

**PART 1: APPLICATION DETAILS****1. ACCOUNT TYPE (TICK APPROPRIATE OPTION)**

Please Open:  (Specify Number of Accounts)  New Account(s)  Additional Account(s)

Type:  Current Account  Call Account  Other (specify)

Currency:  GHS  USD  GBP  EUR

Purpose of Account opening:  Transactional  Investment Other (specify)

Source of funds:

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**2. BUSINESS DETAILS:**

Business name:

Legal form:  Sole Proprietor  Partnership  Company Limited by shares  Unlimited Liability Company  
 External company  Professional body  Company Limited by Guarantee

Type:  Private  Public

Date of Registration:  Bus. Registration No.

Date of incorporation:  Place of Incorporation:

Tax Identification No:  Country of Tax payment:

Parent Company:

Parent Company Address:  Place of Registration:

No of Partners/directors

Apex Holding Company:

Apex Company Address:  Country of Registration:

**PERMITS AND CERTIFICATION/LICENSE**Are regulatory permits needed for the running of the business?  YES  NOIf yes, what stage has application reached?  Granted  Applied for  Not yet applied for

Please indicate: Name of competent authority

Permit No.

**PRIMARY BUSINESS ACTIVITY**

- Agriculture  Trade  Managers & Professionals  Distribution  Entertainment  Hospitality  
 Mining  Fashion  Charity /Association  Services  Construction  Transport  
 Education  Health  Precious Metals/ Stones  Manufacturing  Religious Org.  Real Estate  
 Legal  Securities and Brokers  Oil and Gas  Shipping and Port  
 Pharmaceutical  Food Industry  Non Profit Organization

 Other (specify)**3. CONTACT INFORMATION**

Business Location/Registered Office

Town/ City:

District:

Region:

Country:

Permanent Mailing Address:

Land mark:

GPS Address:

Tel:

Fax:

E-mail Address:

Website:



Proof of Address Document:	<input type="text"/>	Document No.	<input type="text"/>
Issuing Office:	<input type="text"/>	Issuing Date:	<input type="text"/>
Occupancy Status:	<input type="radio"/> Owner <input type="radio"/> Tenant <input type="radio"/> Other		
Telephone No.	<input type="text"/>	Email	<input type="text"/>

**Position/Role of Director:**

<input type="radio"/> Chairman/ President	<input type="radio"/> Managing Director/ CEO	<input type="radio"/> Executive Director	<input type="radio"/> Non-Executive Director	<input type="radio"/> Other (specify) <input type="text"/>
For Shareholders/ UBO, % Shares held: <input type="text"/>				

**Customer Identification and Location Address Self Certification**

This is to certify that I am the true and lawful holder of the above mentioned identity document with the above details. I undertake to inform SOCIETE GENERALE GHANA PLC in the event of any change in the said identity document or the information provided.

I certify that I am currently resident at the above-indicated location/address and undertake to inform SOCIETE GENERALE GHANA PLC in the event of any change in my address/location.

Date:	<input type="text"/>	Signature: _____
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Fix Passport picture here if signatory to the Account

*Complete as many copies of this page for the number of Controlling Parties concerned*

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**5. CORPORATE SHAREHOLDERS-5% AND ABOVE**
**A.**

Full name of entity			
% of shares held		Registration Cert No.	
Address		Date of Incorporation:	
		Country of Incorporation:	
GPS Address		Telephone:	
Tax identification No.		Country of tax payment	
Name of Beneficial Owner(s) (if any)	1.		% Shares held
	2.		% Shares held
	3.		% Shares held

**B.**

Full name of entity			
% of shares held		Registration Cert No.	
Address		Date of Incorporation:	
		Country of Incorporation:	
GPS Address		Telephone:	
Tax identification No.		Country of tax payment	
Name of Beneficial Owner(s) (if any)	1.		% Shares held
	2.		% Shares held
	3.		% Shares held

**Individuals listed as Beneficial Owners should complete section 4**

**6. AFFILIATED/ LINKED COMPANIES**

Name of affiliated Company/Body

1.	
2.	
3.	

**7. BUSINESS AND FINANCIAL INFORMATION**

Net worth of Company:	<input type="text"/>	Financial Info. Update date:	<input type="text"/>
Authorized Capital:	<input type="text"/>	Paid Up Capital	<input type="text"/>
Net Profit/ Loss Last Year:	<input type="text"/>	Net Profit/ Loss Year Before:	<input type="text"/>
Date of Last Audited Financial:	<input type="text"/>	Destination of funds [Country(ies)]:	<input type="text"/>
Origin of funds [Country(ies)]:	<input type="text"/>	Currency of Transactions:	<input type="text"/>
Annual Turnover:	<input type="text"/>	Statutory Auditors:	<input type="text"/>
Is company registered on the Stock Exchange?	<input type="radio"/> YES <input type="radio"/> NO		
Name of Stock Exchange:	<input type="text"/>		

**DETAILS OF ACCOUNT HELD WITH OTHER BANKS**

S/N	NAME AND ADDRESS OF BANK BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	STATUS ACTIVE/ DORMANT
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Accounts Functioning :**

Expected operation on the account (Type of Transactions):

Expected Transaction account and frequency:

Credit Transaction Amount:

Frequency:

Debit Transaction Amount:

Frequency:

**8. SG GROUP AFFILIATION:** YES NO

(If yes, Complete the following fields)

Country of the registration of the group:

Company name of the parent company:

Trade Name of the Group:

**9. EMAIL INDEMNITY****EMAIL ADDRESS:****1****2****3** I/We have read and understood the provisions of email indemnity mentioned in terms and conditions of this application and agree to be bound by these terms and conditions.

