

FOREIGN CURRENCY ACCOUNT OPENING FORM - PERSONAL

(Current / Savings Accounts)



The Manager, DFCC Bank PLC

Branch

Please open a savings / Current account(s) in my/ our name.

Date :

Client ID:

Account No.	Savings	Current	Currency	Account Type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ACCOUNT HOLDER INFORMATION

Full Name :
(Mr./Mrs./Ms.)

Sri Lankan/Foreign Passport No. : Date of Issue:

NIC/EIC No. : Date of Birth :

Tax Identification No. :
(In case of US Person)

Please tick the appropriate box accordingly

I/We hereby affirm that;

☐ I am a Sri Lankan national

☐ I am a Sri Lankan origin residing outside Sri Lanka (non resident)

☐ I am a non-national residing in Sri Lanka

☐ I am a non-national on temporary visit to Sri Lanka/ intending to visit Sri Lanka

**** Resident in Sri Lanka** - Person who has been in Sri Lanka for a period of 183 days or more in aggregate during the preceding 12 months will be treated as resident.

Country of PR : Date of Obtaining PR :

Date of Departure from Sri Lanka : Most Recent Arrival in Sri Lanka :

Foreign Contact No. :

Permanent Address :

Status of Residence : ☐ Owned ☐ Rent ☐ Other

Correspondence Address :

Foreign Address :

Mobile No. :

Email Address :

Name and Address of the Employer:

Nature of Employment Abroad/ Sri Lanka :

Following is a mandatory declaration which is required to be completed by all applicants under the Inland Revenue Act No. 28 of 1979

Tax Payer : ☐ Yes ☐ No Tax File No.

Are you or your close relative a Politically Exposed Person (PEP)? If "Yes", please mention the name and/or designation.

"Politically Exposed Person" means an individual who is entrusted with prominent public functions either domestically or by a foreign country, or in an international organization and includes a Head of a State or a Government, a politician, a senior government officer, judicial officer or military officer, a senior executive of a state owned Corporation, Government or autonomous body but does not include middle rank individuals.

☐ Yes ☐ No

OPERATING INSTRUCTIONS

☐ Sole ☐ Jointly ☐ Either of Us

VALUE ADDED SERVICES

☐ Debit Card Primary Account : ☐ Link all my accounts to the card

☐ eBanking Preferred User ID for eBanking :

As per the bank's policy, all value added services will be activated at the time of account opening. If you do not want any of these facilities please speak to the bank officer. Value added services provided may be subject to charges which can vary time to time. Latest applicable charges will be available on the bank website for reference.

GENERAL INFORMATION

Purpose of Account Opening:	<input type="checkbox"/> Salary Remittance	<input type="checkbox"/> Business	<input type="checkbox"/> Loan Repayment	<input type="checkbox"/> Savings	<input type="checkbox"/> Investments	<input type="checkbox"/> Education
	<input type="checkbox"/> Interest Credits	<input type="checkbox"/> Utility Bill Payment	<input type="checkbox"/> Others - Specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Source of Funds :	<input type="checkbox"/> Sales and Business Turnover	<input type="checkbox"/> Export Proceeds	<input type="checkbox"/> Salary/Profit/Income			
	<input type="checkbox"/> Family Remittances Commission	<input type="checkbox"/> Contract Proceeds	<input type="checkbox"/> Investment Proceeds			
	<input type="checkbox"/> Income	<input type="checkbox"/> Donations/ Charities (Local/Foreign)	<input type="checkbox"/> Sale of Property/Assets			
	<input type="checkbox"/> Gift	<input type="checkbox"/> Other - Specify	<input type="checkbox"/>			

Anticipated Volumes of Deposits from Above Sources (per month in LKR)

For Foreign Currency Accounts please use the prevailing exchange rate to arrive at the LKR value.

