Prime Bank

ACCOUNT OPENING FORM - CORPORATE

Please complete in BLOCK LETTERS and tick appropriate box.

I/We request you to open the following account(s) as per the following details:

Branch:		**Date:**	
Account Title:			

Account Type (KES):		
Current	Prime Baraka	☐
	Prime Business Advantage	☐
	Prime Current	☐
	Prime Enterprise Business	☐
	Others	☐

Current (FCY):	Prime Business ☐
Currency:	☐ USD ☐ GBP ☐ EURO ☐ Others
Other Account Type:	

Other Bank Details: *List other banks with the same account name being opened at Prime Bank.

Bank Name:	Account Number:	Account Name:	Branch:

Frequency for Free Email Statements: Daily ☐ Weekly ☐ Monthly ☐ Quarterly ☐ Daily & Monthly ☐

Account Facilities for Limited Company/ Limited Liability (LLP)/ Trust/ Sole Proprietor

I/ We wish to apply for Electronic Banking Services and confirm that I/ We have read and understood the Terms and Conditions for use of Electronic Banking Services that are accessible through the following link: www.primebank.co.ke/terms-and-conditions/ ☐ Electronic Banking Services (Provide Board Resolution)	Credit Card ☐ *Complete separate credit card application form
	Debit Card (Sole Proprietor) ☐
	Cheque Book (Leaves) ☐ 25 ☐ 50 ☐ 100 * Cheque book will be ordered once the account is funded
ALIAS Code for Cash2Bank (MPesa) (Min 5 digits, Max 14 digits) _____	Others (Please Specify) _____

APPLICATION FOR ELECTRONIC BANKING SERVICES

(Please note a corresponding board resolution for the application for Electronic Banking is required)

A) Accounts we wish to access online for viewing details ☐ /inputting transactions ☐ : Primary CIF Number: _____

Account Number:	Person/s Authorised To Operate:	Mobile Number:	Email Address:	Mode Of Operations:

Prime Bank

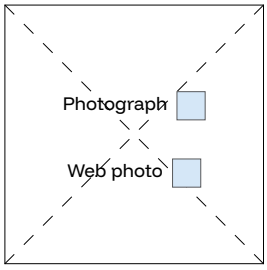
Account Name:

Mode of Operation: ☐ Solely ☐ All Jointly ☐ Anyone ☐ Other (Specify) _____

*Must be as per Board Resolution for the Company

Authorised Signatory 1/ Sole Proprietor
(Please sign only within the boundary of this box)

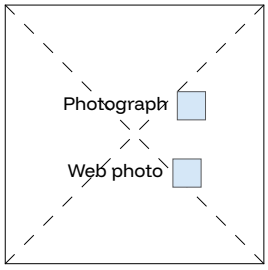
Attach coloured passport size photograph



Name:

Authorised Signatory 2
(Please sign only within the boundary of this box)

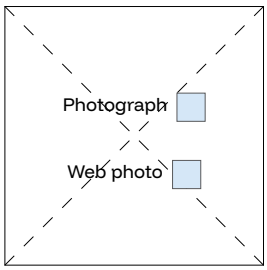
Attach coloured passport size photograph



Name:

Authorised Signatory 3
(Please sign only within the boundary of this box)

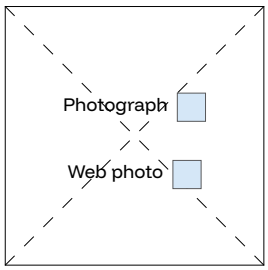
Attach coloured passport size photograph



Name:

Authorised Signatory 4
(Please sign only within the boundary of this box)

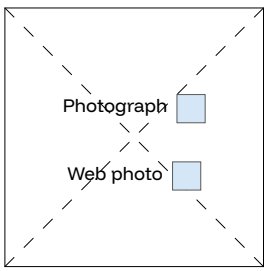
Attach coloured passport size photograph



Name:

Authorised Signatory 5
(Please sign only within the boundary of this box)

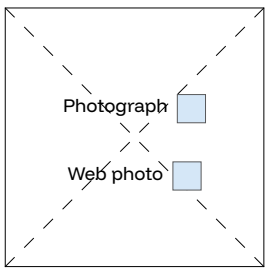
Attach coloured passport size photograph



Name:

Authorised Signatory 6
(Please sign only within the boundary of this box)

Attach coloured passport size photograph



Name:

Prime Bank

Customer Classification:

	Source 1	Source 2	Source 3	Source 4
Source of Income/ Funds:				
Source of Wealth:				

