

# Account Opening form

## Limited Company

For office use:

Scheme code

### Documentation required for account opening:

#### Identity of Business:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Certificate of Incorporation           | <input type="checkbox"/> Board resolution (as per format provided signed by authorised signatories)                     | <input type="checkbox"/> Council Tax Statement                     |
| <input type="checkbox"/> Memorandum and Articles of Association | <input type="checkbox"/> Declaration (confirmation that no general charge against the company's assets has been lodged) | <input type="checkbox"/> Current Bank Statement for last 3 months  |
| <input type="checkbox"/> List of all Directors                  |   | <input type="checkbox"/> Current Utility Bill within last 3 months |
| <input type="checkbox"/> Shareholding of Company                |   |  |

#### Identity of Directors & Signatories:

- Valid Passport, or  
 Valid UK Photo Card Driving Licence

#### Address of Directors & Signatories:

- Council Tax Statement  
 Current Bank Statement for last 3 months  
 Current Utility Bill within last 3 months  
 Valid Photo Card UK Driving Licence (if not used for Identity as above)

N.B. Please note this information is also required for all shareholders of 10% and above

#### Financial Requirements:

- Company Financial provided from Companies House / Latest Audited Report or Financial Statements (if they cannot be provided from Companies House).

If you are visiting a branch, please bring original documents. If you are completing and sending this application form by post, please provide certified copies of documents. The documents are to be certified by a registered Solicitor, Notary, Chartered Accountant or your Bank.

Please fill in the form using **BLOCK CAPITALS** and black ink. Tick any boxes which apply.

To be completed by the customer:

Account to be opened at Branch:

#### Product / Account type:

- 1) Current Account   
2) Savings Account   
3) Fixed Deposit   
4) Other (Please specify)

#### Currency: (GBP/Dollar/Euro)

- GBP   
USD   
EURO

#### Purpose of the account:

- Savings   
Day to Day   
Other (Please specify)

Does the Company already have an account with SBI UK?

Yes  No

If yes, please provide your Account number:

## Business Details

Business name:

Business Group name: (if required)

Company Registration Number:

VAT Registration Number:

Date of Incorporation

/  /

## Business Details *(Continued)*

Correspondence address:

Line 1

Line 2

Town

Country  Post code

Business Telephone:

Business Email Address:

Registered address: *(if different)*

Line 1

Line 2

Town

Country  Post code

Business Fax:

Business Mobile Number: (for Online Banking / Debit Card)

## About Your Business

Industry Type:

Full Details of the Nature and Type of Business:



Engaged in Importing/Exporting?

Yes  No

Recent/Expected Annual Turnover:

Number of Employees:

Balance Sheet Total:

General Source of Credits to the Account:



General Destination of Payments:

Cheque Book Required?

Yes   
No

Statement Frequency: Quarterly

A.

For the purposes of Common Reporting Standard, does the entity meet the description of any of the following four categories? (If you are unsure then please consult your tax adviser):

	Yes	No	SC needed
Custodial Institution – i.e. do you hold, as a substantial portion of your business, Financial Assets for the account of others?			
Depository Institution – i.e. do you accept deposits within the ordinary course of your business?			
Investment Entity – i.e. do you conduct a business of trading in financial assets on behalf of customers or conduct portfolio management?			
If yes to the above, are you a professionally managed Investment Entity situated outside of a CRS Participating Jurisdiction?			If yes ticked
Specified Insurance Company – i.e. are you an insurance company or a holding company in an insurance group?			

B.

If you have responded 'No' to all of A above, please confirm whether:

	Yes	No
- Less than 50% of the entity's gross income for the preceding calendar year is passive income (such as dividends, interest, royalties, annuities and rent);		
<b>and</b>		
- Less than 50% of the assets held by the entity during the preceding calendar year are assets that produce or are held for the production of passive income (such as dividends, interest, royalties, annuities and rent).		

If you ticked "No" to all questions in Section A and B, please complete Self-Certification. Please contact the branch for a Self-Certification Form.

## Details of Directors/Authorised Signatories

Title: Mr  Mrs  Ms  Miss  Other

First name:

Middle name:

Surname:

Position in Company:

Percentage of Shareholding:

Address:

Line 1

Line 2

Town

Country  Post code

Length of time at this address:  /

Previous address: (If less than 3 years at current address)

Line 1

Line 2

Town

Country  Post code

Length of time at previous address:  /

Date of birth:

/  /

Nationality:

Daytime contact telephone:

Mobile:

Mobile will be used for Internet Banking one time password 'OTP' generation (if required).

Email:

### US withholding tax declaration

For the purpose of the US Foreign Accounts Tax Compliance Act (FATCA) please confirm whether you are a US Person/Citizen. I also agree to notify you if my situation changes:

I am not a US person or US citizen

I am a US person or US citizen\*

\*(Please ask to complete Foreign Account Tax Compliance Act form)

Existing SBI UK Account Holder?