Account 01 :	<input type="checkbox"/> Less than 100,000	<input type="checkbox"/> 100,001-500,000	<input type="checkbox"/> 500,001-1,000,000	<input type="checkbox"/> 1,000,001-5,000,000	<input type="checkbox"/> Above 5,000,001
Account 02 :	<input type="checkbox"/> Less than 100,000	<input type="checkbox"/> 100,001-500,000	<input type="checkbox"/> 500,001-1,000,000	<input type="checkbox"/> 1,000,001-5,000,000	<input type="checkbox"/> Above 5,000,001
Account 03 :	<input type="checkbox"/> Less than 100,000	<input type="checkbox"/> 100,001-500,000	<input type="checkbox"/> 500,001-1,000,000	<input type="checkbox"/> 1,000,001-5,000,000	<input type="checkbox"/> Above 5,000,001
Account 04 :	<input type="checkbox"/> Less than 100,000	<input type="checkbox"/> 100,001-500,000	<input type="checkbox"/> 500,001-1,000,000	<input type="checkbox"/> 1,000,001-5,000,000	<input type="checkbox"/> Above 5,000,001

TERMS & CONDITIONS

The Terms & Conditions applicable to DFCC Universal General Terms and Conditions and DFCC Products and services are available on the DFCC Bank PLC website (www.dfcc.lk) in Sinhala, Tamil and English for your review and if you require a printed copy of any of the Terms and Conditions the branch will provide it upon request.

CUSTOMER DECLARATION

- I/We hereby confirm having read and understood/made to understand and agree to comply with and be bound by all applicable laws and regulations and with the DFCC Universal General Terms and Conditions applicable for Customer Accounts.
 - I/We hereby authorize you to act on instructions given by me/us relating to this account/accounts and I/We hold myself/ourselves liable of any indebtedness to the Bank created by such actions.
 - I/We consent to DFCC Bank PLC collecting, processing, retaining, and sharing my/our personal data for banking operations, regulatory compliance, and service enhancements, in accordance with the Personal Data Protection Act No. 9 of 2022 and the Bank's Privacy Policy available on its website. I/We acknowledge my/our rights under the PDPA, including access, correction, and withdrawal of consent, subject to legal and operational requirements.
 - I/We hereby authorize the Bank to generate a CRIB Report(s) to assess my/our eligibility for services the bank has offered /may offer to me/us in the future.
 - I/We hereby confirm that I/We am/are aware of the conditions imposed under the provision of the Foreign Exchange Act, No. 12 of 2017 (the Act) on Electronic Fund Transfer Cards (EFTCs) subject to which the card may be used for transactions in foreign exchange and I/We hereby undertake to abide by the said conditions. I/We further agree to provide any information on transactions carried out by me/us in foreign exchange on the card issued to me/us as DFCC Bank may require for the purpose of the Act. I/We am/are aware that the Authorised Dealer (DFCC Bank) is required to suspend availability of foreign exchange on EFTC if reasonable grounds exist to suspect that unauthorised foreign exchange transactions are being carried out on the EFTC issued to me/us and to report the matter to the Director Department of Foreign Exchange. I/We also affirm that I/We undertake to surrender the Debit Card/s to DFCC Bank, if I/We migrate or leave Sri Lanka for employment abroad, as applicable.
 - I/We declare that all details given by me /us on this form are true and correct.
- ☐ I/We have accessed the DFCC Bank PLC website, read and understood the DFCC Universal General Terms and Conditions and Terms and Conditions relating to DFCC Products and Services indicated above.
- ☐ I/We acknowledge receipt of a printed copy of the DFCC Universal General Terms and Conditions and Terms and Conditions relating to DFCC Products and Services from the branch and confirm that I/We have read and understood them.
- ☐ In the event joint holders, Client Information Forms has been completed for the below mentioned NIC holders which is an integral part of this form.

Joint Account Holder Details

NIC/EIC :	<input type="checkbox"/>	CIF :	<input type="checkbox"/>
Country of PR :	<input type="checkbox"/>	Date of Obtaining PR :	<input type="checkbox"/>
Date of Departure from Sri Lanka :	<input type="checkbox"/>	Most Recent Arrival in Sri Lanka :	<input type="checkbox"/>
Foreign Contact No. :	<input type="checkbox"/>	**Please complete a separate client information form for the joint holder	

Signature of Primary
Account Holder

Signature of Joint
Account Holder

BANK USE ONLY

Pre - encoded Card No.: ☐

W/F reference of CIF : ☐

Name to be Printed on the Card (for personalized cards):
(Max 20 characters including spaces)

☐

Card Delivery Method ☐ Branch ☐ Permanent Address

☐ Communication Address

Data input by

Account Authorised By

Name, Employee No. and Signature

Name, Employee No. and Signature

DFCC One Onboarding Status :

☐ Yes

☐ No - Reason ☐