

FRONT OFFICE SERVICE ACTIVITY (FOSA)

APPLICATION TO OPEN A PERSONAL/JOINT SAVINGS ACCOUNT

I/We the undersigned hereby apply to open a Savings Account to be styled as follows:

My /Our particulars are as detailed below:

Identity Card No _____ Email Address _____ Date of Birth _____

TSC No _____ MNO _____

Address: P.O.BOX _____ Telephone 1 _____ Telephone 2 _____

Employers Address _____

Next of kin _____ Telephone _____ Address _____

Relationship _____

Station of duty/Employment/Business _____ Address _____

Residence: _____

County _____ Sub County/District _____ Division _____

Zone _____ Sub Location _____

Indemnity clause "I agree that this account shall be operated at the discretion of the SACCO and hereby indemnify the SACCO at my cost against any loss incurred or claims arising out of the account being closed without notice because of unsatisfactory performance.

Yours faithfully,

Full Name(s) _____ Sign _____ Date _____

Witnessed by _____ Tel NO _____ ID No _____ Sign _____

FOR OFFICIAL USE ONLY

Checked by (Teller) Name _____ Sign _____ Date _____

New Account _____ Other FOSA related Accounts _____

Approved by (FOSA In charge)

Name _____ Sign _____ Date _____

Attach the following documents:

1. National ID Card (Photocopy)
2. Two passport size photograph
3. Photocopy of business permit