| To Branch   | Head                                    |                                 |                                      |                                 |                                |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
|---|---|---------------------------------|--------------------------------------|---------------------------------|--------------------------------|---------------|-----------------|------------------------------------|-------------|------------------|-----------------|---------------|------------------|-------------------|----------------|---------------|---------------|-------|
| 10 Dialicii   | Ticau                                   |                                 |                                      | D.,,                            | 1.                             |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
|   |   |                                 |                                      | BI                              | anch,                          |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
| I   |   |                                 |                                      |                                 |                                |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
| wish to op  |   | <i>irst Nan</i><br>ting an      |                                      | ail Aco                         | count                          | Sta           | tem             | ent.                               |             |                  | 51              | urna          | me               |                   |                |               |               |       |
| The particu   | ilars are                               | e as un                         | der:                                 |                                 |                                |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
| 1. Acc  | count N                                 | umbei                           | :                                    |                                 |                                |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
|   |   |                                 |                                      |                                 |                                |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |
| Declaration:<br>I/We declare ti<br>all respects an<br>Statement of A<br>statements due<br>the right to alte | d I/We, an<br>accounts vi<br>to incorre | d other<br>ia e-mai<br>ect emai | joint acc<br>l is for n<br>l address | ount hol<br>y/our co<br>furnish | lders ha<br>onvenie<br>ed by r | ive n<br>nce. | ot wit<br>The E | hheld<br>Bank s                    | any<br>hall | inforr<br>not be | nation<br>respo | . I/V<br>nsib | Ve un<br>le if I | derstai<br>/We do | nd th<br>0 not | at se<br>rece | ndir<br>ive 1 | g the |
| (Applicant's Signature)   |   |                                 |                                      |                                 |                                |               |                 | (Other Account Holder/s Signature) |             |                  |                 |               |                  |                   |                |               |               | ]     |
| Date:   |   |                                 |                                      |                                 |                                |               |                 |                                    |             |                  |                 |               |                  |                   |                |               |               |       |