



**AUTOMATED BANKING SERVICES - SELECT ALL OR TICK AS APPROPRIATE**

i) ATM  Yes  No  
 Language Preferred  English  Arabic  
 ii) Internet Banking  Yes  No  
 iii) Phone Banking  Yes  No

1.   
 2.   
 Name to be printed on card of not more than 20 characters including space

**BILL PAYMENTS** : Preferred Bill Settlement Mode  Internet Banking  ATM  Phone Banking

Your telephone number \_\_\_\_\_  
 Phone 1 Phone 2 Phone 3  
 Indicate Emirate code & telephone number (e.g. 04-3520455)

iv) Your DEWA / SEWA / ADWEA consumer number \_\_\_\_\_  
 (Please submit a full copy of a recent telephone and water / electricity bill to enable us to verify the above details)  
 v) Account to Account automatic transfer  Yes  No if yes, please fill up an additional Conditional Standing Order form

**INTERNET BANKING SIGN UP:**

**A. ADDITIONAL DETAILS**

Mother's Maiden Name \_\_\_\_\_  
 Do you wish to subscribe for e-statement?  Yes  No If yes, please specify the frequency  Monthly  Half Yearly  Yearly  
 E-mail ID

**B. ACCOUNT INFORMATION**

Maintain the following account(s) with Standard Chartered Bank, UAE (Please provide complete account numbers)

Transaction Accounts <input type="text"/>	Fixed / Call Deposit Accounts <input type="text"/>
Auto / Personal Loan Accounts <input type="text"/>	Investment Accounts <input type="text"/>
Credit Cards <input type="text"/>	<input type="text"/>

**C. BENEFICIARY ACCOUNTS**

Will you use Electronic /Automated Banking Services to transfer funds from your account(s) to 3rd Party Account(s)?  
 Yes  No If YES, please provide the following details or else please strike out the "Beneficiary Account" section.  
 (A) If 3rd party is Standard Chartered Bank, U.A.E. customer:

Account No. <input type="text"/>	Account Name _____
<input type="text"/>	_____
<input type="text"/>	_____

(B) If 3rd party is not a Standard Chartered Bank, U.A.E. customer:

Beneficiary's Name _____	Remitting Currency _____	Beneficiary's Account Number _____
_____	_____	_____
_____	_____	_____

Beneficiary's Account with Bank \_\_\_\_\_  
 Beneficiary's Bank Address/Country \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SIGNING AUTHORITY**

Any one of us  All of us  Others \_\_\_\_\_  
(no ATM/Phone & Internet Banking for jointly operated accounts) (Please Specify)

\_\_\_\_\_  
 Signature of First applicant      Signature of Joint applicant(s)      \_\_\_\_\_  
(for Bank use)

**For Office use:** RM Code \_\_\_\_\_ Seg Code: \_\_\_\_\_ R. Rating \_\_\_\_\_  
 Amount: \_\_\_\_\_ Ledger Fee: \_\_\_\_\_ Reason Code: \_\_\_\_\_

## Declaration for Electronic Banking Services

By signing below, I hereby apply for Standard Chartered Bank, UAE (Bank) Internet and Electronic Banking Service (Collectively "Electronic Banking Services") as may be made available to me by the Bank from time to time.

Further I acknowledge that my use of the Electronic Banking Services shall be governed by the Bank's prevailing Electronic banking Terms and Conditions, available on the Bank's web-site at [www.standardchartered.com/ae](http://www.standardchartered.com/ae), and I declare that I have read and fully understood the said terms and conditions and accept the same.

I hereby instruct and authorise the Bank to mail/send by courier my Electronic Banking ID and Electronic Banking Password (collectively "Security codes") relating to my access to the Electronic Banking Services to my address, as per the Bank's records, and, I agree that the risk of non-receipt and/or disclosure of the Security Codes to an unauthorised third party shall be fully borne by me.

Subject to the Bank's prevailing terms governing the use of the Services, I hereby authorise and instruct the Bank to act on any instructions received through the use of my Security Codes, including, but not limited to the transfer of funds (subject to limits as may be imposed by the Bank from time to time) from my account(s) with the Bank (which I am entitled to operate on a single signatory basis) to the third party accounts named under the heading "Beneficiary Accounts", above, and, to any account which I may designate from time to time, for this purpose under the Bank's prevailing procedures.

I warrant that all the information provided by me, in this application form is true, accurate and complete in all respects.

Date \_\_\_\_\_

Signature \_\_\_\_\_

## Insurance for Fusion

Beneficiary's Name Mr./Ms \_\_\_\_\_  
(as in passport)

Beneficiary's Address \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

I/We hereby declare that the above details are true to the best of my/our knowledge. I/We also declare to the best of my/our knowledge and belief that I/We am/are in sound health and free from physical defect or infirmity

AND

I/We understand and accept that Standard Chartered Bank reserves the right to withdraw or modify the insurance scheme at any time by means of a notice posted to my/our address recorded with the Bank, or means of a public announcement in any one newspaper, and I/We shall be bound by the terms of such a notice or announcement whether I/We see it or not and without any further notice.

I/We also understand and accept that the arrangement by Standard Chartered Bank for the insurance of its Fusion account holders is gratuitous and shall not be treated as creating any legally enforceable obligations against the Bank. Further, the Bank shall in no event be under any liability of any kind whatsoever arising by reason of anything done or not done by the Bank or any of its servants or agents under or in pursuance of the cover offered, and the Bank does not accept any responsibility or give any warranty whatsoever as to the validity of the policy or in connection with the rights or any person thereunder.

