



# MALDIVES ISLAMIC BANK

## ACCOUNT OPENING FORM BUSINESS / INSTITUTIONS

Have you submitted the Information Form for Business/Institutions

Yes  No (Please submit the Information Form)

### FOR BANK USE ONLY

CIF NO

A/C No.

A/C No.

### SECTION A BUSINESS INFORMATION

Name of Business / Institution

Registration No.

(Business/Company/Institution/sole proprietorship)

Name of Sole Proprietor

(where applicable)

ID Card No.

(for sole proprietor)

Registration No.

(for sole proprietor)

### SECTION B ACCOUNT INFORMATION

	Account [ 1 ]	Account [ 2 ]
Account type	<input type="checkbox"/> Current <input type="checkbox"/> GIA (Please complete section C) <input type="checkbox"/> Other _____	<input type="checkbox"/> Current <input type="checkbox"/> GIA (Please complete section C) <input type="checkbox"/> Other _____
Currency	<input type="checkbox"/> MVR <input type="checkbox"/> USD	<input type="checkbox"/> MVR <input type="checkbox"/> USD
Purpose of opening the Account	<input type="checkbox"/> Sales & Business operations <input type="checkbox"/> Trade Remittance <input type="checkbox"/> Other, please specify _____	<input type="checkbox"/> Sales & Business operations <input type="checkbox"/> Trade Remittance <input type="checkbox"/> Other, please specify _____

### SECTION C GENERAL INVESTMENT ACCOUNT (GIA)

Deposit amount	<input type="text"/>
Deduct from A/C	<input type="text"/>
Duration	<input type="checkbox"/> 3 months <input type="checkbox"/> 6 months <input type="checkbox"/> 9 months <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 years <input type="checkbox"/> 4 years <input type="checkbox"/> 5 years
Do you want to automatically renew upon maturity	<input type="checkbox"/> Yes <input type="checkbox"/> No
Profit of GIA upon maturity	<input type="checkbox"/> Add to GIA (Deposit Account) <input type="checkbox"/> Transfer to Primary account

## SECTION D INSTRUCTION TO OPERATE ACCOUNT

I/We instruct and agree that this account is to be operated as follows

Singly       Jointly       Other \_\_\_\_\_

List the person(s) authorised to operate the account

Name	NID / PP / Work Visa Number	Designation	Signature

## DECLARATION

This declaration is made to Maldives Islamic Bank Plc

I/we hereby agree:

### General Investment Account

- That the deposit is payable only at maturity along with the profit (if any).
- That Withdrawal may not be made in a fixed term General Investment Account prior to the maturity date. If the Bank approves the withdrawal request by a client for an urgent reason, no profit shall be paid on premature encashment of the deposit.

### General Terms

- The information provided in this application is true and accurate.
- To having read, understood, and expressly assent to be bound by the Bank's Terms and Conditions as amended from time to time.
- To be bound by the Bank's Schedule of Charges and Fees as amended from time to time.
- A copy of the current tariff, Terms and Conditions is available at [www.mib.com.mv](http://www.mib.com.mv)

(Declaration: To be signed according to the Quorum of the Business/ company)

Name	NID / PP / Work Visa Number	Designation	Signature

<p>Company Seal _____</p>	<p>Date _____</p>
---------------------------	-------------------



Account Name \_\_\_\_\_ Date account opened \_\_\_\_\_

Forms and supporting documents	Staff ID	Signature	Date
Received by			
Checked by			
Authorized by			