

# Term Deposit - Company and Organisation Account Opening

To be used for companies, societies and other associations

CIF Number	New Account Number	Product No.	Branch Name.	Branch No.	Manager No.

Retail Term Deposit     
  Wholesale Term Deposit     
 Existing Customer    No     Yes

**Note:** A Notice of Authority must be completed - If an Authority is not held and/or if there is a change to the method of operation Complete *Organisation Details* for a new customer or if an existing organisation's details needs to be updated  
 Grey boxes are for Bank use only

## Organisation Details

Account Name	Email Address		
Mailing Name	Account Type	Customer Type	Citizenship
Mailing Address	Market Segment	SIC Code	User Field 15 (Vanuatu Only)
	Office Location/Registered Address		
Date Registered/ Incorporated	Phone Number	Fax Number	Exempted from withholding tax? Tick "Yes" if Exemption Certificate is held.
			<input type="checkbox"/> Yes <input type="checkbox"/> No

## Deposit Details

Lodgement Date	Deposit Term	Amount Invested	Foreign Currency Code (If applicable)
/ /	Months / Days	\$	
Maturity Date	Interest Rate	Source of Funds	
/ /	% p a		

Interest Disbursement Frequency :     at Maturity     quarterly     6 monthly     yearly

Interest Payment Instructions :

Pay by Bank Cheque     
  Transfer to account number (Transaction Account)

Order number (Bank Use Only)

## Principal Maturity Instructions

<input type="checkbox"/> Automatic Renewal (Principal & Interest)	<input type="checkbox"/> Automatic Renewal (Principal only)	<input type="checkbox"/> Single Maturity (Payout on Maturity)
<input type="checkbox"/> Pay by Bank Cheque	<input type="checkbox"/> Transfer to account number (Transaction Account)	
<input type="checkbox"/> Mail Bank Cheque	Order number (Bank Use Only)	
<input type="checkbox"/> Hold Bank Cheque for Collection		

## Security Details

Provide details if this deposit is used as security:

Account Name	Account Number

**NOTE:**

A term deposit is a fixed contract and you should carefully consider whether you will need funds prior to maturity. In the event your deposit is broken before maturity, you will be required to pay Break Fee and your interest will be adjusted. The bank may also levy an Early Termination Penalty related to residual term and the prevailing refinance rate.

If applicable, any changes to renewal instructions should be advised prior to maturity/within 5 days of maturity. In absence of disposal instructions, deposit will be automatically renewed, with interest added, for a similar term at the rate applicable at that time.

Any profit /loss incurred as a result of a fluctuation in exchange rate of the currency deposited will be for your care and account.

**Acknowledgements**

I/We agree:

- \* to be bound by the terms and conditions which apply from time to time to this account opened by me/us with the Bank;
- \* the Bank may charge to this or any other account(s) I/we may conduct with the Bank or recover from me/us any bank fees, government charges, taxes or duties imposed on transactions on/or which relate to my/our account(s);
- \* the Bank's acceptance of this application, thereby creating the contract of deposit, may only be made by entry of the Depositor(s)' names in the Bank's books; and
- \* documents presented for identification purposes may be verified by the Bank with an appropriate authority.

I/We request the Bank to contact me/us at or around the maturity of this Term Deposit in order to receive re-investment instructions, payment instructions or to discuss any other related matter, however, I/we acknowledge that the Bank is under no obligation to do so, unless required by any regulatory policy or legislation.

I/We acknowledge that I/we have read and understood the Privacy Statement in the Customer Banking Agreement.

I/We acknowledge that I/we have received a copy of the relevant terms and conditions that apply to this account.

*Note: It is an offence under the Anti-Money Laundering laws to make a false or misleading statement*

I/We authorise Bank South Pacific to take a photograph of me/us for the purpose of preventing any third party act of fraud attempted on my/our account.

Signed for and on behalf of: (name of organisation)

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Signatory's Name	Official Designation(eg Director/Secretary)	Signature

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**If more than one person has been authorised to sign on this account, refer to Notice of Authority for manner of Operation**

**Bank Use Only**

	Salary Number	Name	Signature	Date
Verified and Opened By				
Authorised By				
Checked By(Operations)				