

JN Location

Date
YYYY-MM-DD

1. New Joint Account

I / We request that you open a Joint Deposit account/ (s) subject to JN Bank Limited's Terms and Conditions (Personal) governing the same, for the time being in force, in the names of:-

1.
Full Name

3.
Full Name

2.
Full Name

4.
Full Name

Account Number(s)

1. We* agree to be bound by JN Bank's Terms and Conditions (Personal).
2. We* agree that either/ any joint Member may operate the joint account(s), including but not limited to deposits, withdrawals and addition of another Member to the account(s). However, written instructions from each Member, or his duly appointed representative, is required to close a joint account(s) and/or remove the name of a joint account holder(s) from the said joint account(s).
3. We* agree that in the event a Power of Attorney is granted by either/ any joint Member, JN Bank may also refuse to honour any transaction, made by the attorney unless their appointment regarding the joint account(s) has been agreed upon in writing by all account holders in a form satisfactory to JN Bank.
4. We* agree that in the event of the death of any one or more of the Members, the survivor(s) shall have full control of all moneys then and thereafter standing to the credit of the Members' account(s) and of all securities deposited with JN Bank in their joint names, and JN Bank may pay or deliver to or to the order of the survivor(s) all monies securities, deeds, documents, and other property whatsoever standing to the credit or held by JN Bank for any account(s) in the Members' joint names.

Dated this
YYYY-MM-DD

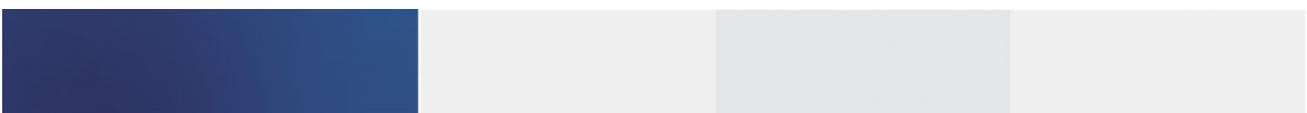
Joint Holder(s) Signatures:

1. _____

3. _____

2. _____

4. _____



2. Addition of Name

I / We (Existing account holders' named below) request you to add the following new account holder(s) to the captioned account (s) subject to the JN Bank Limited's Terms and Conditions governing the same, for the time being in force :-

Existing Account Holders:

1. _____
Full Name Signature

Account Number(s)

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

New Account Holder(s)

I / We understand that the person(s) being added will be required to have knowledge of my / our request to add his / her their name(s). His / Her / Their name(s) will only be added upon his / her / their visit to the branch with proper identification. I / We further guarantee, promise and undertake to indemnify the Bank for any loss it may suffer on my / our account(s) arising out of my / our request.

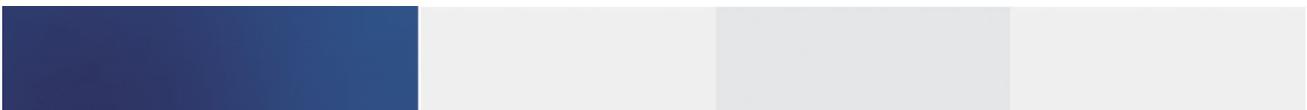
<p>1. <input type="text"/> <input type="text"/> Full Name RIM #</p>	<p>2. <input type="text"/> <input type="text"/> Full Name RIM #</p>
<p>3. <input type="text"/> <input type="text"/> Full Name RIM #</p>	<p>4. <input type="text"/> <input type="text"/> Full Name RIM #</p>

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New Holder(s) Signatures:

1. _____	3. _____
2. _____	4. _____



FOR INTERNAL USE ONLY

CSR Name:

Supervisor Name:

CSR Signature:

Supervisor Signature:

