

Account Name:									
Account Type:					Account Number				
Currency: <input type="checkbox"/> KES <input type="checkbox"/> USD <input type="checkbox"/> EURO <input type="checkbox"/> GBP <input type="checkbox"/> UGX <input type="checkbox"/> TZS <input type="checkbox"/> OTHER									

CUSTOMER DETAILS: INDIVIDUAL/JOINT ACCOUNT

Surname:				Other Names:				Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date Of Birth:		D	D	M	M	Y	Y	Y	Y
1 st Nationality:								2 nd Nationality:	
National ID/Passport No:						Expiry Date:			
Country of Residence				PIN/Tax number:					
Mobile Telephone No.				Residential Telephone No.					
Office Telephone No.				Email:					
Residential Address (Physical):						Office Address (Physical):			
Postal Address:			Postal Code:			Town:		Country:	
Occupation:						Designation/Job Title:			
Name of Employer/Line of Business (please provide details):									
Net income P.M.:				Expected Turnover <input type="checkbox"/> <0.5M <input type="checkbox"/> 0.5 to 1M <input type="checkbox"/> 1M to 5M <input type="checkbox"/> Over 5M					
Source of Funds: <input type="checkbox"/> Salary <input type="checkbox"/> Business <input type="checkbox"/> Investments <input type="checkbox"/> Others (specify)									
The address given above shall be used to communicate confidential information									
Next of Kin: Name _____ Relationship _____ Telephone _____									

REFERENCES / INTRODUCTION

Please obtain at least one reference from a person who is an existing BOA-K account holder for at least 6 months.

Reference Name	Signature	Address & Telephone No	Occupation/ Profession	Account No. In BANK OF AFRICA	Relationship with applicant

OTHER RELATED ACCOUNTS WITH BOA

Account Name(s) _____ Account Number(s) _____

FOR 123 COOL KIDS ACCOUNT(CHILD DETAILS)

First Name:				Middle Name:				Last Name:	
Date Of Birth:		D	D	M	M	Y	Y	Y	Y
Child Birth Certificate Number:									
Relationship with Child: <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Other (Specify)									

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)/ COMMON REPORTING STANDARDS (CRS)

1. Are you a foreign resident? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which country?		
2. Are you a foreign citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which country?		
		Yes / No
3. Have you granted Power of Attorney or Stakeholder authority to a person with a U.S. address?		
4. Do you have a U.S. residential address?		
5. Do you have a standing order, c/o or hold mail address in US?		
6. Do you have a standing order to a U.S. Bank Account?		
7. Do you have a US Telephone Number?		

 If your answer to question 1 or 2 is US or you have answered YES to questions 3-7 please fill in the relevant forms available on www.irs.gov

POLITICALLY EXPOSED PERSONS DECLARATION

Does the account holder, any stakeholder/signatory or their close associates hold a prominent public position within a government (Kenya/Foreign) or a government institution (parastatal or entity)? ☐ YES ☐ NO

If yes above, please advise on the following

Name of Signatory/ stakeholder that holds a senior position: _____

Position held: _____

Relationship with the PEP: _____

(Use extra sheet in case the above provision is not enough)

AUTHORIZED SIGNATURE

Append Photo
Here

Name:

Mode of Account Operation

☐ All to sign ☐ Singly

ID No: Date:.....

☐ Either or Survivor

Signature

☐ Other (specify):.....

Attach copies of personal identification for all authorised signatories

ATM SERVICES YES ☐ NO ☐

VISA CLASSIC CARD: ☐ VISA GOLD CARD: ☐

Daily Withdrawal Limit per Account: ☐ KES 50,000 ☐ Other (Specify): _____

CHEQUE BOOK YES ☐ NO ☐

No. of leaves: 25 ☐ 50 ☐

B-MOBILE (MOBILE BANKING) YES ☐ NO ☐

Phone Number: _____ Default Account No: _____ Account Type: _____

SMS ALERTS AVAILABLE: YES ☐ NO ☐

• Credit Limit: KES _____ • Debit Limit: KES _____ • Minimum Bal: KES _____

(Please send me an SMS alert using the Designated Mobile Number when a credit/debit or minimum of the limit amount above is deposited/debited or reached in the Designated Account)

BOAWeb (INTERNET BANKING) YES ☐ NO ☐

Name (All Users authorised to use B-Web)	Account Number	Mode of Operation Single or Joint	Access Option (V) View (C) Create (S) Sign (A) All	Maximum Transaction Amount	Email Address

E-STATEMENT: YES ☐ NO ☐

All Signatories to joint accounts must approve the nominated person(s) and email address(s) by signing the Terms & Conditions. The following person(s) is/are authorised to receive the Statement of Account:

Name of Nominated Individual	Mobile Number	Email Address	Signature

DECLARATION

I/We, the Signatory(ies) hereby confirm:

1. I/We hereby confirm that the information set out above in this account opening form is complete and accurate to the best of my/our knowledge and belief;
2. I/We have been advised that I/We have the freedom not to enter into a contractual relationship with Bank of Africa Kenya Limited if I/We am/are not sure of the suitability of the products and or services or if the terms and conditions for the products or services appear onerous to me/us;
3. I/We have had sufficient time to consider the terms and conditions on the Bank's products and services and I/We have decided that the same are suitable to my/our needs and that I/We am/are able to comply with the terms and conditions for the same;
4. I/We confirm that the Bank has explained to me/us that the terms and conditions of the product may be subject to change from time to time;
5. I/We have read, been explained to and understood the Terms and Conditions for the operation of the Customer's account(s), copy(ies) of which have been availed to me/us;
6. I/We have understood that the Terms and Conditions for operation of the Customer's account(s) are also available on the Bank's website www.boakenya.com and I/we confirm my/our acceptance and agreement to be bound by them;
7. I/We confirm my/our acceptance and agreement to be bound by any variations to the Terms and Conditions that may be made by the Bank from time to time and updated on the Bank's website www.boakenya.com.
8. I/We confirm that I/We have read and understood my/our rights as a Data Subject (s) with respect to processing of my/our Personal Data and my/our Sensitive Personal Data. I/We also understand that the Data Privacy Policy is available on the Bank's website www.boakenya.com for viewing, downloading and printing.
9. I/We confirm that I/We have the consent of each of the individuals to provide you with their personal information and for you to collect and process that information in accordance with the purposes stated in the Bank's Terms and Conditions and in compliance with the Kenyan Data Protection Laws and Regulations.

I/We therefore freely and without compulsion append my/our signature hereto in acceptance of the terms and conditions of the Bank's products and/or services to be utilized by the Customer (as may from time to time be amended by the Bank).

Signatory Name: _____ Signature: _____ I.D. No: _____

FOR BANK USE ONLY

NOTES

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Front Office

I have duly verified the signatures of the authorized Signatory(ies) and confirm that they are genuine. I further confirm that the provided documents are genuine/ authentic/ original/ valid and belonging to the said signatory(ies).

Name: _____

Signature: _____ Date: _____

Back Office

I confirm having received and reviewed the duly verified and completed documentation belonging to the said individual(s). I confirm that the reviewed documents are satisfactory as per BOAK account opening and KYC requirements.

Name: _____

Signature: _____ Date: _____

Customer Risk Rating: ☐ Low ☐ Medium ☐ High ☐ High Risk PEP **KYC Renewal Date:** _____