The Bank is ready to act on the instructions received via e-mail address (ess) stated above

**10. AUTHORITY TO DEBIT FOR SEARCH FEE**

I/We hereby authorize you to debit our account with the applicable charges for the legal search conducted on our account at the Registrar General's Department or relevant agency / authority.

**11. SET-OFF OF BALANCE ON ACCOUNT**

I/We agree that you (in addition to any general lien or similar right to which you as my / our banker may have at any time and without notice to me /us) combine or consolidate all or any of the company's accounts with liabilities to you and set off or transfer any sum standing to the credit of any such accounts, be it cash, cheques, valuable, deposits, securities, negotiable instruments or other assets belonging to me/us with you in or towards satisfaction of any of my / our liabilities to you or any other account or in any other respect, whether such liabilities be actual or contingent, primary or collateral, several or joint.

**12. DISCLOSURE TO CREDIT REFERENCE BUREAUS**

The Bank will obtain information about you from the credit reference bureaus to check your credit status and identity. The bureaus will record our enquiries which may be seen by other institutions that make their own credit enquiries about you.

The Bank shall also disclose your credit transactions to credit reference bureaus in accordance with the Credit Reporting Act, 2007 (Act 726).

**13. DECLARATION**

I/We  hereby declare that the above information is correct and accurate in all respect. I/We have read, understood this application, the terms and conditions of the service (s) and agree to be bound by these terms and conditions.

Full Name:   
 In their capacity as (position)   
 Signature: \_\_\_\_\_  
 Date:

Full Name:   
 In their capacity as (position)   
 Signature: \_\_\_\_\_  
 Date:

**IN THE PRESENCE OF:**

Full Name:   
 In their capacity as (position)   
 Signature: \_\_\_\_\_  
 Date:

Full Name:   
 In their capacity as (position)   
 Signature: \_\_\_\_\_  
 Date:

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**PART 2: REGULATORY AND COMPLIANCE**

## TAX RESIDENCY SELF-CERTIFICATION FORM — ENTITY

Tax Regulations require Societe General Ghana PLC (hereinafter called 'SG Ghana') to collect and report certain information about the Entity associated with a financial account. The term 'Tax Regulations' refers to regulations created to enable the automatic exchange of information and includes the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information ('CRS'), as implemented in the relevant jurisdictions.

To enable SG Ghana to comply with its reporting obligations, you are required to provide information about the Entity's tax residence, tax identification numbers, classification under the Tax Regulations and details about controlling persons (where applicable).

Please be advised that in certain circumstances (including if we do not receive a valid self-certification for the Entity), we may be required to disclose information on the Entity's account (including but not limited to details about the legal entity, the beneficial owners and controlling persons, as well as transactional and other financial account information and/or documentation) to any government, regulatory body, agency, tax authority or other relevant authority to comply with regulatory obligations as implemented under local law.

Please note:

- You are required to provide the Entity classification under all sections of this form, i.e. for the purposes of all two reporting regulations, regardless of whether the same entity classification applies.
- The term "Entity" means a legal person or a legal arrangement such as a corporation, a partnership, a trust, a foundation and branches which are treated as "Entities" under the Tax Regulations. A branch includes a unit, business or office
- **Please refer to the instructions** for the related definitions of each field
- **Do not use this form if the account holder is an individual.** Instead, please complete the 'Tax residency self-certification form — Individual'.
- SG Ghana is not allowed to fill this form on your behalf. If you have any questions on how to complete this form, how to determine the Entity's tax residence or how to classify the Entity under each section, you should consult with your tax or legal advisor.

Mandatory\*

**Section 1: Entity details**

**i.** Legal Name of Entity Branch (in full)\*

**ii.** Country of incorporation or organization:

**Section 2: Current Permanent Residence Address**

2.1 Entity's current permanent residence address \*

Line 1 (e.g. Number and Street)

Line 2 (e.g. Town/City)\*

Country\*

2.2 Entity's mailing address (if different from above):

Line 1 (e.g. Number and Street)

Line 2 (e.g. Town/City/)

Country

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**Section 3: Country of Residence for Tax Purposes**

3.1 Entity's country of residence for tax purposes\*:

3.2 Does the country of tax residence issue a TIN (Tax Identification Number) \* to its entities?

 YES NO

If yes,

3.3 I further certify that the TIN in the country of residence is\*

3.4 Or I am otherwise unable to provide a TIN (tick box if relevant)

Please provide the reason why the TIN is unavailable:

3.5 Confirmation of Sole Residency for Tax Purposes:

I further certify that the account holder is not resident in any other country for tax purposes

(If ticking this statement please proceed to Section 4 otherwise please proceed to Section 3.6 of this form.)

3.6 Additional Countries of Residence for Tax Purposes (if applicable)

I certify that in addition to the country set out in Section 3.1 the Entity is tax resident in the following countries and the Entity's TIN in each additional country is set out below or I have ticked the box to indicate that a TIN is unavailable (use a separate sheet if the Entity is tax resident in more than four additional countries).

Country*	<input type="text"/>	TIN*	<input type="text"/>	Or TIN Unavailable	<input type="checkbox"/>
Country*	<input type="text"/>	TIN*	<input type="text"/>	Or TIN Unavailable	<input type="checkbox"/>
Country*	<input type="text"/>	TIN*	<input type="text"/>	Or TIN Unavailable	<input type="checkbox"/>
Country*	<input type="text"/>	TIN*	<input type="text"/>	Or TIN Unavailable	<input type="checkbox"/>
Country*	<input type="text"/>	TIN*	<input type="text"/>	Or TIN Unavailable	<input type="checkbox"/>

If you have ticked the boxes above, please provide the reason why the TIN is unavailable

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#### Section 4: Entity's classification under OECD CRS

Please tick the on/y relevant box that applies.

##### 4.1 If the Entity is a Financial Institution, please tick the relevant box that applies:\*

- i** Reporting Financial Institution
- ii** Non-Reporting Financial Institution

##### 4.2 If the Entity is a Non-Financial Entity ('NFE'), please tick the relevant box that applies:\*

- i** Active NFE — Publicly traded NFEs and related entities, Governmental entities, Int. organizations, central banks or their wholly owned entities
- ii** Active NFE — Other
- iii** Passive NFE — Non active NFE (please complete Section 5)
- iv** Passive NFE — Investment entity that is not a Participating Jurisdiction FI 1 (please complete Section 5)

**Section 5: Passive NFE Controlling Persons**
**5.1 Controlling Persons information of non-resident persons for CRS**

Please list below each Controlling Person (or Beneficial Owner) information for non-resident person for CRS, confirming ALL countries of tax residence and ALL Tax Identification Numbers for EACH Controlling Person

Or by checking this box, I clarify that I have attached self-certifications forms executed by controlling persons of the entity identified in this form

	<b>Controlling Person 1</b>	<b>Controlling Person 2</b>	<b>Controlling Person 3</b>	<b>Controlling Person 4</b>
Full Name“ (First and last name)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth“ (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full Address“(House No, Street, City, Country, Post Code)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country(s) of Tax Residence(s)“(Do Not Abbreviate)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Associated TIN(s) or reason of unavailability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please note that if the related jurisdiction becomes a Participating jurisdiction, the status of the entity will automatically be charged to Reporting F1. Therefore, a new self-certification may be requested.-

Type of Controlling Person“ (please see instructions)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Please attach additional sheets "if necessary.

**Declaration\***

- I confirm that all information and statements made in this form are to the best of my knowledge and belief, correct and complete. I confirm the details of each non-resident controlling person have been correctly completed when applicable.
- I authorize SG Ghana to provide a copy of this self-certification, filled out and transmitted by me or by any controlling person of the entity, or any other information necessary for establishing my tax status to any competent tax authority, any authority empowered to audit or control SG Ghana for tax purposes as well as any entity, which, at the

time of disclosure, belongs to the Société Générale Group.

- I agree that any information contained in this self-certification including information on controlling persons and any information regarding his/her current and future financial account(s), including their balance(s) and income revenues transactions, may be reported to (i) any authority to which SG Ghana is required to provide tax-related information, (ii) any other parties SG Ghana considers as relevant in order to comply with the applicable CRS regulation and to prevent its potential violation and (iii) any entity to whom SG Ghana decided to entrust all or part of its CRS reporting obligations, including any company that, at the time of disclosure, belongs to the Société Générale Group
- I agree that I will submit a new self-certification form to SG Ghana within 90 days if any information on this self-certification form changes or becomes incorrect including for controlling persons
- I will inform each beneficial owner of the entity (current and future) of the requirements under CRS legislation. I will guarantee to SG Ghana that I obtained the express consent of such persons, in compliance with all applicable regulations regarding the protection of personal data and/or professional secrecy, so that information concerning them referred to in 5.1, their links (direct or indirect) with the entity and any relevant information or documentation under CRS, can be collected and transmitted to the above-mentioned authorities and entities. I undertake to submit to the SG Ghana, upon its first request, those consents

I certify that I am the Account Holder (or authorized to sign for the Account Holder) of all the accounts to which this form relates

By checking this box, I certify that I have capacity to sign for the Entity identified in this form

Sign Here\*

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Print Name:

Capacity Title:

Date (DD.MM.YYYY)\*

**Société Générale - Sanctions Questionnaire**

Directions: Please complete this due diligence questionnaire and return to your contact at SG. Alternatively, you may respond to these questions via email or by representation letter. The sanctions due diligence information must be provided by a senior officer with sufficient knowledge of the entity's global operations in order to respond appropriately (e.g., CFO, CEO, Compliance Officer, General Counsel, etc.). For Banks or Money Services Business, this questionnaire has to be signed by an authorized person within your organization (e.g. a senior representative of an independent control function, such as Compliance, Legal or Audit).

Please also note that this Questionnaire may be shared with any other entity of Société Générale Group, for the exclusive purpose of fighting money laundering and terrorist financing. By signing this Questionnaire, you expressly agree to this sharing. Société Générale took all necessary security measures to ensure the confidentiality of the information transmitted through this Questionnaire.

**Legal Name of Client and identification information:**

Company (Entity) Name :	<input type="text"/>	(please precise which entities of the group are covered by this questionnaire):
Client Address:	City:	<input type="text"/>
State/Provinces:	<input type="text"/>	Country: <input type="text"/>
Tax Identification Number, Legal Entity Identifier or other identification number (if applicable):	<input type="text"/>	
SG Relationship Manager Name:	<input type="text"/>	

**Questionnaire:**

Preliminary Question: Does the client (and any entity concerned by this questionnaire) have an international activity?  Yes  No

If the answer is No, there is no requirement to fulfill the questions below.