## Mandate and Declaration

- ١- أنا/ نحن أتقدم / نتقدم بموجبه للحصول على الخدمات المصرفية المبنية تفصيلها في هذه الاستمارة وأؤكد / نؤكد أن البيانات المبينة في هذه الاستمارة صحيحة، كاملة، وديققة من جميع النواحي وأني/ أننا لم نعتمد / نتعمد إخفاء أي معلومة أو حقيقة. أنا/ نحن أقر/ نقر باستلامي / باستلامنا أحكام وشروط الحساب ولائحة الأسعار والخدمات وأؤكد / نؤكد التالي :
- (أ) أنا/ نحن قد قرأت / قرأنا وأدركت / أدركنا بشكل وافى الأحكام والشروط ولائحة الأسعار والخدمات وأعلم / نعلم أنها تنطبق على أي من الخدمات/ التسهيلات التي يقدمها البنك لي/ لنا.
- (ب) أنا/ نحن أقبل / نقبل أن أكون / نكون ملتزمًا / ملتزمين بالأحكام والشروط ولائحة الخدمات والأسعار.
- (ج) إن الأحكام والشروط ولائحة الخدمات والأسعار يمكن أن يتم تعديلها من وقت إلى آخر من قبل البنك وكما تمت الإشارة إليه.
- ٢- أنا / نحن أؤكد / نؤكد أنه لم يتخذ ضدي/ ضدنا أي إجراءات لإعلان الإفلاس .
- ٣- أنا / نحن أفوض / نفوض البنك بموجبه والأطراف الثالثة، بما فيها المصارف التي أتعامل / نتعامل معها، أن تتبادل المعلومات مع بعضها بغرض إنجاز إجراءات استمارتي/ استمارتنا وإدارة أي من حسابي/ حساباتنا لدى البنك.
- ٤- أنا/ نحن أدرك / ندرك أن الخدمات المصرفية التي تقدمت/ تقدمنا للحصول عليها من خلال هذه الاستمارة سيتم تقديمها لي/ لنا طبقاً للإرادة المطلقة للبنك.
- ٥- وتبعاً لهذا، أرجو / نرجو فتح و/ أو الاستمرار بفتح الحساب الجاري/ التوفير/ فيوجن/ أكتف/ وديعة تحت الطلب / وديعة ثابتة أو أي حساب (حسابات) في اسمي/ أسمائنا بعملة درهم الإمارات العربية المتحدة (أو بعملة أخرى يوافق عليها البنك من وقت إلى آخر).

- I/We hereby apply for the banking services detailed in this application form and confirm that the details provided in this form are true, complete and accurate in all respects and that I/We have not wilfully withheld any material fact. I/We acknowledge receipt of the Account Terms and Conditions and the Service and Price Guide and confirm that  
(a) I/We have read and fully understood the Terms & Conditions and Service & Price Guide and their application to any service/facilities granted to me/us by the Bank.  
(b) I/We agree to be bound by the said Terms & Conditions as well as the Service & Price Guide, and  
(c) the Terms and Conditions and Service & Price Guide may be amended from time to time by the Bank as stated therein;
- I/We hereby warrant that no bankruptcy proceedings have been commenced against me/us;
- I/We hereby authorize the Bank and third parties, including my bankers, to exchange information for the purpose of processing my/our application and for the conduct of any of my/our Account(s) with the Bank;
- I/We acknowledge that the Banking services requested by me/us in this application will be made available to me/us at the absolute discretion of the Bank;
- Accordingly, please open and/or continue a Current/Savings/Fusion/ACTIV/Call/Fixed Deposit or any other Account(s) in my/our name(s) denominated in UAE Dirhams (or such other currency as the Bank may approve from time to time).

Signing Authority \_\_\_\_\_

### Signing authority

Any one of us  All of us (no ATM/Phone Banking for jointly operated accounts)

Others (Please specify) \_\_\_\_\_

Signature of Primary Applicant

X

Signature of Joint Applicant 1

X

Signature of Joint Applicant 2

X

Signature(s) witnessed/verified (for Bank use)

X

## Existing Bank Accounts with other Banks

Name of Bank

Account Number

Country of Account

1) \_\_\_\_\_

2) \_\_\_\_\_

Do you have a 'Priority' service with any of the above banks?  Yes  No If yes, circle the bank number above.

## Bank use only

New  Update  ATM application

Short Name \_\_\_\_\_ Branch \_\_\_\_\_

Master Account Number

Priority Card to be issued on Account Number(s)

### Customer Address

P.O. Box \_\_\_\_\_ Emirate \_\_\_\_\_

Card Serial Nos. 1.  2.

Non-Resident Account  Yes  No

Ledger fee flag  Yes  No

### Branch

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Original passports or ID sighted | <input type="checkbox"/> Passport/ID copies retained | <input type="checkbox"/> Application details completed    |
| <input type="checkbox"/> Cheque book ordered              | <input type="checkbox"/> Associate Master            | <input type="checkbox"/> Mail Sort Code                   |
| <input type="checkbox"/> RM Code (if any)                 | <input type="checkbox"/> Segment Code                | <input type="checkbox"/> Terms & Conditions & Price Guide |

### Operations

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Master opened     | <input type="checkbox"/> Subsidiary opened | <input type="checkbox"/> Signtrieve updated   |
| <input type="checkbox"/> TIN Mailer issued | <input type="checkbox"/> ATM issued        | <input type="checkbox"/> Bill payment inputed |

Terms & Conditions / Service & Price Guide delivered

CRM \_\_\_\_\_ Approval Unit Head/HOPB \_\_\_\_\_



Account Number \_\_\_\_\_  
(For Bank use only)

# Account Opening Form