

## 1. Company Details

Company Name	
Postal Address	
Email Address	
Telephone Number(s)	
Fax Number	
Company Location	
Company Website	

Company Name	
Postal Address	
Email Address	

Serial Number	Account Numbers
1.	Main Account Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2.	Other Account Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3.	Other Account Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4.	Other Account Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Mark the Box if you want all accounts be linked in Xpronet or specify above

## 2. Users Details

Maker				
S/N	Full Names	Mobile Number	Email Address	Signature
1.				
2.				
3.				
4.				

Checker				
S/N	Full Names	Mobile Number	Email Address	Signature
1.				
2.				
3.				
4.				

Maker				
S/N	Full Names	Mobile Number	Email Address	Signature
1.				
2.				
3.				
4.				

### 3. Other Users with special tasks

Please tick in the box appending the service for user(s) signed bellow



Balance enquiry

Report View

Statement view

S/N	Full Names	Mobile Number	Email Address	Signature
1.				
2.				

### 4. Bank Charges Bearer Details

Please tick in the box appending the service for user(s) signed bellow

For Transactions involving CRDB beneficiaries

Employer/Ordering party	
Employee/Beneficiary	

**Note:** For Transactions involving other bank beneficiaries, the Employer/Ordering party is the charge bearer

#### Transfer Limits

Tanzania Shillings	TZS	
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### 5. Company Signatory (s)

S/N	Full Names	Mobile Number	Email Address	Signature
1.				
2.				
3.				
4.				

## FOR BANK USE ONLY

### 1. Customer details verification at Branch

Customer Authorization Mandate	Sole Proprietor	Four Eye Principle	Six Eye Principle
Please use tick (✓) to choose the appropriate option			

Product Type	Charge Amount				Product Type	Charge Amount											
Bank Statement	TZS		USD		EUR		GBP		SWIFT			USD		EUR		GBP	
Balance Enquiry	TZS		USD		EUR		GBP		TISS	TZS		USD					
Cheque	TZS		USD		EUR		GBP		Utilities	TZS		USD		EUR		GBP	
EFT	TZS		USD		EUR		GBP		MNO's	TZS							
Internal Transfers	TZS		USD		EUR		GBP										
Salaries	TZS		USD		EUR		GBP										

### 2. Receiving Bank Officer

Full Name: <input style="width: 90%;" type="text"/>	Date	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Signature <input style="width: 90%;" type="text"/>
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### 3. Business Unit Manager

I hereby confirm that, I have verified the names and signatures on this application as per account operating mandates held at our Branch.

Full Name: <input style="width: 90%;" type="text"/>	Date	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Signature <input style="width: 90%;" type="text"/>
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NB: The form has to be completed with terms and conditions attached as Appendix 1