Yes  No

If yes, please provide your Account number:

Internet Banking Role:

Enquiry Only  Transaction Preparer/Authoriser  Both

Mother's maiden name: (required for security purposes)

## Details of Directors/Authorised Signatories (Continued)

Title: Mr  Mrs  Ms  Miss  Other

First name:

Middle name:

Surname:

Position in Company:

Percentage of Shareholding:

Address:

Line 1

Line 2

Town

Country  Post code

Length of time at this address:  /

Previous address: (If less than 3 years at current address)

Line 1

Line 2

Town

Country  Post code

Length of time at previous address:  /

Date of birth:

/  /

Nationality:

Daytime contact telephone:

Mobile:

Mobile will be used for Internet Banking one time password 'OTP' generation (if required).

Email:

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Yes  No

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Mother's maiden name: (required for security purposes)

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Title: Mr  Mrs  Ms  Miss  Other

First name:

Middle name:

Surname:

Position in Company:

Percentage of Shareholding

Address:

Line 1

Line 2

Town

Country  Post code

Length of time at this address:  /

Previous address: *(If less than 3 years at current address)*

Line 1

Line 2

Town

Country  Post code

Length of time at previous address:  /

Date of birth:  
 /  /

Nationality:

Daytime contact telephone:

Mobile:

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Email:

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Title: Mr  Mrs  Ms  Miss  Other

First name:

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Percentage of Shareholding

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Line 2

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Country  Post code

Length of time at this address:  /

Previous address: *(If less than 3 years at current address)*

Line 1

Line 2

Town

Country  Post code

Length of time at previous address:  /

Date of birth:  
 /  /

Nationality:

Daytime contact telephone:

Mobile:

*Mobile will be used for Internet Banking one time password 'OTP' generation (if required).*

Email:

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Existing SBI UK Account Holder?

Yes  No

*If yes, please provide your Account number:*

Internet Banking Role:

Enquiry Only  Transaction Preparer/Authoriser  Both

Mother's maiden name: *(required for security purposes)*



## Ultimate Beneficial Owners *Continued (All shareholders of 10% and above)*

Title: Mr  Mrs  Ms  Miss  Other

First name:

Middle name:

Surname:

Position in Company:

Percentage of Shareholding

Address:

Line 1

Line 2

Town

Country  Post code

Length of time at this address:  /

Previous address: (If less than 3 years at current address)

Line 1

Line 2

Town

Country  Post code

Length of time at previous address:  /

Date of birth:  /  /

Nationality:

Daytime contact telephone:

Mobile:

Email:

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I am a US person or US citizen\*

*\*(Please ask to complete Foreign Account Tax Compliance Act form)*

Existing SBI UK Account Holder?

Yes

No

If yes, please provide your Account number:

## Ultimate Beneficial Owners *Continued (All shareholders of 10% and above)*

Title: Mr  Mrs  Ms  Miss  Other

First name:

Middle name:

Surname:

Position in Company:

Percentage of Shareholding

Address:

Line 1

Line 2

Town

Country  Post code

Length of time at this address:  /

Previous address: (If less than 3 years at current address)

Line 1

Line 2

Town

Country  Post code

Length of time at previous address:  /

Date of birth:  /  /

Nationality:

Daytime contact telephone:

Mobile:

Email:

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Existing SBI UK Account Holder?

Yes

No

If yes, please provide your Account number:



# Telecommunication Indemnity

To: State Bank of India  
("the Bank")

From:

Company Name: (plc/Limited)

  

Address: ("the Company")

Line 1

Line 2

Town

Country  Post code

Date of:

 /  / 

Dear Sirs

## Instructions given by telephone, fax, email or over the internet using the Bank's internet banking service

Account(s) number ("the Account"):

We refer to the mandate between the Bank and the Company for the operation of the above Accounts and our banking arrangements with the Bank ("Mandate").

We acknowledge that the Mandate provides for us to give the Bank all instructions in writing signed by the signatories named in the Mandate. We wish to vary the Mandate as set out in this letter. We authorise and instruct the Bank to carry out any instructions ("Instructions") whatsoever relating to the Accounts which are given on our behalf by any of the persons named below ("the Specified Persons") by telephone, fax, email or over the internet using the Bank's internet banking services.

In consideration of the Bank agreeing to vary the Mandate as set out in this letter the Company agrees to indemnify the Bank fully on demand against all losses, claims, actions, proceedings, demands, damages, costs and expenses suffered or incurred by the Bank arising out of the instructions or the Bank carrying out the instructions.

