Business Account Application Form



Please complete the application	on in Full:		
New Customer	Existing Customer		
Select the type of Account you Business Transaction Accou			Term Deposit Account
Channels avaliable to this Acco	bunt 🗌 Business Visa I	Debit Card	EFTPOS Merchant Service
ENTITY TYPE			
 Company Limited Association You are required to provide the Company (TIN) or Individual Certificate of Incorporation 	(TIN) Deard Resol	ution 🗌 Certifica	Partnership te of Good Standing ies & Notice of Appointment)
BUSINESS INFORMATION			
Business Entity Name Registered Company Number* Card Name Details Date of Registration Date of Registration Expiry Tax Identification Number* Withholding Tax Exemption Country of Incorporation Incorporation Date Residential Status Business Email Details Business Phone Details Business Physical Address Building Name Street Name	YES NO	Lot	Resident Local Owned Business
Business Contact Details Nature of Business Source of Funds		TOWN:	
	(0.00 - K5,000 (20,001 - K100,000.	☐ K5,001 - K10,0 ☐ K100,001 - K99	

Business Account Application Form



Business Contact Persons

Please provide details of authorised user with Adminstration Access to the Business Transaction Account and Business Online Service.

Full Name	
Position	
Email Address	
Phone Number	
Primary ID Type	
Signature	

Please list the individuals who have delegated authority to access and transact on Bank accounts listed in this form using Business Online. These users are restricted to perform transactions within the limits and amounts defined by the Administrator

User Full Name	
Position	
Email Address	
Phone	
Signature	
User Full Name	
Position	
Email Address	
Phone	
Signature	

SHAREHOLDERS INFORMATION

List Shareholders and the % of Ownership and for Entity Ownership list the natural person who owns 20% or More

Name	% Shares	ID Туре	Expiry date	Signature

Should there be more than the required numbers in this section, please print additional page to complete and submit together as part of the application

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DECLARATION

I/We hereby:

- Declare that the information provided herein is true and correct and Authorise CreditBank Limited to open an account.
- Acknowledge having received and read the Terms and Conditions governing the conduct of Business Bank Accounts and the use of Internet and Mobile Banking.
- Agree to be bound by the provisions of the Terms and Conditions and any amendments to the same for any accounts opened with the bank now and hereafter.
- Declare that I/we have not committed any act of bankruptcy at the time the account(s) was/were opened.
- Agree to examine and notify the Bank of any errors, irregularities or discrepancies in the statement of account sent to me/us and notify the Bank if I/we fail to receive such monthly statement.
- Give consent to the listed signatories in this form to transact on my/our behalf.
- Give consent for my Existing Term Deposit Account and Loan Account held at Credit Corporation Finance Limited to be migrated to my CreditBank PNG Account.

COMPANY AUTHORISED SIGNATORTIES

Please list account Signatories and ensure all documents provided are sufficient to enable a full assessment of your Application

For existing CreditBank PNG customer, please provide details as required for verification.

Name	Account / CIF Number	Signature
1		
2		
3		

For New to Credit Bank PNG Customer, please complete the fields below :

Full Name	
Position	
Email Address	
Mobile No.	
Primary ID Type	
Signature	
Full Name	
Position	
Email Address	
Mobile No.	
Primary ID Type	
Signature	