

# Corporate Account Application Form







**D Operation of Account**

What is the purpose of this account(s)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If an overseas client, why have you chosen Bermuda to establish an account(s)? \_\_\_\_\_  
\_\_\_\_\_

Is this account(s) being held for the benefit of another party other than those named on the account(s)?  Yes  No

If so, please state their name: \_\_\_\_\_  
First Name Last Name Middle Initial(s)

**I/We would like information on any of the products and services listed below, please tick applicable boxes.**

- Trusts  Private Banking  Mortgages and Loans  Investments  Commercial Banking  Insurance Products  Credit Cards

**E Agreement**

Pursuant to a resolution of the Board of Directors, we apply to open an account or amend signatories on accounts with Clarien Bank Limited.

\_\_\_\_\_  
Officer/Director Title Signature Date (DD/MM/YYYY)

I/We agree to CLarien Bank Limited's ("Bank") terms and conditions for its products and services which are located at www.clarienbank.com

The Customer(s) apply(ies) to open an account with the Bank which shall be governed by the Bank's terms and conditions located on its website, as amended from time to time, and any other agreement between the Bank and its Customer(s).

In the case that multiple signatories are required, the Bank is authorised to act upon instructions from any/all of us or as follows: \_\_\_\_\_  
(please write any or all above)

until we give notice to the contrary in writing. Number of signatures required: \_\_\_\_\_

Signatory #1: \_\_\_\_\_ Print Name Signature #1: \_\_\_\_\_ Date: \_\_\_\_\_ (DD/MM/YYYY)  
Signatory #2: \_\_\_\_\_ Print Name Signature #2: \_\_\_\_\_ Date: \_\_\_\_\_ (DD/MM/YYYY)  
Signatory #3: \_\_\_\_\_ Print Name Signature #3: \_\_\_\_\_ Date: \_\_\_\_\_ (DD/MM/YYYY)  
Signatory #4: \_\_\_\_\_ Print Name Signature #4: \_\_\_\_\_ Date: \_\_\_\_\_ (DD/MM/YYYY)  
Signatory #5: \_\_\_\_\_ Print Name Signature #5: \_\_\_\_\_ Date: \_\_\_\_\_ (DD/MM/YYYY)  
Signatory #6: \_\_\_\_\_ Print Name Signature #6: \_\_\_\_\_ Date: \_\_\_\_\_ (DD/MM/YYYY)

**F For Bank Use Only**

Account #: \_\_\_\_\_ Type: \_\_\_\_\_ Currency: \_\_\_\_\_ CIF#: \_\_\_\_\_  
Corporate  
Account #: \_\_\_\_\_ Type: \_\_\_\_\_ Currency: \_\_\_\_\_ CIF#: \_\_\_\_\_  
Corporate  
Account #: \_\_\_\_\_ Type: \_\_\_\_\_ Currency: \_\_\_\_\_ CIF#: \_\_\_\_\_  
Signatory  
Account #: \_\_\_\_\_ Type: \_\_\_\_\_ Currency: \_\_\_\_\_ CIF#: \_\_\_\_\_  
Signatory  
Account #: \_\_\_\_\_ Type: \_\_\_\_\_ Currency: \_\_\_\_\_ CIF#: \_\_\_\_\_  
Signatory  
Account #: \_\_\_\_\_ Type: \_\_\_\_\_ Currency: \_\_\_\_\_ CIF#: \_\_\_\_\_  
Signatory

FSR/RM/ADMIN: \_\_\_\_\_ Signature: \_\_\_\_\_ Date (DD/MM/YYYY): \_\_\_\_\_ Approved By SRE: \_\_\_\_\_ Signature: \_\_\_\_\_ Date (DD/MM/YYYY): \_\_\_\_\_

**G Clarien Business Resolution**

I, \_\_\_\_\_, Secretary of \_\_\_\_\_ (the "Company") a company duly organised and existing under the laws of \_\_\_\_\_ and having its registered address at \_\_\_\_\_ hereby certify that the following is a true copy of a resolution duly adopted by the Board of Directors of the Company at a meeting thereof convened and held in accordance with the Memorandum of Association and the Bye-laws of the Company and held on \_\_\_\_\_ and that such a resolution is now in full force and effect and is in accordance with the Memorandum of Association and the Bye-laws of the Company.

FURTHER RESOLVED that the person(s) listed below, singly or jointly (delete as applicable) are hereby authorised on behalf of the Company to utilise Clarien Banking:

Print Name	Signature

FURTHER RESOLVED that as security for obligations of the Company in connection with the eBanking cards, the Company pledge to the Bank such of its deposits with the Bank and/or such of its other investments on such terms and conditions as may be agreed (as evidenced under separate cover) from time to time by the persons authorised to sign documents on behalf of the Company in connection therewith.

The Bank will be advised immediately via fax or letter should there be any changes to the eBanking details. Witness my hand and seal of the Company, this \_\_\_\_\_ day of \_\_\_\_\_.

Secretary \_\_\_\_\_