



Philippine National Bank (Europe) Plc

**Customer Services**

5 – 7 Hillgate Street  
London, W8 7SP

Direct Lines: 020-7313 2323 / 2319 / 2321  
Trunk Lines: 020-7313-2300 Fax No. 020-7244-0247  
info@pnbeurope.co.uk,  
http://www.pnbeurope.com

**REQUIREMENTS FOR OPENING INDIVIDUAL ACCOUNT**

**APPLIES TO ALL IF OVER THE COUNTER**

**PROOF OF IDENTIFICATION:** ORIGINAL VALID PASSPORT or UK DRIVING LICENCE must be certified by a senior official at PNBE.

**PROOF OF ADDRESS:** ORIGINAL UTILITY BILL (any one of the following; UK driving licence, recent bank statement, credit card statement, telephone, electric gas, water, rent book, pension book or council tax statement) should be certified by senior official at PNBE.

PHOTOCOPIES OF THESE DOCUMENTS ARE ACCEPTABLE PROVIDED THEY ARE CERTIFIED AS TRUE COPIES OF THE ORIGINALS.

**FOR UK PASSPORT HOLDER:** by a UK banker, solicitor/lawyer, GP/Doctor, accountant, teacher, minister of religion, post or sub-post master.

**FOR NON-UK PASSPORT HOLDER:** by a solicitor/lawyer, bank manager, GP/Doctor, consulate of the Philippine Embassy or by a senior official at PNBE.

In case of live-in employment, certificate of employment together with employer's recent utility bill and certified copy of employer's valid passport.

**Please ensure that contact details of the certified are also provided.**

Please remember that Money Laundering Regulation requires us to verify your identity and to keep copies of the documentation required. If it is not possible to verify your identity, then by law, financial services firm, such as we, will not be able to continue providing you with services.


**GLOBAL FILIPINO MONEY CARD (GFMC).....£10.00**

***PESO/US DOLLAR ACCOUNT BASED IN THE PHILIPPINES (minimum deposit)***

We can assist you in opening Peso Accounts in any of the PNB Branches in the Philippines. (Per Banko Sentral ng Pilipinas, only a Filipino Citizen can open the following peso accounts)

<b>Peso OFW ATM Savings Account</b>	<b>Php 10,000.00</b>
<b>Peso Regular Passbook Savings Account</b> (Minimum maintaining balance to earn interests is Php 15,000.00)	<b>Php 10,000.00</b>
<b>Peso Time Deposit PNBbig Account</b>	<b>Php 25,000.00</b>
<b>Regular Checking Account</b>	<b>Php 10,000.00</b>
<b>PNBbig Checking Account (with interest}</b>	<b>Php 25,000.00</b>
<b>Priority one Checking Account</b>	<b>Php 25,000.00</b>
<b>Budget Checking Account</b>	<b>Php 2,500.00</b>
<b>US Dollar Savings Account</b> (Minimum maintaining balance to earn interests is US \$1000.00)	<b>US \$ 500.00</b>
<b>US Dollar Time Deposit Account</b>	<b>US \$ 5000.00</b>

For opening of Peso and /or US Dollar account in the Philippines, 2 pieces passport size photograph are also required to be submitted.

 <b>SIGNATURE CARD</b> FOR OFW AND BENEFICIARIES		ACCOUNT NO.
		CUSTOMER NO.
ACCOUNT NAME		
PRESENT ADDRESS		SEND MAIL TO: <input type="checkbox"/> Present Address <input type="checkbox"/> Permanent Address <input type="checkbox"/> Business Address
PERMANENT ADDRESS		
BUSINESS ADDRESS		
TELEPHONE NO.	MOBILE NO.	E-MAIL ADDRESS
FOR JOINT ACCOUNT: Please recognize, subject to the instruction given below, the following signature(s) in the operation of the deposit account covered by this application.		
<input type="checkbox"/> ANYONE <input checked="" type="checkbox"/> ANY TWO <input type="checkbox"/> ALL		
PRINTED NAME		SIGNATURE
SIGNATURE TAKEN BY:	AUTHENTICATED & APPROVED BY:	DATE:
		PLACE OF APPLICATION:

Form 2047 (Rev. 8/2005)


Present Address : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

Place of Birth : \_\_\_\_\_

Civil Status : \_\_\_\_\_

----- cut here -----

 <b>SIGNATURE CARD</b> FOR OFW AND BENEFICIARIES		ACCOUNT NO.
		CUSTOMER NO.
ACCOUNT NAME		
PRESENT ADDRESS		SEND MAIL TO: <input type="checkbox"/> Present Address <input type="checkbox"/> Permanent Address <input type="checkbox"/> Business Address
PERMANENT ADDRESS		
BUSINESS ADDRESS		
TELEPHONE NO.	MOBILE NO.	E-MAIL ADDRESS
FOR JOINT ACCOUNT: Please recognize, subject to the instruction given below, the following signature(s) in the operation of the deposit account covered by this application.		
<input type="checkbox"/> ANYONE <input checked="" type="checkbox"/> ANY TWO <input type="checkbox"/> ALL		
PRINTED NAME		SIGNATURE
SIGNATURE TAKEN BY:	AUTHENTICATED & APPROVED BY:	DATE:
		PLACE OF APPLICATION:

Form 2047 (Rev. 8/2005)

Present Address : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

Place of Birth : \_\_\_\_\_

Civil Status : \_\_\_\_\_

TESTED E-MAIL/FAX NOTIFICATION FORM

Sel.Cir.3-1372/2005  
(Exhibit 4)

