

## **NEW BUSINESS ACCOUNT APPLICATION FORM**

This form is to be used when requesting a new business account and services. Information about products and services are set out in the Terms and Conditions. To open an account we require your personal and business information to identify you in accordance with the Anti-Money Laundering and Counter Terrorist Financing Act 2015. It is important that you provide complete and accurate information, to ensure the bank provides you with products and services that you require.

TYPE OF ORGANISATION				
(select one)				
PNG Company Fore	ign Company (registered in PNG)	Association	Partnership	Sole Trader
	Non Profit	Non Profit	<u>—</u>	<u>—</u>
For Profit	For Profit	For Profit		
KEY DETAILS				
Registered Company or Business Na	ame.			
Registered Company or Business Nu			Registered TIN N	lumber:
Contact: Ema			Fax Nullibel.	
Nature of Business:				
Principal Location of Business Opera				
Designated Non - Financial Bus	siness or Profession(DNFBP)			
OWNERSHIP DETAILS				
(please tick the appropriate box)				
100% PNG OWNED	76-99% PNG OW	NED	51-75% PNG OWNED	
26-50% PNG OWNED	1-25% PNG OWN	ED	0% PNG OWNED	
ADDRESS DETAILS				
PRINCIPAL PLACE OF BUSINESS <i>(if di</i>	-			
Sections				
Ctrant				
Town:				
District:				
Province:				
POSTAL ADDRESS				
PO Box Number:		Province:		
Post Office Name:		Country:		
Town:		Attention:		
DIRECTOR/SIGNATORY A				
irst Name:	Second N	Name:	Family Name:	
Date of Birth:	Country of Citizenship/Natio			
Residential Address: Allotment:		uburb:	City:	
Province:		Co	ontact No (Business Hours):	
Mobile No:	Email (Business):		Email (Personal):	
D 1 Provided:				
DIRECTOR/SIGNATORY B				
First Name:	Second N	Name:	Family Name:	
Date of Birth:	Country of Citizenship/Nation	onality:	Place of Birth:	
Residential Address: Allotment:	Section: S			
Province:			ontact No (Business Hours):	
Mobile No:	Email (Business):		Email (Personal):	
ID 1 Provided:		ID 2 Provided:		

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## **NEW BUSINESS ACCOUNT APPLICATION FORM**

CICNATORY C					
SIGNATORY C		- " "			
First Name:			ıme:		
Date of Birth:		Place of E	Birth:		
Residential Address: Allotment:			City:		
Province:		Contact No (Business Ho	urs):		
Mobile No:	Email (Business):	Email (Perso	nal):		
ID 1 Provided:		ID 2 Provided:			
CICNATORY D					
SIGNATORY D		- " "			
First Name:		Family Na	ame:		
Date of Birth:		Place of E	Birth:		
Residential Address: Allotment:			City:		
Province:			urs):		
Mobile No:	Email (Business):		nal):		
ID 1 Provided:		ID 2 Provided:			
METHOD OF OPERATION AND ACC	COUNT SIGNATORIES				
		and an the second			
	specimen signature appears below to ope				
Sole Signatory Either To	o Operate All To S	ign Other (Specify)			
A Full Name		C Full Name			
A. Full Name:	-	C. Full Name: Position:			
Position:					
Signature :	Dated :	Signature :	Dated :		
B. Full Name:		<b>D.</b> Full Name:			
Position:		Position:			
Signature :		Signature :			
ACCOUNT AND CEDVICE DECLIFOR	•				
ACCOUNT AND SERVICE REQUEST					
Please tick the required new PRODUCT	TYPE from the list below.				
Cheque Account	SME Business Account				
OTHER SERVICES					
OTHER DERIVIOES					
We hereby request that BSP allows us to	o access and operate our accounts by the fo	ollowing products selected below.			
Please tick the required products from t	he list below.				
Cheque Book Dep	osit Book Personal Interne	t Banking Online Business B	anking		
SME VISA Card (obtain applicati	ion) Mobile Merchant (obtain	application) School Merchant (	obtain application)		
Consent to be contacted via Tele	phone, SMS, email, to inform about produ	cts, services, surveys or to update your ac	ecount details.		
SME VISA CARD INFORMATION					
The following persons are authorized t	o have in their possession and transact with	a SME VISA Card linked to SME Business of	current account.		
CARD HOLDER 1		CARD HOLDER 2			
l					
Name:   Name:					
*	Only applicable where method of operation	n is <u>Sole Signatory</u> or <u>Either to Operate</u> .			
INTERNET RANKING					

