** seYU SRD- TRINITY SACCO LTD.**

**Kasese (u)**

[**Email.srdsacco@gmail.com**](mailto:Email.srdsacco@gmail.com)**. Tel: 0774071933/0784984682/0702309161**

**ACCOUNT OPENING FORM**

**(Group/JOINT /Church/ institutions)**

**FOR OFFICIAL USE ONLY**

Branch Name. Branch Id.

Client Id. Date:

**ACCOUNT TYPE**

Easy save account Sunday school Account (Minor) Individual Account

Groups/Registered Entities Savings Account Others (specify)……………………………

**PRODUCT FEATURES**

I/We wish to open (a) savings account(s) at SRD Trinity Sacco and undertake to comply, observe and be bound by the Savings account terms and conditions in force from time to time governing the operation of the account(s) with the Sacco.

Account Name:

**Applicant (One) Principle**

First name: Middle name

Last name: Designation:

Photo

Nationality:

Nin No/ Passport No.:

Issued by Expiry date:

Address 1

Occupation: Phone:

Email: residency:

**Applicant (Two) Signatory**

First name: Middle name

Last name: Designation:

Photo

Nationality:

Nin No/ Passport No.:

Issued by Expiry date:

Address 1

Occupation: Phone:

Email: residency:

**Applicant (Three) Signatory**

First name: Middle name

Last name: Designation:

Photo

Nationality:

Nin No/ Passport No.:

Issued by Expiry date:

Address 1

Occupation: Phone:

Email: residency:

**REGISTERED ENTITY DETAILS**

Name of registered entity

Nature of Business

Registration No. Date of registration

Postal Address Code Town

Registered office physical location

Tel. Office Mobile

Do you have any other account with Sacco? Yes No.

If yes give details

|  |  |  |
| --- | --- | --- |
| **Account** | **Bank** | **Branch** |
|  |  |  |

**Account mandate/ Signature authority**

Single Both to sign Principle and any one Signatory

Any two to sign Others (specify)

I/we instruct the Sacco to pay the interest as provided in savings account terms and conditions to my A/C No. cash/ cheque credit the above account.

**Declaration**

I /we confirm that the information I/we have given and disclosures made are true and i/ we have read and understand the savings account terms and conditions of the Sacco observe and bound by them.

I/ we the undersigned confirm that we have read and understood the terms and privacy policy and hereby give express, free and informed authority to SRD Sacco to collect, use, process my own data as per the policy provided by [srdsacco@gmail.com](mailto:srdsacco@gmail.com).

|  |  |  |  |
| --- | --- | --- | --- |
| **Name in Block letters of Authorized signatories** | | **National id/ passport no** | **signature** |
| **Applicant 1 (Principle)** |  |  |  |
| **Applicant 2 (Signatory)** |  |  |  |
| **Applicant 3 (Signatory)** |  |  |  |

**For official use only**

Opened by; Name Sign Date

Verified by name: Sign Date

Branch Id:

System Generated Number: (CSGN)

Checklist for account opening

Registration certificate copy group minutes

PIN certificate of company copy of directors pin

Group registration copy group constitution

Specimen signature obtained Copy of Id/ passport.

Board resolution (Minute) Photo taken, and signature scanned.

Minors Birth certificate Application details completed.

**SAVINGS ACCOUNT TERMS & CONDITIONS**

For the purpose of these Terms and Conditions “SRD Trinity Sacco” shall refer to South Rwenzori Diocese Trinity Sacco Limited its successors in title and assigns.

2. Any person(s) opening an account with the Sacco (whether Clergy or non- Clergy) will be deemed to have read and understood these Terms and Conditions and the applicable Schedule of Sacco Charges issued and as amended from time to time.

3. These Terms and Conditions, including its schedules shall be available at SRD customer desk.

4. No account shall be opened by the Sacco unless the account opening form is fully completed and the requisite supporting documents attached and attested by the required authorities (if any). Upon submission of duly completed account opening forms, the Sacco will generate an Account Number for the customer in accordance with the Sacco’s policies and procedures on Account Opening. Each account shall possess a distinctive number, which shall be quoted in all correspondence with the Sacco relating to the account.

5. Only valid and acceptable means of Identification (Passport, National Identity Card, Birth Certificate or Registration Certificate) will be required before the Bank opens any account. Any change in the name, address, Registration Certificate (business names) and Certificate of Incorporation (companies) should be immediately communicated to the Sacco in writing.

6. The post office / courier firms and other agents of mail delivery shall be considered agents of the customers for delivery of statements, letters and other related communication. No responsibility shall be accepted by the Sacco for access by third parties, loss, delay or non-delivery of any items sent by post / courier at the request of the customer.

8. The Customer shall be issued with account linked to mobile banking.

9. The Customer shall be limited to the number of withdrawals based on the type of savings account. Failure by the customer to exercise the said right of withdrawal within the prescribed period, the right of withdrawal shall not be rolled over to the next period. If the customer exceeds the said number of withdrawals, the account shall convert to a transactional account for the period when withdrawals are exceeded.

10. Subject to the agreed minimum interest earning balance threshold requirements (if any) or as shall be determined by the Sacco from time to time, interest on savings shall be paid at such periodic intervals as agreed between the Sacco and the customer and shall be calculated based on the lowest balance maintained over the interest period at such rates and as per the guidelines permitted by law.

11. Interest earned shall on due date be paid either into the customer Savings Account, into another account or withdrawn in cash as agreed with the customer.

