

**NON-INDIVIDUAL
ACCOUNT OPENING FORM**

Branch

Date

Customer No.

A/C No.

A/C Type

FOR BANK'S USE ONLY

(Please fill in details in CAPITAL Letter, mark as appropriate and mention date in DD/MM/YYYY format (Gergorian Calendar) as far as possible)

DETAILS WITH GREEN DEVELOPMENT BANK LIMITED

Do you have account with Green Development Bank Limited Yes No

If yes, Existing Customer Number Account No.

Please open an account with Green Development bank limited as follows

MAIN DETAILS

Account Type Current Call Others (Please Specify) _____

Currency NPR US Others (Please specify) _____

Account Name
(A per Registration)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> SOLE PROPRIETORSHIP A/C
एकलौटी खाता | <input type="checkbox"/> Registration Certificate
दर्ता प्रमाणपत्र | <input type="checkbox"/> Citizenship Certificate
नागरिकता प्रमाणपत्र | <input type="checkbox"/> Others <input type="text"/> |
| <input type="checkbox"/> PARTNERSHIP ACCOUNT
साझेदारी खाता | <input type="checkbox"/> Partnership Deed
साझेदारी कबुलियतनामा | <input type="checkbox"/> Registration Certificate
दर्ता प्रमाणपत्र | <input type="checkbox"/> Citizenship Cert. of partners
साझेदारीको नागरिकता प्रमाणपत्र |
| <input type="checkbox"/> COMPANY ACCOUNT
कम्पनी खाता | <input type="checkbox"/> Resolution to open & operate account
खाता खोल्न र सञ्चालन गर्ने निर्णय | <input type="checkbox"/> Others <input type="text"/> | |
| | <input type="checkbox"/> Registration Certificate
दर्ता प्रमाणपत्र | <input type="checkbox"/> Citizenship Certificate
नागरिकता प्रमाणपत्र | |
| | <input type="checkbox"/> Memorandum & Articles of Association
प्रबन्धपत्र र नियमावली | | |
| | <input type="checkbox"/> Name, Address of Directors of the Company with copy of Citizenship Certificate
नागरिकता प्रमाणपत्रको प्रतिलिपि सहित सञ्चालक समितिको सदस्यको नाम ठेगाना | | |
| | <input type="checkbox"/> Resolution of Board of Directors to open & operate Account
खाता खोल्ने र सञ्चालन गर्ने सञ्चालक समितिको निर्णय | | |
| | <input type="checkbox"/> PAN/VAT Certificate
पान/भ्याट प्रमाणपत्र | <input type="checkbox"/> Others
अन्य | |
| <input type="checkbox"/> INGO/NGO/OTHERS
एकलौटी खाता | <input type="checkbox"/> Regd. Certificate
दर्ता प्रमाणपत्र | <input type="checkbox"/> List of Office Bearers
कार्यालय बाहकको सूचि | <input type="checkbox"/> Constitution/By Laws
विधान/विनियमावली |
| | <input type="checkbox"/> Resolution Regarding to open & operate A/C
खाता खोल्ने र सञ्चालन गर्ने निर्णय | <input type="checkbox"/> Others
अन्य | |

Reg. No. Reg. Date Expiry Date

Registered with _____ PAN/VAT No.

Nature of Business _____

OTHER DETAILS

Authorised Capital _____ Paid up Capital _____

Expected source of funds passing through the account _____

Expected Annual Business Turnover _____ Group Name _____

Sister Concerns: 1. _____ 2. _____

3. _____ 4. _____

ADDRESS

Registered Address: P.O. Box _____ Street/Tole Name _____ Ward No. _____

MC/RM _____ Province No. _____ District _____ Country _____

Tel _____ Fax No. _____ Email _____
 Contact Address: P.O.Box _____ Street/Tole Name _____ Ward No. _____
 MC/VDC/RuralMunicipality _____ Province no. _____ District _____ Country _____
 Tel _____ Fax No. _____ Email _____

DETAILS OF PROPRIETOR/PARTNERS/DIRECTORS/EXECUTIVE COMMITTEE MEMBERS/MAJOR OFFICIALS

No.	Name	Designation	Residential Address (Full details)	Citizenship No. Issued/Date/Place	Contact No.
1.					Mob.No. Res Ph. E-mail
2.					Mob.No. Res Ph. E-mail
3.					Mob.No. Res Ph. E-mail
4.					Mob.No. Res Ph. E-mail
5.					Mob.No. Res Ph. E-mail

Note: Please attach separate sheet if required

LOCATION MAP OF REGISTERED ADDRESS OF FIRM/COMPANY/INSTITUTION

N
 ↑

OTHER BANK DETAILS

Do you have account with other banks ? Yes No

If yes, Name of Bank 1. _____ Account No.