1. Are you or any of your subsidiaries, joint ventures, directors or officers the target of any economic or financial sanctions?(1)  Yes  No

If Yes, Provide Details:

2. Are you or any of your subsidiaries or joint ventures located within or operating from any countries subject to US comprehensive sanctions? (2)  Yes  NO

1. Sanctions imposed by Office of the Foreign Assets Control (OFAC), the European Union (EU) or the United Nations Security Council (UNSC)
2. As per group Policy Countries subject to comprehensive sanctions: As of April 05” 2019, this includes Cuba, Iran, North Korea, Sudan, Syria and the Crimea Region
3. “Indirectly” refers to any dealing that a client has with a party, country or territory through a third party. Examples includes selling to an intermediary known to then export products to a country under US comprehensive sanctions.
4. “Sanctioned Person” means any person who is a designated target of Sanctions or is otherwise a subject of Sanctions (including without limitation as a result of being (a) owned or controlled directly or indirectly by any person which is a designated target of Sanctions, or (b) organized under the laws of, or resident, any country that is subject to general or country-wide Sanctions).

3. After careful review and to the best of your knowledge, are you or any of your subsidiaries or joint ventures engaged in transactions, investments, business or other dealings that directly or indirectly (3) involve or benefit any countries subject to US comprehensive sanctions (2) or any person or entity which is the target of any Sanctions (“Sanctioned Persons”(4))?  Yes  NO

**4. If the answer to Question 2 or 3 is Yes,**

The list of subsidiaries or joint ventures concerned by Yes responses must be provided and following questions must be answered distinctly for all entities in relationship with SG (including the client itself)

- |    |  |  |
|----|--|--|
| a) | Please explain and detail what percentages of sales and/or purchases involve each country subject to US comprehensive sanctions or Sanctioned Person.  |  |
| b) | Please explain if there is an intention to expand the scope of the activity  |  |
| c) | Please confirm that you will not directly or indirectly use any Société Générale account, relationship or service to conduct, facilitate or route any funds related to activity with any countries subject to US comprehensive sanctions or Sanctioned Person. |  |
| d) | Please explain the controls that you have in place to ensure the activity related to any countries subject to US comprehensive sanctions or Sanctioned Person does not directly or indirectly involve any Société Générale account, relationship or service.   |  |

**Respondent Information:**

**Signature:** \_\_\_\_\_

Full Name:		Position:		Date:	
Phone:		E-Mail:			

**PART 3: PRODUCTS AND SERVICES**
**ACCOUNT SERVICE REQUIRED**
**A. Account Statements**

Account statements are sent monthly by email as password -protected pdf attachments, unless otherwise specified. Please provide up to two email addresses which should receive statements and mobile number to receive your password. (Passwords are communicated by SMS)

Email	1.	<input type="text"/>
Email	2.	<input type="text"/>
Mobile No.		<input type="text"/>

Hold Statement at my branch

B. **Cheque Book**                      Open Cheque                            Crossed Cheque     

No. of leaves                            25 leaves                            50 leaves                            100 leaves     

Cheque+ confirmation will you like to pre-confirm your cheques?                       Yes                       No

If yes, please specify the threshold:

**C. Online Banking- Sogecashnet**

Please complete the Sogecashnet subscription forms to enable us set you up for online banking

**Users Registration**

	USER 1	USER 2
Name:	<input type="text"/>	<input type="text"/>
Telephone:	<input type="text"/>	<input type="text"/>

Email:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Access to Account	<input type="radio"/> All accounts <input type="radio"/> Selected account <input style="width: 150px; height: 20px;" type="text"/>	<input type="radio"/> All accounts <input type="radio"/> Selected account <input style="width: 150px; height: 20px;" type="text"/>
Grant Access To	<input type="checkbox"/> VIEWING check to enable user to view account information and download statements <input type="checkbox"/> KEYING check above to enable user key all types of transactions. Otherwise check the specific transactions from below <input type="checkbox"/> Keying domestic transfers <input type="checkbox"/> Sending domestic MT101 transfer files <input type="checkbox"/> Keying international transfers <input type="checkbox"/> Sending international MT101 transfer files	<input type="checkbox"/> VIEWING check to enable user to view account information and download statements <input type="checkbox"/> KEYING check above to enable user key all types of transactions. Otherwise check the specific transactions from below <input type="checkbox"/> Keying domestic transfers <input type="checkbox"/> Sending domestic MT101 transfer files <input type="checkbox"/> Keying international transfers <input type="checkbox"/> Sending international MT101 transfer files
Transfers Signing	<input type="checkbox"/> Keving beneficiary details <input type="checkbox"/> No right to validate (keving only) <input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory <input type="checkbox"/> Joint signatory with User <input style="width: 80px; height: 20px;" type="text"/> enter the User number of other joint signature For example, enter 2 if User 1 must sign jointly with User 2 Maximum amount per single transfer: <input style="width: 80px; height: 20px;" type="text"/>	<input type="checkbox"/> Keving beneficiary details <input type="checkbox"/> No right to validate (keving only) <input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory <input type="checkbox"/> Joint signatory with User <input style="width: 80px; height: 20px;" type="text"/> enter the User number of other joint signature For example, enter 2 if User 1 must sign jointly with User 2 Maximum amount per single transfer: <input style="width: 80px; height: 20px;" type="text"/>
Beneficiary Signing	<input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory	<input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory
	<b>USER 3</b>	<b>USER 4</b>
Name:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Telephone:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Email:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Access to Account	<input type="radio"/> All accounts <input type="radio"/> Selected account <input type="text"/>	<input type="radio"/> All accounts <input type="radio"/> Selected account <input type="text"/>
Grant Access To	<input type="checkbox"/> VIEWING check to enable user to view account information and download statements <input type="checkbox"/> KEYING check above to enable user key all types of transactions. Otherwise check the specific transactions from below <input type="checkbox"/> Keying domestic transfers <input type="checkbox"/> Sending domestic MT101 transfer files <input type="checkbox"/> Keying international transfers <input type="checkbox"/> Sending international MT101 transfer files <input type="checkbox"/> Keying beneficiary details <input type="checkbox"/> No right to validate (keying only) <input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory <input type="checkbox"/> Joint signatory with User <input type="text"/> enter the User number of other joint signature For example, enter 2 if User 1 must sign jointly with User 2 Maximum amount per single transfer: <input type="text"/>	<input type="checkbox"/> VIEWING check to enable user to view account information and download statements <input type="checkbox"/> KEYING check above to enable user key all types of transactions. Otherwise check the specific transactions from below <input type="checkbox"/> Keying domestic transfers <input type="checkbox"/> Sending domestic MT101 transfer files <input type="checkbox"/> Keying international transfers <input type="checkbox"/> Sending international MT101 transfer files <input type="checkbox"/> Keying beneficiary details <input type="checkbox"/> No right to validate (keying only) <input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory <input type="checkbox"/> Joint signatory with User <input type="text"/> enter the User number of other joint signature For example, enter 2 if User 1 must sign jointly with User 2 Maximum amount per single transfer: <input type="text"/>
Transfers Signing	<input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory	<input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory
Beneficiary Signing	<input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory	<input type="checkbox"/> Sole validator <input type="checkbox"/> First level signatory <input type="checkbox"/> Second level signatory