12. If a due date for payment of interest falls on a public or Sacco holiday, then the Sacco shall pay the interest on the next working day when the Sacco is open for ordinary banking business.

13. Upon the Sacco becoming aware of the demise of a customer, the Sacco will not be obliged to allow any operation or withdrawal from the account by any person except on production of a death certificate and a court order from a court of competent jurisdiction or any other relevant document recognized by law for succession purposes. In case of a Joint Account and one of the account holder(s) dies, then money in the account and any other benefits, interest or obligation relating to that account will revert to the surviving joint account holder(s).

14. The Sacco shall discharge its statutory obligations such as to apply any applicable tax on all charges on customers’ accounts (if any) and effect such orders in respect of the accounts as may be required by any competent authority or agency under the applicable laws without incurring any obligation or liability in respect thereof.

15. Account statements as required by law shall be issued by the Sacco to the customer at such intervals and mode as agreed between the Sacco and the customer. Any additional account statements can be availed to the customer upon request subject to settlement of the applicable charges as per the prevailing tariff guide at the time of request.

16. Account statements issued by the Sacco shall in the absence of manifest error be deemed to be a true and accurate representation of the transactions in the customer’s account.

17. Both the Sacco and the customer shall be at liberty to close the account. The Sacco may close the account in discharge of its obligations under the law.

18. The Sacco shall have discharged its liability with respect to an account, so closed by complying with its obligations under the law or by processing a transfer on instruction from the customer, in the amount of the then credit balance of such account less deduction(s) in respect of the amount of any claim that the Sacco may have on such funds constituting the credit balance.

19. The Sacco may from time to time and at any time revise, amend, delete or supplement any of these Terms and Conditions whether in whole or in part including without limitations the charges levied in respect to its services. Such charges shall be effective from the date specified by the Sacco for such modification. These amendments / alterations shall be notified to the customer / depositor and / or displayed at the Sacco’s premises / website from time to time and, shall be binding on the customer / depositor. The Sacco reserves the right at any time and without notice to impose charges for the use of its services at any time subject to the limits permitted by law.

20. These Terms and Conditions shall be governed by the Laws of Uganda. The parties hereby submit to the exclusive jurisdiction of the Courts of Uganda.

**STANDING ORDER TERMS AND CONDITIONS**

1. the Sacco does not undertake the effect after the due date, any payment which was not affected on the due date owing to lack of funds.

2. the client shall ensure that there are sufficient t funds on the account before the due date to enable the Sacco effect the customer’s standing instruction.

3. The Sacco hereby reserves the rights to council to standing instruction without notice to the customer if the standing instruction has failed and payments not made for the three consecutive times due to lack of/ insufficient funds, the account being blocked and or account being dormant or any other reason(s) which is or are due to acts and or omissions of the customer. The Sacco shall not be liable for such constellations. Failure to execute or insufficient execution of the instruction or any direct and or indirect consequences that may arise from the same.

**ACCOUNT OPENING INDEMNITY CLAUSE.**

1. in consideration of the Sacco allowing me/ us to open or maintain an account with the Sacco, I/ we undertake to hold harmless indemnify and compensate the Sacco in respect of any loss, liability or costs incurred in respect of the maintenance and or operations of the account except where this is solely caused by the gross negligence attributed to the Sacco.

2. i/we hereby agree with the terms and conditions and undertakings given, which I/we have read and understood and confirm that the information supplied is correct to the best of my/our knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name in block letters of Authorized signatories** | | **National ID/ Passport** | **Signature** |
| Applicant 1 (principle) |  |  |  |
| Applicant 2 (Signatory) |  |  |  |
| Applicant 3 (signatory) |  |  |  |

**CERTIFIED TRUE EXTRACT OF MINUTES AND RESOLUTION FOR ACCOUNT OPENING**

NAME OF THE CHURCH/ COMPANY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF THE ARCHDEACONRY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF THE PARISH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We, the undersigned, hereby certify that the following is a true and correct extract of the minutes & resolution of the, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (church council/executive /Board of directors /group executive), (duly kept in the minutes book of the Company) duly passed at a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

of the Company duly convened and held at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(venue) on the\_\_\_\_\_\_ day\_\_\_\_\_\_\_ of 202\_\_\_, at which a quorum of members was present.

**Resolved:**

1. That \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(entity), opens up Bank account with SRD TRINITY SACCO
2. That the authorized account name shall be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. That the following shall be the authorized account signatories

|  |  |  |  |
| --- | --- | --- | --- |
| **NO** | **NAME** | **POSITION** | **HIERARCHY** |
| 1 |  | Chairperson (Rev, LR,H/T) |  |
| 2 |  | Secretary / H Laity |  |
| 3 |  | Treasurer |  |

1. That the mandate of the signatories shall be, (1) SINGLE (2) ALL TO SIGN (3) PRINCIPAL &ONE (4) ANY TWO TO SIGN Others Specify ……………………………………………………………………………………..
2. We hereby further certify and confirm that the foregoing resolution is in full force and effect and constitute valid and binding obligations of the Company, and this resolution has not been amended, varied, canceled or revoked, in whole or in part.
3. **SIGNED AND CERITFIED** as a true and correct record on this \_\_\_\_\_ day, of\_\_\_\_\_\_\_\_ 202\_\_\_, by the following persons for and on behalf of the entity administrators:

**SECRETARY CHAIRPERSON**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tell phone:…………………………….\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tell phone\_.................................\_\_\_

**For SRD TRINITY SACCO Use Only ENTITY OFFICIAL**

**Received by STAMP**