

Nomination (Except for Current Account) ☐ Yes ☐ No (Cross out the section)

	Nominee 1	Nominee 2
Full Name of Nominee		
Address of Nominee		
NIC/Passport No.	<input type="text"/>	<input type="text"/>
Payment %	<input type="text"/>	<input type="text"/>

I / We do hereby nominate the above named as my/our nominee/s to receive all monies lying in the account on my/our death subject to the provisions of Section 14 of Bank of Ceylon Ordinance. We are aware in the event of the death of any one of joint account holders the nomination becomes invalid.

Signatures:

Witness:

Applicant 1 _____

Date _____

Name _____

Address _____

Applicant 2 _____

Date _____

Signature _____

Introduction (For Current Accounts / Cheque Deposit Saving Accounts only)

I am well acquainted with _____ whose signature/s appear overleaf and his/her/their signature/s was/were affixed in my presence. I certify that he/she/they is/are suitable person/s to open and maintain a Current/Savings Account with Bank of Ceylon.

Name & Designation: _____

Address: _____

Current Account No: _____

Signature
(Place Seal if available)

Bank use only: Verified by

Date: _____

Funding using Existing A/C ☐ Yes³ ☐ No (Cross out the section) 3. Both Accounts should be in the same Currency

Debit Currency & Amount from my Savings/ Current Account bearing number to fund this new Account

Declaration by Joint Account Holder/s for issuing Debit Card/ Internet Banking Facilities

I / We have no objections in giving Debit card / Internet banking facilities to

Mr/ Ms _____ Mr/ Ms _____

Declaration for Electronic Fund Transfer Cards (To: Director, Department of Foreign Exchange, Central Bank of Sri Lanka)

(To be filled by the Applicant/s to obtain foreign exchange against Debit or any other Electronic Fund Transfer Card [EFTC].)

I / We _____ (Applicant/ 1), _____ (Applicant 2), declare that all the details given above by me/us on this form are true and correct. I/We hereby confirm that I/We am/are aware of the conditions imposed under the provision of the Foreign Exchange Act, No. 12 of 2017 (the Act) on Electronic Fund Transfer Cards (EFTC) subject to which the card may be used for transactions in foreign exchange and I/we hereby undertake to abide by the said conditions. I/We further agree to provide any information on transactions carried out by me/us in foreign exchange on the card/s issued to me/us as The Bank of Ceylon may require for the purpose of the Act. I/We am/are aware that the Authorised Dealer (bank) is required to suspend availability of foreign exchange on EFTC if reasonable ground exists to suspect that unauthorised foreign exchange transactions are being carried out on the EFTC issued to me/us and report the matter to the Director, Department of Foreign Exchange. I/We also affirm that I/we undertake to surrender the Debit card/s to The Bank of Ceylon if I/We migrate or leave Sri Lanka for employment abroad.

Applicant 1 Signature _____ Applicant 2 Signature _____

Bank use only

Declaration for Electronic Fund Transfer Cards

I _____ (Name of the officer) as the Authorised Officer have carefully examined the information together with relevant documents submitted by the applicant/s and satisfied with the bona-fide of these information and documents. I undertake to exercise due diligence on the transactions carried out by the cardholder on his/her EFTC in foreign exchange and to suspend the availability of foreign exchange on the EFTC if reasonable ground exists to suspect that unauthorised foreign exchange transactions are being carried out on the EFTC in violation of the undertaking and to bring the matter to the notice of the Director, Department of Foreign Exchange.

Any other remarks

Declaration of the Authorized Officer

I have carefully examined the above information together with the relevant documents submitted by the customer and satisfied myself that the said information and documents are in conformity with the Financial Transaction Reporting Act No 6 of 2006 and the Internal Policies & circulars of the Bank. Further I have updated the CIF according to the information.

Date

PF Number

Signature

Acknowledgement – I/We have received the following

Passbook ☐ Yes ☐ No Internet banking (Login & PIN) ☐ Yes ☐ No Debit Card & PIN ☐ Yes ☐ NO

Applicants' Signatures _____