Complete as many copies of this page for the number of Sogecashnet users concerned

**OTHER BANK ACCOUNTS IDENTIFICATION**

Complete this section if you want to access your accounts held with other banks. You will also need to instruct your bankers to send MT 940 statements on your accounts to SG Ghana Sogecashnet

**Accounts held in other Banks (1)**

 BIC Code of the Bank

Local Bank Code	<input type="text"/>				
Account Number	<input type="text"/>	Currency	<input type="text"/>		
Account Name	<input type="text"/>				
Authorized Users on Account	<input type="checkbox"/> User 1	<input type="checkbox"/> User 2	<input type="checkbox"/> User 3	<input type="checkbox"/> User 4	<input type="checkbox"/> User 5
	<input type="checkbox"/> User 6	<input type="checkbox"/> User 7	<input type="checkbox"/> User 8	<input type="checkbox"/> User 9	<input type="checkbox"/> User 10

**Accounts held in other Banks (2)**

BIC Code of the Bank	<input type="text"/>				
Local Bank Code	<input type="text"/>				
Account Number	<input type="text"/>	Currency	<input type="text"/>		
Account Name	<input type="text"/>				
Authorized Users on Account	<input type="checkbox"/> User 1	<input type="checkbox"/> User 2	<input type="checkbox"/> User 3	<input type="checkbox"/> User 4	<input type="checkbox"/> User 5
	<input type="checkbox"/> User 6	<input type="checkbox"/> User 7	<input type="checkbox"/> User 8	<input type="checkbox"/> User 9	<input type="checkbox"/> User 10

Date:

Authorized signature 1

Authorized signature 1


**PART 4: TERMS AND CONDITIONS**
**1.) DEFINITIONS**

- a. 'Account holder' means a person (natural or artificial) who holds and maintains an account with the Bank.
- b. "The Bank" means Societe Generale Ghana PLC
- c. "Account" means a Bank account of any type opened and maintained by a customer.
- d. I/We refers to the account holder/s
- e. 'You/Your' refers to the account holder/s

**2.) ACCOUNTS**
**2.1) Fixed deposit Account**

The bank may permit the withdrawal of funds from a fixed deposit account before maturity. You accept that in such instances you shall forfeit all accrued interest and shall be liable to pay any charges or penalties we shall impose.

**2.2) Bank accounts are not transferrable.**
**3.) DEPOSITS**

- a. The Bank will accept for deposit to your account all cash, cheques and other items payable to you.
- b. The proceeds of cheques and other similar items deposited will only be available as cash after the clearing cycle has been completed.
- c. In the normal course of business, the Bank is unable to process postdated cheques.

**3.1) Deposits reversed**

- a. The Bank will debit your account with the amount of any cheque or other item deposited that is unpaid/returned. Your account will be debited with bank charges associated with these unpaid items. Details of such charges are available in our tariff guide.
- b. The Bank will debit your account with the amount of any cheque or other item deposited in your account to which you are not entitled and may pay the amount to the owner thereof, whether your account is in credit, or debit, and we will advise you of our action taken.

**3.2) Payments**

- a. The Bank will make payments from your account on your instructions if there are sufficient funds available.
- b. By arrangement, you may instruct us by means of computer or other electronic equipment to make payments from your account and we will debit your account whether in credit or not with the amounts concerned.

**3.3) Stopping Payments**

- a. You may stop payment of a cheque you have issued before it is presented for payment unless the bank has made a commitment to pay it.
- b. The Bank may accept stop payments of debit orders (eg. standing orders, cheques...) but the responsibility lies on you to cancel the underlying contract and you shall indemnify the Bank against any legal action arising out of such cancellation and non-payment of the debit order.

