

## **CORPORATE MEMBERSHIP APPLICATION FORM**

| CORPORATE DETAILS/GROUP  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
| Name of Entity   |  |  |  |  |  |  |
| Type of Organization: Club Association Partnership Company Co-operative  |  |  |  |  |  |  |
| Others (please specify)  |  |  |  |  |  |  |
| Date established/incorporated  |  |  |  |  |  |  |
| Registration Number  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| PHYSICAL ADDRESS   |  |  |  |  |  |  |
| Registered office  |  |  |  |  |  |  |
| Postal Address Postal Code Town  |  |  |  |  |  |  |
| Office Telephone E-mail  |  |  |  |  |  |  |
| Contact Person Mr./Mrs./Ms Mobile Number                                 |  |  |  |  |  |  |
| Nature of business of the entity   |  |  |  |  |  |  |
| Purpose of opening account: Investment Transactions Saving and Borrowing |  |  |  |  |  |  |
| Source of funds to account (you may tick more than one box)              |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Saving   |  |  |  |  |  |  |
| Business Income Income from investments Other (please specify)           |  |  |  |  |  |  |
| Shareholders Contributions   |  |  |  |  |  |  |
| Approximate Monthly Income Ksh.  |  |  |  |  |  |  |
| Any other complementary source of funds                                  |  |  |  |  |  |  |
| Names of directors and principal officers/officials                      |  |  |  |  |  |  |
| Name ID /Passport Occupation Position Held                               |  |  |  |  |  |  |
| Number Number  |  |  |  |  |  |  |
| 1.<br>2.   |  |  |  |  |  |  |
| 3.   |  |  |  |  |  |  |
| 4.   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

( Attach a separate sheet if the number of officers exceeds the space provided )

## AUTHORIZED SIGNATORIES

| DETAILS             | 1 <sup>ST</sup> SIGNATORY        | 2 <sup>ND</sup> SIGNATORY        | 3 <sup>RD</sup> SIGNATORY | 4 <sup>RD</sup> SIGNATORY |
|---------------------|----------------------------------|----------------------------------|---------------------------|---------------------------|
| Name*               |                                  |                                  |                           |                           |
| Designation*        |                                  |                                  |                           |                           |
| Date of Birth*      |                                  |                                  |                           |                           |
| Nationality         |                                  |                                  |                           |                           |
| P.O Box / code      |                                  |                                  |                           |                           |
| Mobile phone        |                                  |                                  |                           |                           |
| Telephone           |                                  |                                  |                           |                           |
| E-mail              |                                  |                                  |                           |                           |
| Work station        |                                  |                                  |                           |                           |
| Employer            |                                  |                                  |                           |                           |
| Address             |                                  |                                  |                           |                           |
| Residence           |                                  |                                  |                           |                           |
| Other Bankers       |                                  |                                  |                           |                           |
| Occupation          |                                  |                                  |                           |                           |
| (                   | Attach a separate sheet if the r | number of officers exceeds the s | pace provided )           |                           |
|                     |                                  |                                  |                           |                           |
| We intend to cemmer | nce savings of Kshs              | per mo                           | nth with effect from      |                           |
|                     |                                  |                                  |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     | _                                |                                  |                           |                           |
|                     |                                  | SIGNATORIES                      |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     | A                                | uthorized Signatories            |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     | Name                             |                                  | Nam                       | e                         |
|                     |                                  |                                  |                           |                           |
|                     | ID Number                        |                                  | ID N                      | umber                     |
|                     |                                  |                                  |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     | Designation                      |                                  | Desig                     | gnation                   |
|                     |                                  |                                  |                           |                           |
|                     | Specimen Signature               |                                  | Snoo                      | imen Signature            |
|                     | Specimen signature               |                                  | Spec                      | illien signature          |
|                     |                                  |                                  |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     |                                  |                                  |                           |                           |
|                     |                                  |                                  | _                         |                           |
|                     | A                                | uthorized Signatories            |                           |                           |
|                     | А                                | uthorized Signatories            |                           |                           |
|                     | A Name                           | uthorized Signatories            | Nam                       | ne                        |
|                     |                                  | uthorized Signatories            | Nam                       | e                         |
|                     | Name                             | uthorized Signatories            |                           |                           |
|                     |                                  | uthorized Signatories            |                           | le<br>umber               |
|                     | Name<br>ID Number                | uthorized Signatories            | ID N                      | umber                     |
|                     | Name                             | uthorized Signatories            | ID N                      |                           |
|                     | Name<br>ID Number                | uthorized Signatories            | ID N                      | umber                     |
|                     | Name  ID Number  Designation     | uthorized Signatories            | ID N Desig                | umber<br>gnation          |
|                     | Name<br>ID Number                | uthorized Signatories            | ID N Desig                | umber                     |
|                     | Name  ID Number  Designation     | uthorized Signatories            | ID N Desig                | umber<br>gnation          |
|                     | Name  ID Number  Designation     | uthorized Signatories            | ID N Desig                | umber<br>gnation          |
|                     | Name  ID Number  Designation     | uthorized Signatories            | ID N Desig                | umber<br>gnation          |
| igning Instructions | Name  ID Number  Designation     | uthorized Signatories            | ID N Desig                | umber<br>gnation          |

