

PERSONAL BANKING

Account Opening Application Form

Please fill ALL the sections of this form

Have you also submitted the Information Form for Personal Banking Customers?

- Yes
- No (please fill the above mentioned form and submit to the Bank along with this form)

For Bank use only

Customer No:

Account No:

CRM No:

Currency:

Please fill form in CAPITAL LETTERS

SECTION A - YOUR DETAILS

Mr Ms Dr Others, please specify

Full Name (as in ID Card/as in PP for Foreigners)

ID Card No. (For Maldivians)

Passport No. (For Foreigners)

Passphrase

(For new customers and customers who have forgotten and wish to renew their passphrase. Write your own 4-8 character word. Passphrase will be used for identification and security reasons)

ID Card Expiry

Passport Expiry (For Foreigners)

Contact No:

SECTION B - ACCOUNT DETAILS

	Account No. [1]	Account No. [2] <small>Please also fill this column if you wish to open a 2nd account</small>
Purpose of opening account	<input type="checkbox"/> Salary <input type="checkbox"/> Inward Remittance <input type="checkbox"/> Savings <input type="checkbox"/> Credit of Interest <input type="checkbox"/> Education <input type="checkbox"/> Others, please specify	<input type="checkbox"/> Salary <input type="checkbox"/> Inward Remittance <input type="checkbox"/> Savings <input type="checkbox"/> Credit of Interest <input type="checkbox"/> Education <input type="checkbox"/> Others, please specify
Select account type	<input type="checkbox"/> Saving <input type="checkbox"/> Fixed Deposit <input type="checkbox"/> Current <input type="checkbox"/> Expatriate	<input type="checkbox"/> Saving <input type="checkbox"/> Fixed Deposit <input type="checkbox"/> Current <input type="checkbox"/> Expatriate
Select currency	<input type="checkbox"/> MVR <input type="checkbox"/> USD <input type="checkbox"/> EUR (only for current account)	<input type="checkbox"/> MVR <input type="checkbox"/> USD <input type="checkbox"/> EUR (only for current account)
Specify deposit amount <small>(Initial deposit required as per schedule of charges)</small>	<input type="text"/>	<input type="text"/>
Select how deposit is paid	<input type="checkbox"/> Cash <input type="checkbox"/> Deduct from my bank account specified below: <input type="text"/>	<input type="checkbox"/> Cash <input type="checkbox"/> Deduct from my bank account specified below: <input type="text"/>

SIGNATURE:

Estimated volume of transactions	Deposits <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000	Deposits <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000
	Withdrawals <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000	Withdrawals <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000
Do you wish to make this account a Joint Account? Please also fill supplementary form for each additional Joint Account holder.	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, (please specify no. of joint applicants including the primary joint applicant)	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, please specify no. of joint applicants including the primary joint applicant)
Specify duration (For Fixed Deposit Accounts only)	<input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> Other, please refer one of our customer service staff and specify duration	<input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> Other, please refer one of our customer service staff and specify duration
Do you want to automatically renew the fixed deposit unless otherwise instructed to the Bank in writing? (For Fixed Deposit Accounts only)	<input type="checkbox"/> No <input type="checkbox"/> Yes (Published rates will be applicable at the time of renewal)	<input type="checkbox"/> No <input type="checkbox"/> Yes (Published rates will be applicable at the time of renewal)
Do you want to link/add this new account(s) to your Existing Debit Card? (Not applicable for Fixed Deposit Accounts)	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, (please specify no. of joint applicants including the primary joint applicant) <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, (please specify no. of joint applicants including the primary joint applicant) <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card
Do you want to make this new account your primary bank account for your current Debit Card? (Not applicable for Fixed Deposit Accounts) If you do not have a Debit Card and wish to register, please fill section C. For Joint Accounts please fill a separate Debit Card application Funds will be deducted from your primary bank account each time Debit Card is used from a POS machine.	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, (please specify no. of joint applicants including the primary joint applicant) <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, (please specify no. of joint applicants including the primary joint applicant) <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card

SECTION C - CARDS & ONLINE BANKING

For Joint Accounts please fill the relevant application form for the service.

