ACCOUNT OPENING FORM - INDIVIDUAL /JOINT/MINOR

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:			
Category of Account:	Individual ☐ Joint ☐ Minor ☐		

Purpose of Account opening: Savings ☐ Transactions ☐ Fixed Deposit/Investment ☐ Other ☐ _____

Type of Account (KES)	
Savings	Prime Saver ☐
	Prime Junior ☐
Current	Prime Current ☐
	Prime Faida ☐
	Prime Faida Plus ☐
	Prime Wananchi ☐
	Prime Flexi ☐
	Prime Yes ☐
	Prime Esteem ☐

* Channels of Banking available - Prime Debit Card, PrimeMobi and PrimeNet

Foreign Currency:	Prime Current ☐
Currency:	☐ USD ☐ GBP ☐ EURO ☐ Others
Other Account Type:	

Frequency for Free Email Statements

Daily ☐ Weekly ☐ Monthly ☐ Quarterly ☐ Daily & Monthly ☐

Apply for Prime Alerts: Email Alerts ☐ SMS Alerts ☐ Both ☐

SMS Alerts are applicable for: Debit Alert - KES. 50,000 > = USD. 500
(Subject to change) Credit Alert - KES. 50,000 > = USD. 500

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

Bank Name:	Account Number:	Account Name:	Branch:

Account Facilities:

Electronic Banking Services (self registration available for both Mobile & Internet Banking) Mobile Banking ☐ Internet Banking ☐	Prime PrePaid Card ☐ Yes ☐ No ☐ (If yes, provide Mother's maiden name) _____ Credit Card ☐ *Complete separate credit card application form
Prime Debit Card ☐	Cheque Book (Leaves) ☐ 25 ☐ 50 ☐ 100 * Cheque book will be ordered once the account is funded
Others (Please Specify) _____	

Account Name:

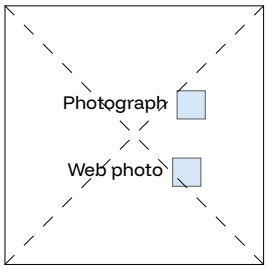
Mode of Operation: ☐ Solely ☐ All Jointly ☐ Anyone ☐ Either or Survivor ☐ Former or Survivor

☐ Other (Specify) _____

Account Holder 1

(Please sign only within the boundary of this box)

Attach coloured passport size photograph

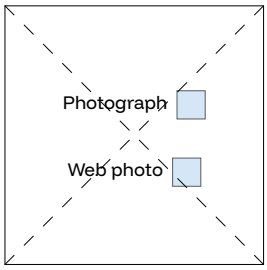


Name:

Account Holder 2

(Please sign only within the boundary of this box)

Attach coloured passport size photograph

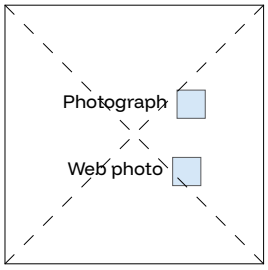


Name:

Account Holder 3

(Please sign only within the boundary of this box)

Attach coloured passport size photograph

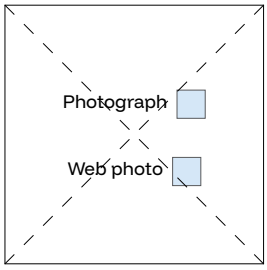


Name:

Account Holder 4

(Please sign only within the boundary of this box)

Attach coloured passport size photograph



Name:

INTERNET BANKING (PRIMENET) SERVICES

OTHER ACCOUNTS I/WE WISH TO ACCESS ONLINE: **Primary CIF Number:** _____

Account No.	Account holder name/s only:	Financial transaction limits		
		Max Amt. per transaction:	Max no. of txns per day:	Max Amt. per day:

MOBILE BANKING (PRIMEMOBI) ALERTS * Only applicable for cash and transaction amounts

SMS Alerts (Free)	Debit ☐	Credit ☐	Both ☐
Email Alerts	Debit ☐	Credit ☐	Both ☐

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.

Account Holder 1

Name:	
Signature:	

Account Holder 2

Name:	
Signature:	

Account Holder 3

Name:	
Signature:	

Account Holder 4

Name:	
Signature:	

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: _____