**3.4) Interest**

- a. The Bank will charge you interest on any overdrawn balances and we shall inform you of the applicable rate of interest charged, upon request.
- b. The Bank will charge you for various services provided, details of such charges can be found in our tariff guide which is available in the banking halls.
- c. The Bank may vary charges and interest rates from time to time, but will give you reasonable notice of such changes before they come into effect by putting notifications in our banking halls and the use of any other means reasonable.

**3.5) Overdraft**

- a. If your account is overdrawn without any suitable arrangement; the Bank may transfer money to it from any other accounts held by you to set off.
- b. The Bank may demand payment of all amounts owing by you at any time.
- c. A document signed by a manager of the Bank containing details of such an amount, including interest, owed by you will be sufficient proof thereof unless the contrary is proved.
- d. The Bank may take legal action against you in an appropriate Court of Law to recover any monies owed by you.

- e. You shall be responsible for payment of all our reasonable expenses in recovering any amounts you owe us including legal fees of an attorney.
- f. You may formally request for an Overdraft from your Branch or Relationship manager which request will be subject to the Bank's credit policy. Access to the Overdraft and Overdraft renewal shall also be subject to the Bank's credit policy.

**4.) ACCOUNT SERVICES**

**4.1) Statements**

- a. The Bank will provide you with statements of your account according to the frequency and medium of delivery you choose.
- b. Apart from the stated frequency of quarterly (for current account), or half-yearly (all other adhoc) requests for printed statements shall be at a fee stated in the banks tariff guide.
- c. You shall advise us within 30 days of receipt of the statement, of any entry you regard as incorrect
- d. If you fail to notify us timeously of forged or unauthorized entries on your account and these results in losses taking place, the Bank reserves the right to refuse to refund the losses to you, provided that we have not been negligent or breached our duty of care.

**4.2) Cheque book**

- a. You agree to exercise the utmost care in handling any cheque book and any cheques given you by the bank.
- b. You also agree to ensure the following:
  - i. That all uncompleted cheque forms are kept in safe custody at all times;
  - ii. That the Bank is informed immediately upon discovery by you that any cheque book or any cheque forms has been stolen, lost or mislaid.
  - iii. That any person issuing a cheque is authorized to do so.
  - iv. That any cheque is prepared and signed in ink or other indelible writing material.
  - v. That the amount on a cheque is written in such a manner as to prevent any unauthorized addition of letters or figures.
  - vi. That any issued cheque and any alteration is signed by an authorized signatory.
  - vii. That no uncompleted cheque is given to any stranger or other person when you do not have reasonable grounds for believing that person to be trustworthy.
  - viii. Upon closure of your account you will return to the Bank any remaining uncompleted cheque forms relating to that account.
  - ix. That you will properly handle your cheque book and follow the instructions on filling it out, i.e. not writing below specified lines, not folding or crumpling the cheque.
- c. The Bank will not be held liable for losses arising from unauthorized alterations to cheques which are not readily detectable.
- d. You will be notified of all returned cheques in order for you to pick up from the Branch. If you fail to pick up within three days, the cheque(s) will be sent to your last known address by registered post.

**4.3) Branch Safe custody**

The Bank receives at its Branches, customer owned articles for storage or safekeeping. These are governed by the following terms:

- a. The article must be received from an account holder of the Bank.
- b. We shall not be liable for any damage to or loss of the article through any cause howsoever caused unless we are proven to have been negligent and did not exercise due care.
- c. The Bank undertakes to exercise reasonable care in storing the article and in ensuring that no unauthorized person has access thereto;
- d. The Bank shall have a lien over any article deposited with the Bank for storage and/or safe keeping for any outstanding charges payable to the Bank on account of the service provided by the Bank for the storage or safekeeping of such article. The Bank is hereby authorized to open any package or envelope containing the article and to exercise in respect of the article such rights as the Bank is permitted by these General Terms and Conditions to exercise over any property over which the Bank has a lien;
- e. The Customer shall certify that any articles/packages deposited with the Bank do not contain any weapon, firearm or other explosive device, perishable items, liquids, items prohibited by law (drugs), legal tender and the likes.
- f. In the event that we have reason to suspect that the articles/packages contains any of the prohibited items, we shall have the right to open such packages and dispose of them/ report to the law enforcement agencies.
- g. In the event of the death of a Customer the Bank will release any article deposited by the Customer to the Customers administrators or executors with a certified copy of the Customer's Death Certificates and a valid grant of probate or letters of administration, as the case may be and only upon payment of all outstanding charges due to the Bank in respect of the storage or safe keeping of such articles. If you wish to use our Safety Deposit Box Service, additional terms and conditions which govern the service will be made available at the time of subscription.

#### 4.5) Bank Charges and Rates

- a. Bank charges and rates available in the Bank's tariff guide which is available in all Societe Generale Ghana PLC Branches and/or the Bank's website. Charges and rates are subject to change and the tariff guides shall be duly updated with any such changes for your information. Where applicable, such charges or rates would be subject to Value Added Tax(VAT)
- b. All charges and rates shall be deducted from the Customer's Account.

#### 5.) ACCOUNT AND ACCOUNT SERVICES CLOSURE

- a. We will close your account on receipt of a request in writing signed by you to do so, but the closure will only be effective after you have returned any unused cheques and all uncleared cheques or other items deposited have been paid.
- b. You may upon written request to us instruct us to stop providing other account services to you without closing your account and the Bank would stop providing the said services to you. This will however not preclude you from fulfilling any obligations you may have accrued towards us when the service was being provided.
- c. Upon termination, fees due and already charged shall not be refunded.

