



FOR OFFICE USE ONLY
DATE : .....
A/C NO : .....
CIF NO. : .....
MANAGER'S INTL:.....

The Manager  
Commercial Bank of Ceylon PLC

**APPLICATION TO OPEN A SUPER SAVER ACCOUNT**

Please open a Super Saver Account in my/our name/s. I/We agree to comply with and be bound by the [rules and regulations](#) applicable for the conduct of such account. The account will be operated by myself / ourselves / either of us or ..... ( please specify )  
Please send a statement of account every 3 months / 6 months / 12 months.

Note :

- Pass Book will not be issued. Instead a Statement of Account will be issued.
- Interest will be calculated on the daily balance and credited monthly at the rate determined by the Bank at its discretion. Rate of interest is subject to change without prior notice to the customers.
- Interest will not be credited if the balance in the account is less than the [minimum balance](#) stipulated by the Bank.
- Cheques / Drafts to the credit of this Account, to be drawn favouring Manager, Commercial Bank of Ceylon PLC.
- The Account will only be opened at the sole discretion of the Bank subject to conditions governing Savings Accounts.

PLEASE FILL IN BLOCK CAPITALS

**Applicant 1:**  
MR./MRS./MS./REV./DR. : ..... INITIALS..... SURNAME.....  
NAMES DENOTED BY INITIALS .....  
ADDRESS .....

Statements to be mailed to : (to be completed only if the address is different to the above )  
.....

e-mail Address:.....  
Date of Birth : ..... NIC / Passport No : ..... (please attach a photocopy)  
Phone No : ..... Profession : .....  
I am / am not an Income Tax Payer. Income Tax File No : .....  
Any existing Accounts with Commercial Bank. ( Give A/C No/s ) : .....

Date : ..... Signature (as on Passport) : .....

**Applicant 2:**  
MR./MRS./MS./REV./DR. : ..... INITIALS..... SURNAME.....  
NAMES DENOTED BY INITIALS .....  
ADDRESS .....

E-Mail Address:.....  
Date of Birth : ..... NIC / Passport No : ..... (please attach a photocopy)  
Phone No : ..... Profession : .....  
I am / am not an Income Tax Payer. Income Tax File No : .....  
Any existing Accounts with Commercial Bank. ( Give A/C No/s ) : .....

Date : ..... Signature (as on Passport) : .....

FOR OFFICE USE ONLY:  
INPUT BY : ..... CHECKED BY : .....

## **RULES FOR SUPER SAVER ACCOUNTS**

1. Business relating to Super Saver Accounts will be conducted by the Bank during normal business hours.
2. The minimum deposit required to open an account is Rs. 50,000/-. There are no limitations on subsequent deposits.
3. The Bank reserves the right to convert any Super Saver Account which carries less than the required minimum balance of Rs. 50,000/- to an ordinary Savings Account. Such converted accounts will be governed by the rules applicable to ordinary Savings Accounts.
4. Cheques / Drafts which are not drawn favouring the Bank and money orders etc., will be accepted to the credit of Super Saver Accounts only at the discretion of the Bank.
5. On eligible accounts, interest will be calculated on the daily balance and credited monthly. Rate of interest applicable to Super Saver accounts which do not carry the stipulated minimum balance would be the rate applicable to ordinary Savings Accounts.
6. A statement of transactions will be issued periodically as decided at the time the account was opened. Account Holders should verify the correctness of transactions recorded in the statement and the Bank should be notified of any discrepancy without delay.
7. Withdrawals can be made by the Account Holder from the ATM or at the Bank counter. When making over-the-counter withdrawals, account holders should produce their ATM card together with the correctly completed withdrawal form.
8. The Bank reserves to itself the right to alter or add to these rules at any time.