## Terms & Conditions Governing the Conduct of Account

1. **Minimum Balance**
A customer is required to maintain a minimum balance prescribed by the Bank. Please make an inquiry at your nearest branch in order to find the prevailing minimum balance requirement.

2. **Ledger Fee**
If balance falls below the prescribed minimum balance requirement, a monthly ledger fee shall be levied to the customer account. For current applicable fee, please contact your branch.

3. **Interest Payment**
Interest for saving account shall be accrued on daily or monthly minimum basis as per the product and applied to customer account on semi annual basis i.e. June and December end. No interest shall be paid for failing to maintain the minimum balance below the minimum requirement.

4. **Cheque Book**
Cheque Book shall be provided upon request. Customers are recommended to read the notices given on the inside front and back cover of the cheque book for cheque issuance and safe keeping guidlines.

5. **Confidentiality**
Unless required or requested by law or any government body, information pertaining to customer account will be kept confidential. The customer may, however, instruct the Bank to release such information to third parties in writing.

6. **Customer Instruction**
- The Bank shall have no liability or responsibility for failure to give effect to instructions prior to receipt by the Bank or for any loss or damage incurred or suffered by the customer in the event of any failure, interruption or delay in performance of any instructions resulting from breakdown, failure or malfunction of any telecommunications or computer services or system or from any other event or circumstances whatsoever not reasonably within the Bank's control.
- The Bank shall not be liable for any losses whatsoever resulting from or in connection with the customer countermanding any outstanding instruction which has already given rise to binding rights or obligations.
- No facsimile/email instruction will be entertained unless the customer has signed "Fax/Email Indemnity" in respect to fax/email instruction.
- The Bank shall make payments of cheque, bill of exchange, promissory notes, standing orders, direct debits, issue of draft, mail and telegraphic transfer, purchase and sell of foreign currency and any other instruction by debiting the account(s) whether in credit or otherwise at its sole discretion.
- The account(s) shall be subject to the applicable charges as per the Bank's schedule of charges as revised from time to time. The Bank shall always be entitled without notice to recover by debiting my/our account for any charges, expenses, fees, commission, mark up, penalties, withholding taxes levied by Government Department or authorities. The Bank is also entitled to reverse entries made in error.
- I/We understand that I/We may close account by giving prior notice to the Bank. The Bank may however either at it's own instance or, at the instance of any court or administrative order, or otherwise close, freeze or suspend dealing in any of the account without prior notice to me/us.

7. **Money Laundering**
I/We hereby declare that account at Laxmi Bank Ltd is opened with the monies, which have been earned from legal means. All transactions into the account shall remain legal and the account shall not be used for the purpose of money laundering. If the Bank knows or suspects that an account is being used to process the proceeds of crime, the Bank is obliged to report the fact and nature of its knowledge and suspicions to the concerned authority.

8. **Governing Law**
The law governing the account is that of Nepal. In the event of a dispute in relation to the account, it will be governed and construed in accordance with Nepali law.

9. The Bank reserves the right to alter any and/or all the terms & conditions specified above without prior notice.

10. This application shall be subject to the approval of the Bank. The Bank shall be entitled at its sole discretion to reject this application or any part hereof, without furnishing any reasons.

लक्ष्मी बैंक लिमिटेड
Laxmi Bank Limited

## PERSONAL ACCOUNT OPENING FORM

Date : _____ / _____ / _____

**For Bank Use Only**

Customer ID : _____ KYC Registration No. : _____

Account Number : | | | | | | | | | | | | | | | | Branch Code : _____

I/We request you to kindly open my/our account as per details given below :

**PERSONAL DETAILS**

**APPLICANT 1**

Full Name : Mr/Mrs/Ms _____

Father's/Husband's Name : Mr. _____

_____ _____ B.S/A. D _____ / _____

Nationality | Date of Birth (mm/dd/yyyy) | Identification document/Number

| Residential Address | Correspondence Address (if different from residence address) |
|---|---|
| | |