#### The provisions of this clause shall also apply:

- a. In the event of the death of any one of the holders of a joint account the SACCO shall pay or deliver to or to the order of the survivor or survivors all monies, securities, deeds, documents and other property whatsoever, remaining unencumbered, standing to credit or held by the SACCO for any account(s) in the joint names;
- b. The holders of a joint account shall be jointly and severally liable for any overdraft, loan or other credit facilities or accommodation which shall be granted to any account in their joint names, and for any liability or obligation arising from pertaining for such a joint account, together with all interest, commission and other charges and expenses;
- c. The SACCO may, unless otherwise agreed, act on the instructions of any other one holder of a joint account, but if any holder of a joint account gives instructions that conflict with instructions given by any other holder of the joint account, the SACCO may refuse to act on any such instructions until the conflict is resolved to the SACCO's sole satisfaction;
- d. Each holder of a joint account authorizes and empowers the other holder(s) to endorse for deposits and to deposit with the SACCO any and all cheques, notes or other instruments for the payment of money, payable and purporting to belong to any one or all of them, and should any such instrument be received by the SACCO without having been so endorsed then the SACCO is hereby authorized to endorse any such instruments on behalf of the relevant holder and to credit the same to the account held in their joint names.

#### **Authorized Signatories**

- e. The member shall, at the time of opening the account and at all times thereafter, give to the SACCO in an acceptable form, the specimen signatures of all persons authorized to operate the customer's account (the "Authorized signatory" or Authorized signatories") together with the names, addresses and such other information as the SACCO may require pertaining to the authorized signatories.
- f. All such Authorized signatories, unless otherwise agreed, are entitled to withdraw all or any of the customer's money, securities, deeds, documents or other properties held by the SACCO from time to time (provided that they do not form part of any security held by the SACCO), to open any further account in the name of the customer and or to overdraw any of the customer's accounts.

#### Attach the following documents

| CORPORATE   | GROUPS/CHAMA   |
|---|--|
| Audited statement of accounts if limited by shares                  | Minutes of meeting resolving to join Stima Sacco         |
| Memorandum and articles of association or constitution of the group | Constitution   |
|   | Copies of Identification cards of authorized signatories |
| General meeting/board resolution authorizing application            | Pictures of authorised signatories                       |
| Copies of identification cards of authorized signatories            | List of group members                                    |
| Pictures of authorized signatories (colored)                        |  |
| Specimen signatures   |  |
| Board resolution to open the account                                |  |
| A certified copy of registration certificates                       |  |

# **Share Capital structure** Nominal share capital **Issued Share Capital** Paid up Share Capital **DECLARATION** Indemnity We understand that this account shall be operated solely at the discretion of Sacco and hereby agree to indemnify the Sacco against any loss or claim arising out of the account being closed by the Sacco without notice due to unsatisfactory performance. The account shall be opened and operated subject to any directions that may be issued to the society by its statutory regulators from time to time. The declarations given in this form by us are true and we shall be held responsible for the same at all times NAME **SIGNATURE ID NO** Date (To be signed by signatories) **OFFICIAL USE ONLY** This application has been approved under the following membership category: Corporate Group Investor Membership approved by Signature Date Personal Number Membership Number Signature Date Account opened by

#### GENERAL TERMS AND CONDITIONS GOVERNING THE STIMA SACCO- CUSTOMER RELATIONSHIP

The relationship between the Sacco and the customer(member) shall be governed by the following terms and conditions including any amendments made from time to time thereto and notified to the customers ("the general terms and conditions"), subject to any further agreement in writing.

Signature

### Legal capacity and enquiry

Checked by

- a. The SACCO shall be entitled to make any enquires it deems necessary in the relation to the opening of an account and the customer hereby authorizes the SACCO to make any such enquiries.
- b. The customer shall provide the SACCO with all such information and documents as the SACCO may require in terms of establishing the identity of the customer or the Authorized signatories and their legal capacity to open and operate the account or as may be required pursuant to any anti-money laundering rules and regulations by the central bank of Kenya or any other regulatory body whether in Kenya or elsewhere.

Date