

ACCOUNT OPERATING TOOLS FORM

Please read carefully and complete all relevant sections. Should you have any questions, a member of staff will be willing to assist you (Please complete in BLOCK CAPITALS and tick where necessary)

Soma aya mabwiriza witonze maze wuzuze iyi nyandiko uko bikwiye. Niba hari ibyo ushaka gusobanura, umukozi wacu yiteguye kuguha ibisobanuro wifuza. (Usabwe kuzuza iyi nyandiko ukoresheje inyuguti z'icyapa zisomeka neza kandi ugashyira akamenyetso v'aho bisabwa)

PERSONAL DETAILS

Surname/Nom/Izina:

First Name / Prenom / Izini Ry'idini:

Mobile Number: Preferred Language: Kinyarwanda / English / French

CORPORATE DETAILS (If applicable)

Acronym/ Sigle/ Izina Rihinye:

Corporate Name/Raison Sociale/ Izina Rirambuye:

Assigned signatory (+supporting letter):

IDENTIFICATION

ID No/No Y'ikimuranga Date of issue/Igihe yatangiwe

Expiry Date/Igihe Izarangirira Issued at/aho yatangiwe

IID No/No Y'ikimuranga Date of issue/Igihe yatangiwe

Expiry Date/Igihe Izarangirira Issued at/aho yatangiwe

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Expiry Date/Igihe Izarangirira Issued at/aho yatangiwe

CLIENT DETAILS

BPR Current Account Number:

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Branch Name:

LAST DATE OF TRANSACTION

Place: Date:

TOOLS

Chequebook ☐ Receipt book ☐ Payment order ☐ Debit Card ☐ Mobile Banking ☐ SMS Alerts ☐ MB reset pin ☐

E – STATEMENT

E - Statement main receiver's e-mail: E -mail.....

Statement other receiver's e-mail: Period of statement.....

Daily ☐ Weekly ☐ Every two weeks ☐ Monthly ☐ Other period ☐**SMS ALERTS**

SMS alert receiver's number.....

Types of notifications

Transactions only Credit ☐ Transactions only Debit ☐ Both types of transactions ☐**CHEQUE BOOK / PAYMENT**First time order ☐Reorder ☐24 Pages ☐48 Pages ☐**DEBIT/ATM CARD ORDER / RECEIPT BOOK**Debit Classic ☐Debit Gold ☐Debit Platinum ☐Debit USD ☐

Signatory(s) Names (s)

Serial Numbers Cheque: to:.....

REASON

Stolen/Missing/Finished/Other.

Please Specify.....

Place..... Date.....

	Names	Signature
Signatory 1		
Signatory 2		
Signatory 3		
Signatory 4		

NB: All tools not picked within six months will have to be destroyed with no refund!

OFFICE USE ONLY

Employee's Name..... Signature.....