APPLICATION TO OPEN A
FC PLUS - PFC SAVINGS ACCOUNT

The Manager,
Commercial Bank of Ceylon plc,
…………………………………….Branch.

For Office Use Only
A/C No.: .................................................................
Date A/C Opened: ..................................................
CIF No.: .................................................................
Manager’s Int.: .....................................................

Please open a FC Plus - PFC USD/EUR/GBP/AUD Account in my/our name/s as given below. As the initial deposit I/we enclose currency notes of/draft/cheque or fund transfer from ........................................................ (A/C No.) for ................................................ (Amount).

(Minimum initial deposit is 5,000/- in any of the above currencies)

Please tick the appropriate box accordingly.

I/We hereby affirm that,

☐ I/We am/are a Sri Lankan national/s.
☐ I/We am/are a Sri Lankan origin residing outside Sri Lanka.
☐ I/We am/are a non-national/s residing in Sri Lanka.
☐ I am a non-national on temporary visit to Sri Lanka/intending to visit Sri Lanka.

I/we agree to provide any document/s required by the bank in consideration with the account.

Required Documents

1. Passport. (Sri Lankan / Foreign)
2. Visa. (If you are a Sri Lankan origin residing outside Sri Lanka or a non-national resides in Sri Lanka.)
3. Employee Agreement. (If you are a foreign employee.)
4. Foreign Bank Introduction.(If you are a non-national on temporary visit to Sri Lanka/intending to visit Sri Lanka)
5. Documents to verify your residential address.(Copies of recent utility bills, Copy of valid driving license, letter from public authority.)
Dear Sir/Madam,

I/We hereby confirm that the information given below is true & correct.
I/We undertake to inform the Bank of any changes in the particulars given here.
I/We agree to comply with & to be bound by the prevailing & future rules governing the conduct of PFC accounts. Withdrawals to be made by either the survivor or the person authorized by me/us.
I/We undertake to inform you my/our return to Sri Lanka for permanent residence within two weeks of such returns.

1. Full Name: (Underline Surname) Rev/Mr/Mrs/Miss/ .........................................................
   Foreign Address: ..............................................................
   Address in Sri Lanka: ..............................................................
   Date of birth: ..............................................................
   NIC No.(If available): ..............................................................
   Sri Lankan/Foreign Passport No........................................
   Date of issue: ..............................................................
   Date of Departure from Sri Lanka........................................
   Contact Phone No.
   c) Sri Lankan..............................................................
   d) Foreign..............................................................
   E-mail Address: ..............................................................
   Occupation/Employer’s Name & Address: ..............................................................
   I am/not an income tax payer
   Income Tax File No.: ..............................................................
   Any existing account with Commercial Bank (Please indicate A/C No/s): ..............................................................

2. Full Name: (Underline Surname) Rev/Mr/Mrs/Miss/ .........................................................
   Foreign Address: ..............................................................
   Address in Sri Lanka: ..............................................................
   Date of birth: ..............................................................
   NIC No.(If available): ..............................................................
   Sri Lankan/Foreign Passport No........................................
   Date of issue: ..............................................................
   Date of Departure from Sri Lanka........................................
   Contact Phone No.
   a) Sri Lankan..............................................................
   b) Foreign..............................................................
   E-mail Address: ..............................................................
   Occupation/Employer’s Name & Address: ..............................................................
   I am/not an income tax payer
   Income Tax File No.: ..............................................................
   Any existing account with Commercial Bank (Please indicate A/C No/s): ..............................................................

Bank statement & other correspondence to be sent to: ...........................................................................

1. ...........................................................................
   Signature of Applicant.
   Date:...........................................

2. ...........................................................................
   Signature of Applicant.
   Date:...........................................