

TERM DEPOSIT APPLICATION FORM - CORPORATE

The Manager ABC Banking Corporation Ltd WEAL HOUSE, Duke of Edinburgh Avenue, Place d'Armes, 11328, Port Louis	DateBranch
Dear Sir/Madam Please open a Term Deposit Account as per the following: Customer Name	CIF
INVESTMENT DETAILS Amount (in figures)	Amount (in words)
Deposit Term Debit Account Number	Currency
By cheque number RATE OF INTEREST Fixed rate of:	above ABC Banking Corporation Ltd savings
MATURITY INSTRUCTIONS Upon maturity, please: Redeem capital and interest	Yearly At maturity
Credit to account	

PENALTY CLAUSE

Generally withdrawals from a term account before its maturity date will not be allowed. In specific cases, however, ABC Banking Corporation Ltd may, in its sole discretion, allow an account holder to withdraw all, but not some, of the funds lying in a term deposit account. In such event, penalty charged will be applied as follows:

- Within 3 months of deposit: No interest payable
- After 3 months of deposit: 2% below the initial deposit rate or prevailing savings rate whichever is lower for the whole period up to the date of redemption.

All other terms and conditions are as specified in ABC Banking Corporation Ltd's Terms and Conditions for Terms Deposits.

DECLARATION

I/We hereby confirm that the details and information given by me/us in support of the present application are true and correct. By signing this application, I/we hereby acknowledge having taken cognizance of the ABC Banking Corporation Ltd account opening terms and conditions which shall form part of and be read in conjunction with this account opening form.

I/We are fully aware of the provisions applicable under the Financial Intelligence and Anti Money Laundering Act 2002 and the Prevention of Corruption Act 2002. All source of funds and purpose of transactions will be accurately and fully declared and I/we shall comply with all anti-money laundering laws and regulations in force and undertake not to use or allow my/our account to be used for any illegal, unlawful activity or for the laundering of money.

I/We understand and acknowledge that ABC Banking Corporation Ltd may be required to store or share my/our personal data with third parties for the purposes of providing its services. I/We hereby consent to the storage or sharing of my/our personal data in the following circumstances:

- a. Where a third party service provider is providing a service to ABC Banking Corporation Ltd;
- b. To regulatory and investigating bodies;
- c. To credit reference or fraud or money laundering prevention or detection agencies; and
- d. Where required or permitted by an order of a court or under any law or regulation.

I/we confirm that I/we have been recommended by ABC Banking Corporation Ltd to seek professional advice with regards to the optimal management of my/our assets before applying for this Term Deposit Account.

I hereby confirm having read and understood the above Term and Conditions.

	Signatory 1		Signatory 2	
Authorised Signatory				
Signature				
Designation				
Date				
Signing Instruction			Company Seal	
Office Use Only Term Deposit Account Number				
Completed by:		Signature:		Date
Processed by:		Signature:		Date
Verified by:		Signature:		Date