm that all the information provided by me/us in this Application is true to the best of my/our knowledge and belief and that the Bank shall be duly entitled to rely on the accuracy of such information without any further investigations on the part of the Bank; in the case of any change; I/We will bring it to the knowledge of the Bank. I/We confirm having read and understood the General Terms & Conditions for opening the above account and confirm that I/We will be bound by any additional Terms and Conditions that the Bank may impose from time to time. I/We undertake all funds being routed by me/us under this Deposit(s) is/are legitimately sourced and not related to any criminal activities/drug trafficking/terrorist activities/other forms of money laundering and suspicious activities and do not violate any provisions of the laws in this regard. I/We authorize Bank to disclose any information and particulars relating to such of our account(s) to any and all persons in accordance with the Bank's Terms and conditions and Prevailing Laws and Regulations. I/We confirm that no Legal Actions/Bankruptcy proceeding is / are pending against me / us. I / We declare that I/we comply with all Tax Laws of the Country of our residence / where we are citizens or otherwise subject to.

Yours faithfully

Authorized Signatory/ies

TO: INDIAN OVERSEAS BANK, SINGAPORE (on the Letter head of the company)

RESOLUTION PASSED BY THE BOARD OF DIRECTORS OF COMPANY

Date of meeting

We hereby certify that the following resolutions of the Board of Directors of the _____ (Company name) (the "Company") was passed at a meeting of the board held on the _____ and has been duly recorded in the Minute Book of the said company:

RESOLVED:

A. That a Banking Account for the Company, be opened with INDIAN OVERSEAS Bank (the "Bank") in accordance with and subject to the Bank's Terms and Conditions Governing Accounts as amended from time to time.

B. That the Bank be and is hereby authorized to honour cheques, bills of exchange and promissory notes drawn, accepted or made on behalf of the company and to act on any instruction so given relating to the account, whether the same be overdrawn or not or relating to the transactions of the Company by the following person/s (herein referred to as authorized person/s) with mode of operation as (singly / any two jointly / all jointly / any other mode) authorized on behalf of the Company to operate such account(s) in the following manner :

Authorized Signatories	Name	NRIC/Passport No	Designation	Signature
1.				
2.				
3.				

C. That this resolution be communicated to the Bank and remain in force until an amending resolution is passed by the Board and a certified copy thereof has been furnished to the Bank and that until such copy of amending resolution is received by the Bank the Bank shall be indemnified and saved harmless from any loss suffered or liabilities incurred by it (including legal costs on a full indemnity basis) in continuing to act in pursuance of this resolution.

D. And that the Bank be furnished with certified copy of the Company's updated Memorandum and Article of Association, present list of Board of Directors, Shareholders , beneficial owners and copies of any amending Resolution that may Worn time to time be passed.

E. That the Company has been furnished with the Terms and Conditions Governing Accounts of the Bank as appeared in website and has read, understood and agree to all the terms and conditions contained

APPROVED BY

.....
Chairman

.....
Director (s)

.....
Secretary

Indemnity for fax instruction on company letter head with common seal and stamp if applicable.

DEED OF INDEMNITY

To: INDIAN OVERSEAS BANK, SINGAPORE

We request you to accept and act on the instructions and authority given to you by the resolution of our Board passed on

_____ a copy of which is attached herewith.

In consideration of your acceding of our request aforesaid we hereby undertake and agree to fully indemnify you and save you harmless from and against all actions, charges, losses, damages, expenses, claims and demands which may be made against you or which you may sustain including legal fees on full indemnity basis by reason of your acting or relying on instructions or orders given or purported to be given to you by telex or facsimile in the names of - <COMPANY NAME>-

We also agree and confirm that you will not be responsible in any way for any unauthorized or erroneous instructions or orders given to you and that you will not be under any duty to verify the identity of the sender of the telex or facsimile instructions or orders or inquire into the genuineness of authenticity of such telex or facsimile instructions or orders or any signature thereon which appears to be that of an authorized signatory in your opinion.

Our request and the undertakings and confirmations herein shall continue until we give you written notice revoking or terminating the same and such revocation or termination shall only be effective from the date of receipt by you of such written notice.

We also undertake that such Fax instruction will be followed by original instruction.

This Deed of Indemnity shall be governed by the laws of Singapore.

Date this _____ day of _____ 20 _____

(The Common Seal of _____ name of the company _____ (was hereunto) affixed in the presence of)

Director 1/ Authorized Signatory 1

Director 2 / Authorized Signatory 2

Fax operation resolution [on company letter head]

TO: INDIAN OVERSEAS BANK, SINGAPORE

RESOLUTION PASSED BY THE BOARD OF DIRECTORS OF COMPANY.....

Date of meeting

We hereby certify that the following resolutions of the Board of Directors of the _____
_____ (Company name) (the "Company") was passed at a meeting of the board held
on the _____ and has been duly recorded in the Minute Book of the said company:

RESOLVED:

A. Further to the resolution passed by the Board on _____ and in addition to (and not in derogation of) the authority and instructions therein given, INDIAN OVERSEAS BANK ("the Bank") be and they are hereby authorised and instructed to honour all orders in respect of the Company's accounts with the Bank of any facilities or services provided by the Bank by telex or Facsimile and to honour all orders given as aforesaid and to debit the amount as ordered to the Company's account or any of its accounts with the Bank whether it or they be in credit or overdrawn in consequent of such debit.