- d. We will on our own volition close your account or stop offering any/a particular account service(s) to you upon giving reasonable prior notice to you using your given address and we shall not be obliged to give reasons for such action.

#### 6) BANK'S RIGHTS

- a. Right of Lien
  - i. The Bank shall have a general lien over all of your assets in its possession, including but not limited to cash, goods, valuables, negotiable instruments and movable and immovable property used as security for repayment of money whether that money has been repaid or not.
  - ii. The Bank may realize the assets to offset the debt owed by you only after having given you reasonable notice of our intention so to do and you have not within the period of notice discharged your debt.
  - iii. If the Bank proceeds to realize the property under (ii) of this clause, you hereby irrevocably appoint us as your attorney for the purpose of realization and shall do all things necessary for the effective realization of the assets. Any surplus funds shall be held on your account subject to the general terms and conditions.
  - iv. Funds in your fixed deposit (local or foreign currency) may be used to set off your debt regardless of the fact that it has not reached its maturity period.
  - v. Funds in foreign account may also be used to offset your debt and shall be realized at the rate of exchange applicable. We shall not be liable for shortfalls caused by exchange rate fluctuations.
  - vi. The Bank shall not be responsible or liable in anyway for the outcome of a realization unless it can be shown that we acted in bad faith.
- b. Right of Set off
 

In consideration of the Bank providing you with banking/- financial service and other facilities, you agree that in addition to any other general lien or similar right to which we as Bankers may be entitled by law, the Bank may at any time and without notice to you combine or consolidate all or any of your accounts with/and liability to the Bank and set off or transfer any sum or sums standing to the credit of any one or more of such accounts in or towards satisfaction of any of your liabilities to the Bank on any other account or in any other respect whether such liabilities be actual or contingent, primary or collateral and several or joint.
- c. Other Rights
  - i. Any waiver or concession the Bank may give you will not affect any of the bank's other rights against you.
  - ii. The Bank's right to receive payment from you shall not be affected by any disputes between you and a supplier
  - iii. You must pay all the Bank's expenses in recovering any outstanding amounts you owe the Bank.

#### 7.) AML/CFT/P COMPLIANCE AND FRAUD PREVENTION

- a. In accordance with the Anti-Money Laundering Act, 2020, (Act 1044) together with any modification or re-enactment thereof, the Bank shall ascertain the source and usage of funds to protect both the Bank

and the Customer's interest. The Bank reserves the right to refuse a transaction where the source and/or the purpose cannot be verified or justified.

- b. You consent to the Bank carrying out identity and fraud prevention checks and sharing information relating to this application with the Economic and Organized Crime Office ("EOCO"), Financial Intelligence Center or relevant Law Enforcement Agencies. Should your account conduct at any time in the future reasonably cause the Bank to suspect that your accounts are being used for improper purposes; the Bank shall provide details of this suspicion to the afore-mentioned agencies. You understand and agree that the record of this suspicion will then be available to other members of these agencies if they carry out checks in your name.
- c. **Additional information and intra group disclosure**  
Any request for an operation or any operation realized by the client and which appears unusual as regards its amount and/or its complexity may be subjected to a request for additional information. The client expressly accepts that, for the purpose of management of all its requests or operations, information can be communicated to Société Générale and/or to one of its specialized subsidiaries located in France or abroad and hereby consents to such communication. The client recognizes that, if necessary, the bank can refuse to carry out its request or to execute its operation.

#### 8.) PERSONAL DATA

Personal data: The personal data collected in this document are compulsory to allow SG Ghana to determine with precision the status and the qualification of your fiscal status in accordance with any applicable regulation. These data, as well as those collected later, are protected by the Data Protection Act 2012 (Act 843), and the Banks and Specialised Deposit-Taking Institutions Act, 2016, Act 930 and may be used by SG Ghana for the management of the customer relation, and in particular for risk management, incident and fraud prevention, Know your customer and anti-money laundering purposes. These personal data may not be used by the Bank for direct marketing. They may, as expressly agreed upon and to the extent necessary to achieve the above purposes, be disclosed to other legal entities of the Société Générale Group, as well as, to competent authorities as fiscal authorities. These transfers take place under conditions and guarantees offering appropriate protection of your personal data. You may access your personal data and obtain rectification or erasure of incomplete or inaccurate data. You may also object on legitimate grounds to the processing of your data. Your rights may be exercised by applying to the service where your account is opened.

#### 9.) EMAIL INDEMNITY

- i. The Client shall provide the Bank with an e-mail address from which the Bank can accept instructions.
- ii. The Client may by written instructions as per the account mandate be entitled to amend or withdraw the aforementioned email address.
- iii. The Client hereby agrees that where the Bank receives instructions from an e-mail address that is different from the bank's records it shall not honour the instructions.
- iv. The Client agrees that all e-mail instructions received by the Bank shall be deemed to be given by the Client and the Client

shall be stopped from pleading or maintaining against the Bank that any instructions issued to it in accordance with these terms have been issued without the Client's authority.