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Online Business Banking (obtain application)

Personal Internet Banking (obtain application)

## **NEW BUSINESS ACCOUNT APPLICATION FORM**

#### **DISCLOSURE STATEMENT**

BSP Financial Group Limited advises that we may disclose your personal information in future to: (1) other organizations to help us to assess financial risk or to recover debt; (2) credit reference agencies; (3) other members of the BSP Group including BSP advisers, consultants or service providers, any of the banks subsidiaries, branches, head office or representatives; (4) any authority, regulator or government agency in any jurisdiction as the Bank may in its absolute discretion consider appropriate, necessary or advisable; (5) other organizations to assist us in compliance obligations in respect of sanctions, anti-money laundering, counter-terrorism financing and proceeds of crime; and (6) the United States Internal Revenue Service to assist us in compliance with our obligations under our arrangements regarding the Foreign Account Tax Compliance Act ("FATCA").

#### **CUSTOMER DECLARATION**

BUSINESS C/A NO SME BUSINESS D/A NO

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I certify that the information contained in this form is true and accurate. I have read and accept BSP's Account and Electronic Banking Terms and Conditions that apply to my business accounts and the transactions I conduct on my business account's. Signed Director:\_\_\_\_\_ Signed Director/Secretary: Date: \_\_\_\_\_ Date: OFFICE USE ONLY CIF Number: CIF Created by: Name: SME CARD EMBOSSING CARD HOLDER 1 **CARD HOLDER 2** 1st Line Embossing Name: (Card Holder Name / 21 Characters) 1st Line Embossing Name: (Card Holder Name / 21 Characters) 2nd Line Embossing Name: (Company Name / 25 Characters) 2nd Line Embossing Name: (Company Name | 25 Characters) TELLER/CS0: I confirm that I peformed the following: SME VISA Card Verified Business Details Cheque Book Verified Identification of all Signatories Deposit Book PIB processed (Sole Trader) Provided the Business with all relevant Terms & Conditions **OBB** processed Staff Number: Signed: Dated: **AUTHORISING OFFICER:** Staff Number: Dated: PRIMARY ACCOUNT HOLDER **BRANCH NUMBER** CUSTOMER SHORT NAME

23/12/202

# **NEW BUSINESS ACCOUNT CHECKLIST**

## Requirements to open a New Business Account **AND Apply for additional services**

#### **For Companies**

Completed New Business Account Application Form
Company Profile
Copy of Company Certificate of Incorporation from IPA
Copy of IRC Tax Identification Number (TIN) for compar
Meeting Minutes
Complete Online Business Banking Application Form (if required)
Valid ID for each signatory (refer to Identification Requirements section)

#### For Sole Traders / Partnerships

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Completed New Business Account Application Form
Copy of Trading License or IPA Certificate
Business Profile
Copy of Tax Identification Number for Individual Sole traders

Valid ID for each signatory (refer to Identification

### **Examples of Licensing Bodies**

Requirements section)

Business	Licensing Body
Trade Store	Trading license from the Local Level Government
PMV/Taxi	PMV/Taxi license from the Land Transport Board
Takeaway Shop	Trading license from the Local level Government
Clothing Business	Trading license from the Local level Government

#### **Identification Requirements**

If you are a new BSP customer (i.e. do not have an active personal account with BSP), you are required to provide the following acceptable forms of identification to a total value of 40 points or more.

Form of Identification	Allocated Points
Drivers License	37 points
Passport	37 points
Work Permit	37 points
National Identity Card	37 points
Employment Identification Card with Photo	37 points
Student Identification Card	37 points
Birth Certificate	20 points
Referee with photo	20 points
Letter of employment	3 points
Marriage Certificate	3 points
School Certificate	3 points
Certificate of Baptism	3 points

The following products and services can add value to your business.

- Online Business Banking (obtain application)
- ☑ EFTPoS device (obtain application)
- ✓ Term Deposit
- Mobile Merchant (obtain application)
- ✓ School Merchant (obtain application)

Note: You will be required to complete separate applications for the products and services stated above. Please obtain these applications from your nearest BSP Branch.

Visit your nearest Branch or SME Business Centre today and discuss all your business and banking needs. We have tailored solutions to help grow your small business.