2. _____ Account No.

3. _____ Account No.

Are you availing credit facility with other banks ? Yes No

If yes, Name of Bank 1. _____ 2. _____

3. _____ 4. _____

OTHER SERVICES DETAILS

Services Required Internet Banking Mobile Banking SMS Alert Utility Payment Other (Please specify)

Account Statement Frequency Monthly Quarterly Semi-Annually On Demand

Account Statement Delivery Post Special Delivery Courier Collect Email

ACCOUNT OPERATING SPECIMEN SIGNATURES AND INSTRUCTION

Account Operation Single Any Two As Per special Instruction

Special Instruction

Signature (Please sign within the box in black ink)

Name:
Designation:

Signature (Please sign Within the box in black ink)

Name:
Designation:

Signature (Please sign within the box in black ink)

Name:
Designation:

Signature (please sign within the box in black ink)

Name:
Designation:

Note: Please fill in separate signature specimen cards in case of more number of account operators. Please cross the unused boxes.

Requisition for Cheque

Please supply a book of Cheques to me/us or being my/our agent whose specimen signature appears below.

.....
(Specimen signature of a/c Holder)

.....
(Signature of Applicant)

Received Cheque book bearing no. to and counted checked and found correct.)

GENERAL RULES FOR DEPOSIT ACCOUNTS

(निक्षेप खाता सम्बन्धि सामान्य नियमहरू)

.....
(Signature)