<p>Debit Card New Application</p>	<p>Type of Card: <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card</p> <p><input type="text"/></p> <p>Your name as you want it to appear on the Card (Maximum 19 characters including spaces)</p> <hr/> <p>Select the Account you wish to be made the primary account for your Debit Card. Funds will be deducted from your primary bank account each time Debit Card is used from a POS machine</p> <p>Type of Card: <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card</p> <p>Account to be made primary (Please select one account)</p> <p><input type="checkbox"/> Account No [1] <input type="checkbox"/> Account No [2]</p> <p><input type="checkbox"/> Account No [1] <input type="checkbox"/> Account No [2]</p>
<p>Your accounts to be linked to Debit Card</p>	<p>Select the account(s) to add to the new service(s) you have applied.</p> <p><input type="checkbox"/> Account No [1] (refer section B) <input type="checkbox"/> Account No [2] (refer section B)</p>
<p>BML Internet Banking New Application (Existing Internet banking users do not have to fill this section, as your new account(s) will be automatically added)</p>	<p>Please provide your preferred e-mail address and personal/official mobile number as your login credentials and passwords will be sent to your mobile and e-mail address.</p> <p>Mobile <input type="text"/> Email <input type="text"/></p> <p>Once your application is processed, we will send a temporary User ID to your mobile via SMS and your temporary Password will be sent to your E-mail address. Please change it as soon as possible.</p> <p>Preferred Mode of OTP Delivery <input type="checkbox"/> SMS <input type="checkbox"/> Email <input type="checkbox"/> Security Token</p> <p>An OTP is a time-sensitive, one-time password used as a second layer of security on BML Internet Banking. You will require a one-time password for each third-party transaction. You can get the one-time password for FREE via E-mail and SMS or you may use our Internet Banking Security Token to generate the one-time password. A one-time fee of MVR 200 will be charged for the Security Token. however, for any replacement of the Security Token, you will be charged as per the Bank's Schedule of Charges.</p>

SECTION D - DEBIT CARD, DEBIT CARD PIN & BML INTERNET BANKING SECURITY TOKEN & FEES

<p>Preferred branch to collect the security token, debit card & debit card PIN</p>	<p>Collect from.....Branch</p> <p>BML Internet Banking access codes will be delivered via SMS and E-mail. All Debit Cards and BML Internet Banking applications will be processed within 5 working days.</p>
<p>Select the account to be charged for fees related to Debit Card /BML Internet Banking</p>	<p><input type="checkbox"/> Existing account number</p> <p><input type="text"/></p> <p><input type="checkbox"/> New account to be opened, please refer section B and select the account. <input type="checkbox"/> Account No [1] <input type="checkbox"/> Account No [2]</p> <p>Customers without an existing account and opening a new account, the fees will be charged from the account to be opened. If account is not specified or funds not available, fees will be deducted from any of your accounts at the Bank's discretion.</p>

SIGNATURE:

DECLARATION

This declaration is made to Bank of Maldives Plc.
I/we hereby agree:

Debit Card Terms

- That I/we are the sole account holder(s) or have required mandate to operate all the accounts linked to Bank of Maldives Debit Card;
- That the usage of the Bank of Maldives Debit Card will be construed by the Bank as acceptance of terms and conditions of the Cardholder Agreement by the Cardholder;

BML Internet Banking Terms

- That I/we are the sole account holder(s) or have required mandate to operate all the accounts listed in this form and supplementary forms which are linked to BML Internet Banking;
- That if I/we apply for any Bank of Maldives Debit Card, Credit Card, or any other product or service electronically through my/our BML Internet Banking access, the Bank will consider such application as originating from me/us and as legally valid; and if such application is approved by the Bank and the requested Card, product or service is offered to and accepted by me/us, the Terms and Conditions governing the use of each respective Card, product or service will be valid and binding upon me/us;
- That functions of BML Internet Banking are conducted by a person acting alone, no provision exists for joint operation other than the Authorizer and Initiator functions referred to in the Internet Banking Terms and Conditions;
- I/We acknowledge that, Bank of Maldives PLC will not be liable for any losses incurred due to misuse of communications sent to your registered Mobile Number and/or Email Address provided to the Bank or due to change of any said details without prior written notice to the Bank.

BML Mobile Banking Terms

- That I/we are the sole account holder(s) or have the required mandate to operate all the account(s);
- That I/we are the registered owner or am/are authorized to use the mobile phone number I/we have specified for access to this service.

Fixed Deposit Terms

- That the deposit is repayable only at maturity along with the benefit.
- That if at my/our request the Bank agrees to make payment before maturity, I/we agree that such repayment would be on forfeiture of entire accrued benefit unless the Bank at its discretion, decides to pay benefit at a rate equal to the period the deposit remained in force or at the rate agreed by me/us as per the decision of the Bank.

General Terms

- 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 and Terms and Conditions are available at www.bankofmaldives.com.mv

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Signature

D	D	M	M	Y	Y	Y	Y
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Date

SIGNATURE INSTRUCTIONS

Use Signature provided with this Application Form and update existing account signatures, if any

Use Signature provided for Account Number

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