



# WAKULIMA COMMERCIAL SACCO LTD.

P O BOX 232-10103 MUKURWE-INI. TEL: 0203594698/0700146398

Email: [info@wakulimasacco.co.ke](mailto:info@wakulimasacco.co.ke)

## ACCOUNT OPENING FORM

DATE: \_\_\_\_\_

### PART 1: FRONT OFFICE SAVINGS (FOSA)

#### Indemnity clause

I/We agree to open a FOSA account with *Wakulima Commercial Sacco Society Ltd* and do hereby state that the account shall strictly be operated as per the terms and conditions set by *Wakulima Commercial Sacco Ltd*. I/We further agree to indemnify *Wakulima Commercial Sacco Society Ltd* in case of any claims or loss incurred out of the account being closed without notice or because of unsatisfactory performance.

### PART 2: ACCOUNT HOLDER'S DETAILS

A/C Name: ..... I.D No: .....

A/c No: ..... Society Membership No: ..... TEL NO: .....

Postal address..... postal code..... Town.....

County ..... Sub-county: ..... Ward: .....

Sub-location..... Village..... Milk Station.....

### PART 3: MOBILE BANKING REGISTRATION

I/we request registration of mobile telephone No ..... as the authorized number to be making transactions in my/our account through *Fast Cash* as per the prevailing terms and conditions

Registration No: ..... Member's sign..... Verified by..... Sign.....

### PART 4: NEXT OF KIN

Name ..... ID No: ..... Tel no: ..... Relationship: .....

PART 5: SHARES STANDING ORDER: AMOUNT ..... SIGN .....

### PART 6: DECLARATION

By signing here under I/we declare that the information provided above is true to the best of my/our knowledge, I/we further agree to abide by *Wakulima Commercial Sacco Society's By-Laws* and any subsequent amendments regarding membership, Savings and Credit

### AUTHORIZED SIGNATORIES

	NAME	ID NO:	TEL NO:	SIGNITURE
1	.....	.....	.....	.....
2	.....	.....	.....	.....
3	.....	.....	.....	.....
4	.....	.....	.....	.....

### PART 6 (OFFICIAL USE ONLY)

Verified By ..... sign ..... Date .....

Approved by ..... sign ..... Date.....