- Cheques/cards issued by Bank are the property of account holder (s) and it is their responsibility to keep them in safe custody at all times. The account holder(s) should immediately notify the bank and give a written request if such instrument is stolen or lost. The Bank will not be liable for any loss due to payment of lost or stolen instrument if the payment is made prior to receipt of such instruction or unless the Bank has sufficient time available to act on the request.
बैंकद्वारा जारी गरिएको चेक तथा कार्डहरू खातावालाहरूका सम्पत्ति हुन् र तिनलाई सदैव सुरक्षित राख्नु उनीहरूको नै जिम्मेवारी हुनेछ। यी कागजातहरू चोरी भए वा हराएमा बैंकलाई तत्काल खबर गर्नुका साथै लिखित जानकारी समेत दिनुपर्नेछ। जारी गरिएको कुनै चेकको भुक्तानी रोक्का गर्न खातावालाले निर्देशन नदिएको अवस्थामा वा दिएको निर्देशन पालनाका लागि प्रयाप्त समय नभई भुक्तानी हुन गएमा बैंक जवाफदेही हुने छैन।
- The Bank shall take due care to ensure that credit and debit entries are correctly recorded in the accounts. In case of any error, the Bank shall be within its rights to make the correct adjusting entries without notice and recover any amount due from the account holders.
बैंकले खाताको सन्तुलन सुनिश्चित गर्न खातावालाहरूको खातामा गतिमा वा खर्च रकमलाई अभिलेख गर्ने कुरामा बैंकले पूर्ण रूपमा ध्यान दिनेछ। कारणबश कुनै गल्ती भएको खण्डमा बिना सूचना खाता समाञ्चन गरी सच्याउने र खातावालासँग लिन बाँकी रकम असुल गर्ने अधिकार बैंकलाई हुनेछ।
- Any change in the address or account operators should be immediately communicated to the Bank.
खातावालाको ठेगाना अथवा संचालनमा कुनै परिवर्तन भएमा त्यसको जानकारी तत्काल बैंकलाई दिनुपर्नेछ।
- If there is no debit transaction in the account for a period of six months or above the account shall become dormant. The account operators shall be required to be present in person or make a written request to the bank to reactivate account.
६ महिना वा सो भन्दा बढी कारोबार नभएको खातालाई निष्क्रिय खाता मानिने छ। यस्तो खातालाई सक्रिय गराउन संचालक स्वयं, बैंकमा उपस्थित हुनुपर्नेछ वा बैंकलाई लिखित अनुरोध गर्नुपर्नेछ।
- Account holders can close account by giving one business day's written account closing request along with the submission of unused cheques and cards provided by the bank in relation to the account. Account closing charges will be levied as per the bank's prevailing schedule of charges.
खाता बन्द गर्नका लागि प्रयोग नभएको चेक बुक तथा कार्डहरू सहित एक दिन अगावै निवेदन दिनुपर्नेछ। खाता बन्द गर्दा लाग्ने शुल्क बैंकले समय समयमा निर्धारण गरे बमोजिम लाग्नेछ।
- Customers are advised to count their cash withdrawn before leaving the counter. The Bank shall not be held responsible for any shortfall/shortages not brought to the notice of the bank during cash withdrawal at the bank's counter.
ग्राहक वगैमा आफुले बुझि लिएको रकम ठिक भए नभएको पुष्टि गरि मात्र काउन्टरबाट जान अनुरोध गरिन्छ। नगद भुक्तानी लिँदाको अवस्थामा बैंक काउन्टरमा सूचना गरिएको स्थितिमा बाहेक अन्य अवस्थामा कस भुक्तानी पाएको भन्ने सुनुवाई बैंकले गर्नेछैन।
- In conflicting instructions are issued by any of the signatories, the Bank may stop the operation of the account until the dispute is resolved to the satisfaction of the Bank.
खाताका हस्ताक्षरी मध्ये कुनैबाट विवादास्पद निर्देशन जारी भएमा विवाद सम्बन्धी सन्तोषजनक परिमाण नआएसम्म बैंकले खाता संचालन रोक्का गर्न सक्नेछ।
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- The Bank shall have no liability for loss or damage incurred to the account holders in the event of any failure, interruption or delay in performance of any instruction resulting from breakdown, failure of malfunction of any internet or computer system or from any circumstances resulting from nature calamities whatsoever not reasonably under the bank's control.
ईन्टरनेट वा कम्प्युटर प्रणालीमा भएका प्राविधिक गडबडीहरू वा बैंकको क्षमता बाहिरको वैश्विक प्रकोपबाट उत्पन्न परिस्थितिका कारण खातावालाहरूलाई पर्ने जाने नोक्सान वा क्षतिप्रति बैंक कुनै पनि किसिमले जिम्मेवार हुनेछैन।
- The bank shall make endeavors to preserve the secrecy of the account. Nevertheless the Bank shall disclose any information as required by any investigating or government authority provided the Bank believes it is obliged to release such information.
खाताको गोप्यता कायम राख्न बैंकले सक्ने प्रयास गर्नेछ। तथापि प्रचलित कानून बमोजिम कुनै जाँच अधिकारी वा सरकारी अधिकारीले मागेको अवस्थामा बैंकले खाता सम्बन्धि आवश्यक सूचना सम्बन्धित निकायलाई उपलब्ध गराउन सक्नेछ।
- The Bank shall not be liable for any loss resulting from dealing in the account in the event of death of authorized signatories unless and until the bank has reviewed written information of any such event along with such documents as required by the Bank.
खातावालाको मृत्यु भएको अवस्थामा प्रमाणित कागजात सहित तयसको लिखित जानकारी बैंकलाई प्राप्त हुनु अगाडि खातामा भएको कारोबारबाट हुन गएको क्षतिप्रति बैंक जिम्मेवार हुनेछैन।

DECLARATION, CONSENT & AUTHORIZATION

1. I/We here by certify that the authorities to open and operation of account with Greend Development Bank Limited have been given in terms of our board resolution/working committee minute/partnership deed dated.....
A duly attested copy/extract of which is enclosed here with.
2. I/We here by agree to pay all charges/fees applicable for rendering various services from the bank and authorize the bank to debit my /our account. Bank may revise and apply such charges from time to time without prior notice to me/us.
3. I/We have read and understood and here by agree to the general rules terms and conditions for account operation contained in this form. I/we certify that the information provided herein are correct and true, if found otherwise I/we will be fully liable incase of any concequenses arising thereafter. I/we here by agree to accept, abide and be bound to present and future rules, terms and conditions of the Bank governing account opening and operations. In the event I/we fauk ti abude bt sygc terns abd conditions, I/we shall bear the damage and/or penalties as a consequence there of.
4. I/We here by submit the copys of document for account op[ening as required by the Bank and regulatory authorities and also here by confirm that all the submitted documents are correct and genuine, If found otherwise I/we will be fully responsible for any legal consequenses arise there to.
5. I/We here by declare that no transaction would be conducted through the account in support of terrorism activities, organized crimes, human trafficking, drugs traficking, Money laundring activities and any other activities that may be harmful to the bank and are prohibitted by law.
6. Persons signing signature specimen card for this account is/are authorized signatory for operation of account.
7. I declare that I am the sole proprietor of Messers
..... and undertake to notify the bank in case there is any change in the constitution of the firm. I will be fully responsible for any act done on behalf of the firm.

(point no.7 applicable for proprietorship firm)

Seal/Stamp

.....
Authorized Signatures
Name:
Designation:

FOR BANK'S USE ONLY

1. Cheque Book Ordered/printed
2. Document copies verified with original

3. Documents Completed
2. PAA/VAT No. verified

Signature Attested By (please Sign) Signature Scanned By (Please Sign)


ग्रीन डेभलपमेन्ट बैंक लिमिटेड
GREEN DEVELOPMENT BANK LTD
 PARTNERING FOR PROSPERITY
(नेपाल राष्ट्र बैंकबाट "ख" वर्ग (५ जिल्लास्तर) को इजाजत पत्र प्राप्त वित्तीय संस्था)

कम्पनी/फर्म/अन्य संगठित संस्थाको हकमा (Corporate Customers):

१) संस्थाको नाम (Full Name of Entity):

२) संस्था दर्ता हुँदाको ठेगाना (Registered Address):

जिल्ला (District) न.पा./गा.पा. (Municipality/Rural Municipality) वडा नं. (Ward No.):

टोल/गाउँ (Tole): घर नं. (House No.): टेलिफोन नं. (Tel No.):

३) संस्था दर्ता हुँदाको ठेगाना परिवर्तन भएको भएमा (If Registered Address is changed):

जिल्ला (District) न.पा./गा.पा. (Municipality/Rural Municipality) वडा नं. (Ward No.):

टोल/गाउँ (Tole): घर नं. (House No.): टेलिफोन नं. (Tel No.):

४) संस्था रजिष्ट्रेशनको प्रमाण पत्र (Registration Certificate):

दर्ता नं. (Registration No.) दर्ता गर्ने कार्यालय (Registration Officer):

दर्ता मिति (Registration Date)

५) स्थायी लेखा नम्बर (PAN No.): इमेल ठेगाना (E-mail Address): वेबसाइट (Website):

६) कारोबारको किसिम (Nature of Business):

७) कार्य क्षेत्र (Business Area):

८) शाखा/कार्यालय संख्या र रहेको स्थान (Total Number of Branch Office & Location):

९) वार्षिक अनुमानित कारोबार रकम (Expected Annual Turnover)

१०) संचालक, कार्यकारी प्रहृख र खाता संचालकहरूको सम्बन्धमा (KYC Details of Directors/Chief Executive/A/C Operators)

क्र.सं. S.No.	पद (Designation)	नाम, थर (Full Name)	स्थायी ठेगाना (Permanent Address)	हालको ठेगाना (Current Address)	फोन नं./मोबाईल नं. (Contact No.)	कैफियत (Remarks)

११) यस कम्पनी/फर्म/संस्थाको लेखा परीक्षण नहुने व्यहोरा स्वघोषणा गर्दछौं। (लेखा परीक्षण नहुने कम्पनी/फर्म/अन्य संगठित संस्थाको हकमा मात्र)

स्थानको स्वघोषित नक्शांकन
Self Declared Location Map

म/हामी द्वारा माथि उल्लेखित विवरणहरू साँचो हो। माथि उल्लेखित नभरिएको विवरण नरहेको स्वघोषणा गर्दछु/छौं। (I/we hereby declare that above furnished information is true and that details not filled up above doesn't exist)

.....
दस्तखत (Signature)

.....
संस्थाको छाप (Seal)