- v. The Client shall indemnify and keep the Bank indemnified from and against all liabilities in respect thereof and against all action suits, proceedings, claims, demands, cost and expenses whatsoever which may be taken or made against the bank as a result of the Bank agreeing to allow the arrangements contained in this form.
- vi. The Client hereby agrees to adhere to procedures and/or restrictions imposed by the Bank with regard to issuance of e-mail instructions to the Bank.
- vii. The indemnity and all future transactions shall be governed by the laws of Ghana and the Bank's policies and procedures.
- viii. The Bank shall not be liable to the Client or any other person where:
  - The Client's emails are not received by the Bank
  - The Client's hardware, software or Intranet Provider is not functioning properly.
  - Unforeseen circumstances prevent the execution of a request by the Bank despite any reasonable precautions taken by the Bank. Such circumstances may include, but are not limited to acts of God, power outages, fire, flood, theft, equipment breakdowns, internal mechanical malfunction, legal interception or the Bank's system delays or failure.

#### 10.) CONSENTS AND AUTHORISATIONS

- a. **Credit Reference/Credit Reporting**  
The account holder hereby consents and authorizes the Bank to:
  - i. Submit information on credit transaction of the account holder with Societe Generale Ghana PLC to Credit Bureau licensed under the credit reporting Act 2007
  - ii. Obtain credit reports on the account holder from a Credit Bureau under this Act for purpose of credit management
- b. **Foreign Account Tax Compliance Act (FATCA)**
  - i. The Bank is a subsidiary of Societe Generale, which is registered as a participating financial institution under FATCA.
  - ii. You hereby consent to the Bank ascertaining your FATCA status and forwarding information on your account to the United States Internal Revenue Service.
- c. **Third Party Reference**  
You consent to the Bank checking by reference to third parties the correctness of details given in the application form you have completed for opening of the account.
- d. **Intra-Group Disclosure.**  
You consent and authorize the Bank to submit any information held by it on you with its Parent Company, Societe Generale S.A, or any of the subsidiaries within the Societe Generale Group.

#### 11.) BANK SECRECY/ CONFIDENTIALITY/ DATA PROTECTION

- a. The Bank will treat all your personal information as private and confidential. Nothing about your accounts or your personal details will be disclosed to anyone, other than disclose made at your request or consent and in exceptional circumstances permitted by law.

- b. The Bank will use all reasonable endeavors to ensure that all your information regarding all Banking and Financial services provided to you is kept confidential and is not disclosed to any third party.
- c. The Bank shall ensure that in keeping your data, the provisions of the Data Protection Act, Act 843, 2012 are strictly adhered to.
- d. The Bank is however authorized to disclose information if that disclosure:
  - i. Is to the Bank's agent who, in our reasonable opinion, requires access to your information to ensure the proper operation or provision of services;
  - ii. Is made to the relevant authority where we are obliged under a statute, regulation, directive or court order to disclose the information;
  - iii. Is made in the course of the provision by SG-GHANA Limited of any Service in accordance with this Agreement and any other related Agreements you may enter into with us regarding the provision of services.

**12.) AMENDMENT/ VARIATION OF THE TERMS AND CONDITIONS**

- a. The Bank may at any time amend/vary these terms and conditions and give notice of such amendment to customers. Notice of amendment may include putting up notices in the Banking hall and on our website.
- b. An amendment/variation will not constitute a cancellation of this agreement. You are not allowed to vary any of these terms.

**13.) ADDRESSES FOR NOTICES**

The address you supply on your account opening form will be regarded as your chosen address where all notices may be given and documents in legal proceedings may be served. You must notify the Bank in writing immediately your chosen address changes and cause your KYC details to be updated.

**14.) FORCE MAJEURE**

The Bank shall not be liable to the Customer or be deemed to be in breach of the contract by reason of any delay in performing, any failure to perform, any of its obligations under these General Terms and Conditions if the delay or failure was due to any cause beyond the Bank's control. Without prejudice to the generality of the foregoing, the following shall be regarded as causes beyond the Bank's control: acts of God, national emergency, war, prohibitive governmental action, riots strikes, civil disturbance, storm, fire, flood, earthquake, terrorists' activities and bomb explosion.

**15.) APPLICABLE LAW AND JURISDICTION**

- a. These General Terms & Conditions and any agreement in relation to them shall be constructed and governed in all respects by and in accordance with the Laws of Ghana and the Customer irrevocably submits to the jurisdiction of the Ghanaian courts.
- b. Notwithstanding what is stated herein above, the Bank may bring any action against the customer in relation to the Customers' accounts(s) before the courts of any other jurisdiction as it deems fit and nothing shall preclude the Bank from taking any such action or proceeding against the Customer in one or more jurisdiction either concurrently or not.

**16.) DECLARATION**

I/  
We...../.....  
..... understand and agree that:  
The account is opened and operated in accordance with the directives laid down by its statutory regulators (Bank of Ghana) from time to time. I/We confirm having received and read the general terms and conditions governing the accounts and agree to comply with them/any other rules that may be in force from time to time.  
I/We confirm having read the Societe Generale Ghana PLC tariffs by which we agree to abide.  
I/We also understand that tariffs are subject to change without prior notice to us.  
I/We hereby agree that Societe Generale Ghana PLC shall share all the information about my/our account/ deposits with its group companies and Credit Reference Bureaus.  
I/We authorize Societe Generale Ghana PLC to deduct/debit my/our Account with any charges as the law may require.  
The declarations given in this form by me/us are true and I/We shall be held responsible for same at all time.

Name:	<input type="text"/>	Signature:	-----
Date:	<input type="text"/>		
Name:	<input type="text"/>	Signature:	-----
Date:	<input type="text"/>		