And to act and rely on any instructions given as aforesaid with regard to any accounts or transactions of the company, including the deposit and withdrawal of all securities, documents, boxes or other property deposited with the Bank and the granting of Credits or guarantees.

Further resolved such fax instruction will be followed by original instruction.

B. The company executes **under its Common Seal** and issue in favour of the Bank a Deed of Indemnity in the form of the draft Deed of Indemnity circulated at the meeting which terms be and hereby approved.

.....
Chairman

.....
Secretary

.....
Director(s)

INDEMNITY FOR ORAL ENQUIRY ON COMPANY LETTER HEAD

INDEMNITY

To: INDIAN OVERSEAS BANK , Singapore

WHEREAS we have requested and may from time to time verbally request from you information pertaining to our account balances which information is required by our officers, employees, servants and agents**on a (*) daily or weekly basis under our present arrangements with you (hereinafter called "the inquiries").

IN CONSIDERATION of your agreeing at our request to enter into an agreement in respect of the inquiries, including without limitation all information records and other documents concerning any account or accounts which we have or may at any time have with you (hereinafter called the "arrangement") (Name of the company) a company incorporated in Singapore and having its registered office at (address), our successors in title and assigns HEREBY AGREE AND UNDERTAKE to indemnify you, your successors and assigns and at all times to keep you fully indemnified from and against all liabilities, claims and demands, actions and proceedings, losses and expenses including legal costs as between solicitor and own client and all other liabilities and losses of whatsoever nature or description which may be made or taken or incurred or suffered by you in relation to or arising out of the arrangement.

AND WE FURTHER AGREE that our liability aforesaid is irrevocable and shall remain in full force and effect from the date herein.

WE HEREBY IRREVOCABLY guarantee the due performance of this Indemnity and AGREE that our liability hereunder shall not be prejudiced or affected by any time, waiver of the indulgence(s) which you may grant to or by any compromise or other arrangement which you make with any person or persons in connection herewith.

Dated this day of 20 _____

Authorized signature(s) & Company Stamp

[(*) delete whichever is not applicable]

** Detail of person to whom information can be furnished: Name of Person , ID Particulars Copy to be given

Authorized signature(s) & Company Stamp

To

Indian Overseas Bank, Singapore

Name of the Company _____

Details of present Directors as on

FULLNAME (As per NRIC/Passport)	NRIC/Passport	NATIONALITY	DATE OF BIRTH	RESIDENTIAL ADDRESS	PHONE/MAILID/ CONTACT DETAILS

SIGNED BY

.....
Chairman

.....
Secretary

.....
Director(s)

To

Indian Overseas bank , Singapore

Name of company _____

Detail of present shareholders,; as on

[In case of listed company, top 10 shareholder holding majority of shares to be furnished].

FULLNAME (As per NRIC/Passport)	NRIC/Passport	NATIONALITY	DATE OF BIRTH	RESIDENTIAL ADDRESS	PHONE/MAILID/ CONTACT DETAILS

SIGNED BY

.....
Chairman

.....
Secretary

.....
Director(s)

PARTNERSHIP LETTER

To: INDIAN OVERSEAS BANK , Singapore

We, the undersigned, are the present and only partners of the Firm running under the name and style of _____(the "Firm") having its head office at _____ and branches at and carrying on the business of _____

Each of the Authorized Signatories is authorized to sign on behalf of the Firm in the manner appearing below and has full and unrestricted authority to bind the Firm, and each of us is jointly and severally liable for all the liabilities thereof.

Authorized Signatories Name	NRIC/PP No	Designation	Signature
1.			
2.			
3.			

We hereby request you to open a Current and/or Fixed deposit account for us in the name of the Firm. That should the current account of the Firm with the Bank become overdrawn, each of us shall be jointly and severally liable for the repayment of said overdraft and the Bank's usual interest thereon and for all Bank charges, if any, in connection with the operation of the account.

We shall also be jointly and severally liable for the liabilities of the Firm to the Bank under the aforesaid account and the Bank may recover its claim in respect of such liabilities of the Firm from me/us, jointly and severally and also from the estate of all or any of us/Partners of the Firm.

Whenever any change occurs in our partnership, for whatever reason, we undertake to inform the bank of the same in writing by all the partners and our individual responsibility and liability to the Bank shall continue, not withstanding such change, until my/our liabilities with the Bank are discharged, in writing by the Bank. The said account will be operated upon by each of us singly or jointly with another of us for and behalf of the said Firm:

(Signature of All Partners /Stamp of the Firm)

To

Indian Overseas Bank , Singapore

Name of company _____

Detail of ULTIMATE BENEFICIAL OWNERS as on _____

FULLNAME (As per NRIC/Passport)	NRIC/Passport	NATIONALITY	DATE OF BIRTH	RESIDENTIAL ADDRESS	PHONE/MAILID/ CONTACT DETAILS

SIGNED BY

.....
Chairman

.....
Secretary

.....
Director(s)

Enclose: KYC/ID Documents