Expected Account Activities:

Approximate debits / credits expected in the Account:	Debit Value/ Withdrawals (KES equivalent):	Credit Value/ Deposits (KES equivalent):
Cash Transactions Monthly:		
Expected Value of Total Transactions Monthly, other than cash:		
Estimated Annual Income:		

Declaration

I/We confirm that the information I/We have provided herein and the disclosures made are factual and true. I/We confirm that I/We have successfully accessed, read and understood the General Terms and Conditions governing the Bank-Customer relationship in regard to the operations of a Bank account (T&Cs), the use of the Electronic Banking Services as well as the use of the Debit / Credit Cards (wherever applicable), as accessible through the following link - https://www.primebank.co.ke/wp-content/uploads/2026/10/General-Terms-Conditions-2.pdf

I/We accept to be bound by and also acknowledge that the Terms and Conditions contained therein shall constitute part of my/our obligations herein.

Authorised Signatory 1

Name:	
Signature:	

Authorised Signatory 2

Name:	
Signature:	

Authorised Signatory 3

Name:	
Signature:	

Authorised Signatory 4

Name:	
Signature:	

Authorised Signatory 5

Name:	
Signature:	

Authorised Signatory 6

Name:	
Signature:	

Prime Bank

FOR BANK USE ONLY

CIF Number:		Account Number:	

Customer Economic Activity Sector:		
1.	Customer Economic Sector:	
2.	Customer Economic Sub-Sector:	

*As per ISIC Economic Activity

CHECKLIST

Sales/ RM Name:	
Sales/ RM Code:	
Account entered in System by:	
Account verified in System by:	
Signatures of Authorised Signatories admitted by:	
Signatures Verified by:	
Introducer Signature Verified by:	
Customer Risk Rating input by:	

OFFICIATING/BRANCH MANAGER

Signature: _____ Date: _____

Prime Bank

ANNEXURE
RESOLUTION FOR ELECTRONIC BANKING SERVICES

*On Company letterhead/ signed by Chairman/Director/Company Secretary

We certify that the following resolution was passed at a duly convened meeting of the Board of Directors of _____ Ltd.

held on _____ day of _____ _____ and in accordance with the Memorandum and Articles of Association of the Company.

Present:

Name | Designation

1. _____ _____

2. _____ _____

In Attendance/ Name: _____ Company Secretary/ Auditor

Resolved that

(1) The Company will avail Electronic Banking Services provided by Prime Bank Ltd. (hereinafter referred to as "the bank") on the request of the Company and for the purpose to comply with all information security requirements laid down by Bank and also execute all documents as required by the Bank.

(2) The Company has authorised the following officers of the Company to operate the Current Account/Term deposit Account/Foreign Currency Account held by the Company with the Bank and the Bank is empowered to accept the financial and non-financial transactions directly posted/authorised by these officers using the Electronic Banking Services.

Name of Electronic Banking user:	Account(s) for which Electronic Banking is required:	Financial Transaction limits		Personal Mobile Number/ Email Address	Type of User (Sole Operator/ Initiator/ Verifier/ Authoriser
		Max Amt. per txns:		Tel:	
		Max Amt. per day		Email:	
		Max Amt. per txns:		Tel:	
		Max Amt. per day		Email:	
		Max Amt. per txns:		Tel:	
		Max Amt. per day		Email:	
		Max Amt. per txns:		Tel:	
		Max Amt. per day		Email:	

Select your preferred workflow for all transactions

1. Sole Operator _____ ☐
2. Initiator + 1 Authoriser _____ ☐
3. 1 Initiator + 2 Authoriser _____ ☐
4. 1 Initiator + 1 Verifier + 1 or more Authorisers _____ ☐
5. 1 Initiator + 1 or more Group A Authoriser + 1 more Group B Authoriser _____ ☐

(3) The Company has accepted the risks associated with transmission of critical, financial and other confidential information about the Company through Electronic banking and indemnifies the Bank unconditionally against all possible financial losses and claims arising from the use of the Electronic banking services. For this purpose, the company agrees to execute the applicable terms and conditions as contained in the Electronic Banking Services application form, through its Authorised officials.

(4) The Company will duly notify the Bank if any of the officials Authorised to operate the accounts as above are temporarily/permanently unavailable.

(5) The foregoing resolution be communicated to the Bank and shall constitute the Company's mandate to the Bank which will remain in force until revoked by notice in writing to the Bank signed by a Director Authorised by a Board Resolution.

Other workflows can be specified by the client and indicated below.

Chairman /Director

Director/Secretary