## Notice of termination

The terms of this letter shall continue until either the Bank or the Company gives the other not less than seven days written notice of termination signed by a duly authorised officer (to be delivered by hand or sent by first class post). The notice of termination will not release the Company from any liability under this letter in respect of instructions received or performed by the Bank prior to the date of termination.

## Names of Specified Persons

The Specified Persons are each of the following:

Name:

Name:

This letter has been signed by the Company as a deed on the date stated above.

Signed as a Deed

by:

acting by two directors/a director and the secretary

Director:

Director / Secretary

**OR**

Signed as a Deed

by:

acting by a director in the presence of

Director:

Witness

Signature of witness:



# Board Resolution

TO: State Bank of India

Date:

/  /

We hereby certify that the following resolutions of the Board of Directors of the:

Company, Limited, were passed at a meeting of the Board duly convened and held on the:

/  /

and has been duly recorded in the minute book of the said Company.

Resolved that:

1. That a banking account(s) in the name of the Company be opened with the State Bank of India ("the Bank"), and that the following resolutions shall apply to all accounts of the Company with the Bank now or in the future.
2. The company accept the Terms and Conditions contained in the booklets supplied by the bank (including the Banks general T and C's).

- a) To honour and comply with all cheque and other orders or instructions signed on behalf of the Company singly/jointly by the following authorised signatories:

Name & Signature #1

Signature:

Name & Signature #2

Signature:

Name & Signature #3

Signature:

Name & Signature #4

Signature:

- b) To accept the signatory as fully empowered to act on behalf of and bind the Company in any other transactions with the Bank.

- c) It was further resolved that State Bank of India be requested to open additional accounts as and when required by the company at the request of the authorised signatory. The Bank may also be instructed from time to time regarding any changes to the authorised signatories to the account.

- d) It was further resolved that State Bank of India be authorised to accept facsimile/telecommunication instructions or scanned copy of instruction by email given on behalf of the Company by the authorised signatories as mentioned above and it was further resolved to execute an Telecommunication/Instruction indemnity in favour of the State Bank of India to allow the authorised signatories to give instructions to the Bank by fax or through email.

- e) It was further resolved that the company do avail the 'Corporate Internet Banking Service' over Internet Channel with State Bank of India (SBI) at their various Branches and the Company accepts such 'Terms of Service' for Corporate Internet Banking laid down by SBI from time to time for the purpose. Resolved further that each of the officials as empowered by the Company to operate the Company's accounts with SBI either singly or jointly as the case may be, is hereby authorised to apply for and avail of the 'Corporate Internet Banking' facility offered by SBI and do all they have been authorised, electronically, using their user name and password.

The Bank be supplied with:

- a) A copy of the Company's Memorandum & Articles of Association certified as being true, complete and up to date;

- b) The Company's Certificate of Incorporation (to be copied and duly returned);

- c) If the Company is a Public Company the Company's Certificate to commence business; and

- d) Copies of any resolutions concerning the foregoing which may be passed from time to time.

1. The Company agrees that any indebtedness or liability incurred by the Company under this authority shall in the absence of any express written agreement by the Bank to the contrary be due and payable on demand.

2. The Bank be and is by this resolution authorise to provide the Company's auditors from the time being and from time to time with such information as the Company's auditors may request from time to time until notice in writing to the contrary is received by the Bank.

3. The Company agrees to provide to the Bank in writing any changes in details or circumstances that may change from time to time.

4. The Company Secretary shall, as and when necessary, supply to the Bank a list of the current directors and, if applicable, other officials authorised to sign with specimen signatures and the Bank may on such lists signed by the Secretary.

5. The Company hereby confirms that no general charge on the assets of the company has been created in favour of any bank or financial institution/and or the company has obtained the necessary approval of the bank/financial institution for opening and operating a current account with the State Bank of India a copy of which is attached.

6. The Company hereby confirms that none of the directors are or have been disqualified under the Company Directors Disqualification Act 1986 or any similar overseas legislation covering the disqualification of directors or other officers of a company.

7. These resolutions be communicated to the Bank and shall constitute the Company's Mandate to the Bank and remain in force until an amended resolution can be passed by the Board of Directors and a copy thereof, certified by the Chairman and the Secretary or by any Director or the Secretary acting or purporting to act on behalf of the Company shall have been received by the Bank.

8. In this resolution the expressions 'Directors' and 'Secretary' shall be construed as Director(s) and Secretary for the time being of the Company and shall, in the case of Director(s) include alternate Director(s) and in the case of Secretary shall include any Joint Secretary, Assistant Secretary or Temporary Secretary.

9. We certify that the signatures set down within Section B (About your Business) of this account opening form are those of all the Directors, the Secretary and of any other Officers of the Company authorised to sign, that such signatures are the genuine signatures of such persons and that such signatures operate as the specimen signatures of each of such persons.

Your faithfully

Name & Signature of Director

Signature:

Name & Signature of Director

Signature: