

COPORATE FIXED DEPOSIT ACCOUNT OPENING FORM



AMW Capital Leasing & Finance Plc

No.185, Union Place , Colombo 02.

Tel : +94 11 2307739, 2446476, 2446419, 2446374

Fax : +94 11 2307749

Email : deposits@amwltd.com

Co.Reg.No : PB14PQ

1) Name of the Company _____

Address _____

Contact Numbers:

Office 1 _____ Office 2 _____ Fax _____

E-mail _____

Nature of Business _____

Business Registration No _____ Income Tax file No/s _____

Key Contact person/s

Name	Designation	Telephone/Fax/Email

Deposit Amount _____ Rupees in words _____

Period / Months Interest payment instruction _____

Rate of interest _____ p.a. Monthly ☐ Quarterly ☐ H.Yearly ☐ Yearly ☐ Maturity ☐

How will interest be paid?

To be Collected ☐ Direct to address given below ☐ Remit bank account ☐

Name _____

Address _____

If a bank A/C, Name & A/C No. : Bank _____

: Branch _____

: A/C Number _____

Directors / Authorized signatories

Name	NIC / Passport No	Designation	Signature

Terms and conditions to open and operate a Fixed Deposit

- 1.A Fixed Deposit can be opened with a minimum of Rs.1,000,000/00
- 2.A certificate will be issued for each fixed deposit, bearing the signatures of two Directors/ Authorised signatories of the company.
- 3.Fixed Deposit can be held only under a one corporate entity name.(Joint accounts are not allowed)
- 4.Payment will be made as instructed in the mandate.
- 5.Any change of address or loss of deposit certificate should be notified immediately to the company in writing.
- 6.Maturity of deposits will be notified in writing at least two weeks prior to the date of maturity.
- 7.In case of withdrawal of deposit , the company will be required to surrender the original Deposit Certificate with the endorsement on the reverse to obtain payment of the principal sum plus accrued interest.

Premature withdrawal

- Premature withdrawal will be allowed at the discretion of the management subject to penalty on interest rate.
- Please note that no interest will be paid for withdrawal made before the completion of one month.

OFFICE USE ONLY

Office receipt No. _____ Date. _____

Account No. _____ Bond No. _____

Rate of Interest applicable _____

Deposit by Cash / Cheque _____

Cheque No. _____

Date _____

Check list

- 1.Copy of Certificate of Incorporation ☐
- 2.Latest certificated copy of Memorandum & Articles of Association ☐
- 3.Duly certified true copy of the board resolution ☐

The board resolution should include the following information :-

- (a) board of directors authorizing to open an account with AMW Capital Leasing & Finance Plc ☐
 - (b) Operating instruction such as authorized signatory etc. ☐
- 4.NIC/Passport copies of the directors. ☐

Relationship Officer

Name _____

E.P.F No. _____

Head of deposits

Certificate signed by