



MINOR SAVINGS APPLICATION FORM

No : 28, BOC Merchant Tower, St. Michael's Road, Colombo 03.

A Company licensed by the Monetary Board of the Central Bank of Sri Lanka under the Finance Business Act, No. 42 of 2011. Company Reg. No. PQ 10

FOR OFFICE USE ONLY		PRODUCT		Punchi <input type="checkbox"/>	Punchi Star <input type="checkbox"/>	Others _____
Date	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Unique Identification No.	<input type="text"/>			
Branch Name	<input type="text"/>	MKT Code	<input type="text"/>	CIF Minor	<input type="text"/>	
Account Number	<input type="text"/>			CIF Parent/Guardian	<input type="text"/>	

01. PERSONAL INFORMATION (MINOR) (BLOCK CAPITAL)

1.1 Full Name (Birth certificate name)	<input type="text"/>					
1.2 Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>				
1.3 Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	1.4 Minor Birth Certificate Serial No.	<input type="text"/>			
1.5 Mailing Address	<input type="text"/>					
1.6 Nationality	Sri Lankan <input type="checkbox"/>	Other _____				
1.7 Age	<input type="text"/> Years	<input type="text"/> Months				

02. SCHOOL INFORMATION

2.1 School Name	<input type="text"/>				
2.2 Location/City	<input type="text"/>	2.3 Grade	<input type="text"/>		

03. PERSONAL INFORMATION (PARENT / GUARDIAN) (BLOCK CAPITAL)

3.1 Relationship to the Account holder (Minor)	<input type="text"/>					
3.2 Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Other _____		
3.3 Full Name	<input type="text"/>					
3.4 Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	3.5 Date of Birth	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>		
3.6 Marital Status	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Widow <input type="checkbox"/>	Divorced <input type="checkbox"/>		
3.7 NIC No	<input type="text"/>					
3.8 Permanent Address	<input type="text"/>					
3.9 Mailing Address	<input type="text"/>					
3.10 Nationality	Sri Lankan <input type="checkbox"/>	Other _____				
3.11 Mobile No:	<input type="text"/>	Residence/Office TP. No:	<input type="text"/>			
3.12 E-Mail	<input type="text"/>					
3.13 Occupation	<input type="text"/>					
3.14 Name of Employer	<input type="text"/>					
3.15 Address of the Employer	<input type="text"/>					
3.16 Monthly Income	<input type="text"/>					
3.17 Source of Funds	<input type="text"/>					
3.18 Purpose of the account	<input type="text"/>					
3.19 Tax File No	<input type="text"/>					
3.20 Mode of Transaction	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>	Fund transfers <input type="checkbox"/>	Other _____		
3.21 Preferred mode of Communication	by phone <input type="checkbox"/>	by email <input type="checkbox"/>	by post <input type="checkbox"/>			

04. TERMS AND CONDITIONS

- 1) Birth Certificate of minor should be produced at the time of opening the account.
- 2) Joint accounts will not be opened.
- 3) The minimum initial deposit and minimum balance required for 500/- for 'Punchi' & 'Punchi Star' accounts respectively.
- 4) The interest will not be paid for accounts which do not maintain the balance of Rs. 1,000/-.
- 5) The minor in whose name the account is opened will be the beneficiary of the deposits made to the account. Hence, no withdrawals from the account will be permitted until the minor attains the age of majority. On reaching the age of majority, the beneficiary will be required to compete and furnish to the company a new savings account opening form, National Identity Card and thereafter the account could be continued under a same account number and new passbook.
- 6) The Balance lying to the credit of an account of a minor may be transferred upon instruction of parent or a legal guardian of the minor, to an account maintained in the name of the minor in an authorized deposit taking institution, upon completion of sixty months (05 years) from the date of the first deposit or at any time thereafter.
- 7) The Balance lying to the credit of an account of a minor may be withdrawn by parent or legal guardian of the minor for a justifiable reason such as meeting the cost of treatment of the minor or for any other reason acceptable to the company.
- 8) A passbook will be issued free of charge for each account opened wherein all transaction will be recorded. This passbook should be carefully examined by the Parent/ Guardian and any error or discrepancy should be brought to the notice of the company immediately.
- 9) Any change in the customer's name or address should be immediately informed to the company in writing.
- 10) On opening a "Punchi" or "Punchi Star" Savings Account, the Account holder/Parent/Guardian will be required to adhere to the rules and regulations governing the conduct of "Punchi" or "Punchi Star" Savings Accounts, embodied in the passbook.
- 11) The company reserves to itself the right to change the rate of interest gift scheme and the above rules and regulation at any time and in any manner which the company deems necessary with or without any notice.

I hereby agree the terms & conditions of minor account and certify that the particulars given above to the best of my knowledge and details are true and correct.

Name with initial :	
NIC No:	

Signature of Parent / Guardian

Date

05. MANDATORY CHECKS(FOR OFFICE USE ONLY)

1. Name, Date of Birth and Nationality Verification: To be supported by one of the following.

National Identity Card Minor Birth Certificate Driving License Marriage Certificate (Name Change)

2. Address Verification: Residential address to be supported by one of the following accepted documents

(N.B - Mobile phone bills are not accepted)

National Identity Card Bank Statement Letter from a public authority

Tenancy agreement Utility bill (Specify) Income Tax Receipt/ Assessment Notice

Driving License Employment Contract Other (Specify)

Any Other Identification Document

(Photocopies of the above documents should be obtained and certified by the Company Officer as 'Original Seen')

3. Does the customer appear in a Suspected Terrorist List (Sanction List - UNSCR 1373 / 1267) or any other Alert List:

Yes No If yes (Specify):

4. Customer Risk Rating

High Medium Low PEP Related Party FATCA

Entered by

Name EMP No Designation

Date Signature

Authorized by

Name EMP No Designation

Date Signature