

To be used for Po	ersonal an	d Joint A	ccounts Not	te: A No	otice of Aut	hority must be c	omplete	ed for Join	nt Accou	nts				
New Account N	Number			Produ	uct No	Branch No	Offic	er No	Depos	sit Am	nt	PacifiCa	ard No)
Complete Cust	omer De	tails for	a new cus	tomer	or if an	existina cuto	omer's	details	needs	to be	updated.			
1			er Detai			J	2				•	Detail	s (2)	
Existing Customer		lew stomer	Reside	ent	Non Reside			Existing ustomer			ew tomer	Reside	nt	Non Resident
CIF Number							CIF	Numbe	r					
Given Names							Give	en Nam	es					
Surname							Surr	name						
Father's Name							Fath	ier's Na	ime					
Mailing Name	Mr/Mrs/	/Ms						ing Nar		/lr/Mrs/	Ms			
Mailing Addres	S						Maili	ing Ado	dress					
Country:							Соι	untry:						
Occupation							Occ	upation	n					
Employer Nam	ne						Emp	oloyer N	Name					
Employer Add	ress						Emp	oloyer /	Addres	s				
Work Phone N	o Start	Date	TIN No				Wor	k Phon	e No	Star	t Date	TIN No		
Preferred Day	Dh No	Emoil	Address				Prof	erred D)ay Ph	No	Email A	ddroee		
Preieneu Day	PILINO		Audress					eneu b	ayın	NO		441633		
Account Type	Custome	er Type	c	itizens	ship		Acco	ount Typ	be Cu	stomer	Туре		Citizen	ship
Market Segment	SIC Co	de	User Fiel	d 15 (\	/anuatu o	only)	Mark	ket Segn	nent S	IC Co	de	User Field	d 15 (V	anuatu only)
Date of Birth	Gende M / F		tal Status	Mob	ile Phor	ne No	Date	e of Bir	th (Gende M / F		al Status M / D	Mob	ile Phone No
Posidential Ad				rmon	opthy liv		Baa	idontio	l Addr				rmon	anthy lives)
Residential Ad	u1622(m)	lere cu	stomer pe	man		es)	Nes	luentia	Auur	622(W)		stomer pe	illiali	ently lives)
Home Phone No	:						Hom	ne Phone	e No:					
Exempted fron (Tick "Yes" if				? Y	es	No						tamp Duty? te is held)	Y Y	es No
Source of F	unds		Sa	lary/a	nnum]	Source of Funds			Salary/annum				
	_													
Preferred Chequ	e Book Na	ame (for	a Persona	I Cheq	ue Accoi	unt only)								

Electronic Services							
PacifiCard Visa Debit Card (criteria applies) Telephone Banking (Available in Tonga)	 Internet Banking ▶ Do you want to receive your statement electronically? Yes 	No					

Acknowledgements

I/We agree:

- that documents presented for identification purposes may be verified by the Bank with an appropriate authority;
- to be bound by the terms and conditions which apply from time to time to this account opened by me with the Bank;
- if card access has been requested, to be bound by the Conditions of Use governing the use of the card;
- the Bank may charge to this or any other account(s) I/we may conduct with the Bank or recover from me/us any bank fees, government charges, taxes or duties imposed on transactions on/or which relate to my/our account(s); and
- to check my/our account statements and notify the Bank of any errors or unusual transactions within 3 months of receiving each account statement.

I/We acknowledge that I/we have received a copy of the relevant Terms and Conditions that apply to this account.

I/We believe the details of this form to be true and correct.

I/We acknowledge that I/we have read and understood the Privacy Statement in the Customer Banking Agreement.

Customer's Name **(1)**

Customer's Signature (1)

Customer's Signature (2)

Customer's Name (2)

Bank Use Only							
	Salary Number	Name	Signature	Date			
Verified and Opened By							
Authorised By							
Checked By(Operations)							

Banking Needs	Discussions about customer needs (Purpose of account)	Proposed Solution
Transactional Needs		
Borrowing Needs		
Investment Needs		
Insurance Needs		