Occupation: _____ Organization : _____

Telephone : Office _____ Residence _____ Mobile _____

Facsimile : _____ Email : _____

**APPLICANT 2**

Full Name : Mr/Mrs/Ms _____

Father's/Husband's Name : Mr. _____

_____ _____ B.S/A.D _____ / _____

Nationality | Date of Birth (mm/dd/yyyy) | Identification document/Number

| Residential Address | Correspondence Address (if different from residence address) |
|---|---|
| | |

Occupation: _____ Organization : _____

Telephone : Office _____ Residence _____ Mobile _____

Facsimile : _____ Email : _____

**Purpose of Opening Account**

○ Savings ○ Transactional ○ Loan repayments ○ Others, please specify _____

**Source of Fund**

○ Salary ○ Business ○ Return on Investments ○ Others, please specify _____

## ACCOUNT INFORMATION

| | | | |
|---|---|---|---|
| Account Type(s) | ○ Savings | ○ Laxmi Saving | ○ Orange Saving |
| | ○ Junior Saving | ○ Gurkha Saving | ○ Student Saving |
| | ○ USD Money Tree Saving | ○ Others _____ | |
| Currency of Account | ○ NPR | ○ USD | ○ Others, please specify _____ |
| Cheque Book | ○ Yes | ○ No | ○ Delivery to third party with detail as under :<br>Name : _____<br>Signature : _____ |

## NOMINEE DETAILS

In the event of my death, I hereby nominate the following person to receive any sum of monies which may be due to me from your Bank.

Name : Mr/Mrs/Ms. ……

Son/Daughter of : Mr ……..

Date of Birth : …… Relationship to me: ……

Address : ……

……..

…… Telephone : ……

In the event of my death during the minority of the aforementioned nominee, I appoint

Name : Mr/Mrs/Ms. ……

Son/Daughter of : Mr ……..

Date of Birth : …… Relationship to me: ……

Address : ……

……..

…… Telephone : ……

## INTRODUCTION OF ACCOUNT

I am pleased to introduce Mr/Mrs/Ms _____ who is interested in opening an account in your Bank. The aforementioned is well known to me/us and recommend him/her/them to your Bank for opening of account. Should you have any queries, please feel free to contact me/us.

Introducer's Name: _____

Account Number : | | | | | | | | | | | | | | |

Introducer's Signature: ……

## SUPPLEMENTARY PRODUCTS & SERVICES *(Please tick (√) and fill relevant application forms)*

***ebanking***

○ eMail solution ○ Internet Banking

*mBanking :*

○ sms@laxmibank ○ SMS Alert

***Cards***

○ VISA Credit Cards ○ Debit Cards

***Bancassurance***

○ Life Insurance ○ Non Life Insurance

***Others***

○ Sandook (Lockers) ○ Travel Services

○ Fixed Deposit

## OPERATING INSTRUCTIONS

| Full Name | Specimen Signature |
|---|---|
| | |
| | |
| | |
| | |

**Account Operation :** ○ Single ○ Joint ○ Any One

*Special Mandate (Please fill separate forms that are available in order to avail of these services):*

○ Please honor fax/email instructions sent by me/us

○ I/We wish to authorize a third person to operate the account on my/our behalf

## DECLARATION AND CONSENT

I/We acknowledge that I/We have received, read and understood fully all prevailing Standard Terms and Conditions and the terms contained in this application form and agree to be bound by them in connection with the account(s) applied for hereunder as well as any and all account(s) designated as deposit account(s) by the Bank, that may as at this date already be opened by me/us and /or that may hereafter be opened by me/us with the Bank.

I/We agree to be bound by any terms and conditions governing any facilities, features and services relating to such account(s) as I/We may apply for and /or utilize from time to time.

_____
Authorized Signature
APPLICANT 1

Date: _____/_____/_____

_____
Authorized Signature
APPLICANT 2

Date: _____/_____/_____