TO : \_\_\_\_\_ (Domestic Branch)  
THRU : ESTRELLA M. GARCIA, Communication Office

FROM : \_\_\_\_\_ (Overseas Office)      DATE: \_\_\_\_\_

SUBJECT: ACCOUNT OPENING IN FAVOR OF \_\_\_\_\_

TEST: \_\_\_\_\_      FOR: \_\_\_\_\_

ATTN: SALES AND SERVICE HEAD

May we request for the opening of a \_\_\_\_\_ (Account Type) in favor of \_\_\_\_\_ (Name of Depositor/s) and inform us immediately of the assigned account number thru e-mail so we can advise client accordingly. Initial information regarding the depositor are as follows:

Client Information     Remitter     Beneficiary

* Lastname	* Firstname	* Middlename
* Date of Birth	* Place of Birth	* Nationality
* Civil Status	* TIN/SSS/GSIS No.	* ID's Presented
* Present Address		Telephone Number
* Permanent Address		Telephone Number
* Name of Employer	* Nature of work/Business	* Business Address
Occupation	Mobile Number	E-mail Address
* Source of Funds	Name of Spouse	Postal Code

\* Mandatory Fields for Remitters Account

As initial deposit, please refer to BPO under ERPS/Remittance Reference Number \_\_\_\_\_ dated \_\_\_\_\_ amounting to \_\_\_\_\_ representing remittance proceeds for credit to the newly opened account. Please avoid duplication.

€ **Remitter's Account:** Please forward the passbook/ATM Card/PIN Mailer to PNB \_\_\_\_\_ (Overseas Office) and inform us of the assigned account number as soon as the new account is opened so we can immediately advise the depositor. Original documents supporting the account opening shall be forwarded to your branch via registered mail.

€ **Beneficiary's Account:** Please issue/release the corresponding passbook/ATM/PIN Mailer to the accountholder upon completion of the account opening requirements and presentation of identification to the branch.

Thank you for your usual prompt attention.

OPERATIONS HEAD  
\_\_\_\_\_  
(Overseas Office)



**CLIENT INFORMATION FORM**

**PNB** (PLEASE PRINT ALL INFORMATION)

PLACE OF APPLICATION:

CLIENT INFORMATION			
NAME OF DEPOSITOR			1" x 1" PICTURE (pls. attach)
Last Name			
First Name			
Middle Name			
SALUTATION: <input type="checkbox"/> Ms./Mrs <input type="checkbox"/> Mr. <input type="checkbox"/> Others	DATE OF BIRTH: (DDMMYYYY)	PLACE OF BIRTH:	NATIONALITY:
TIN:	BSS/GSIS ID No:	CIVIL STATUS:	GENDER: <input type="radio"/> Male <input type="radio"/> Female
PRESENT ADDRESS:			TELEPHONE NO. (include Area Code)
(Lot/Blk/House No./ Unit No.)	(Street)	(Subdivision)	(Town/City) (State/Province) (Country) (Zip Code)
PERMANENT ADDRESS:			TELEPHONE NO. (include Area Code)
(Lot/Blk/House No./ Unit No.)	(Street)	(Subdivision)	(Town/City) (State/Province) (Country) (Zip Code)
NAME OF EMPLOYER/NATURE OF WORK:		OCCUPATION:	MOBILE NUMBER:
BUSINESS/EMPLOYER'S ADDRESS:		EMAIL ADDRESS:	TELEPHONE NO. (include Area Code)
SPOUSE'S NAME		SPOUSE'S OCCUPATION:	
I affirm that the information given by me in this application is true and correct. I, hereby, allow PNB to verify and investigate said information and/or secure such other information as may be required by PNB. I have read and accepted the applicable terms and conditions and other agreements executed between the BANK and the DEPOSITOR.			
SIGNATURE OF DEPOSITOR			
<b>FOR PNB USE ONLY</b>			
IDs Presented	SHORT NAME (20 chars. Max)	CATEGORY:	CUSTOMER ID NUMBER:
	Recommended by: (Signature over Printed Name and Designation)	Processed by / Date:	Approved by / Date:

MEGALINK

FORM 2163 (Revised - Aug. 2007)



**ACCOUNT INFORMATION FORM**

<input type="checkbox"/> Personal	<input type="checkbox"/> Single
<input type="checkbox"/> Business	<input type="checkbox"/> Joint (And)
	<input type="checkbox"/> Joint (And/Or)

(TO BE FILLED OUT BY CUSTOMER. PLEASE PRINT ALL INFORMATION)

NAME OF DEPOSITOR/S: (Last Name, First Name, Middle Name)

CUSTOMER ID NUMBER: (For PNB Use Only)

Primary Owner: \_\_\_\_\_  
Co-Depositor/s: \_\_\_\_\_

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

(For Joint Accounts with more than three (3) depositors, please use separate form and attach to main AI form)

DEPOSIT ACCOUNT APPLIED FOR: (Please check type of deposit)

SOURCE OF FUNDS:

<input type="checkbox"/> PESO	<input type="checkbox"/> FOREIGN CURRENCY
<input type="checkbox"/> SAVINGS ACCOUNT	<input type="checkbox"/> CHECKING ACCOUNT
<input type="checkbox"/> OFW SAVINGS ACCOUNT	<input type="radio"/> Regular
<input type="radio"/> Passbook	<input type="radio"/> PNBtg Check
<input type="radio"/> Superteller	<input type="radio"/> Greencheck
ATM Card Number _____	<input type="radio"/> Special Checking
<input type="radio"/> Privilege	<input type="radio"/> Others _____
<input type="radio"/> Others _____	ATM Card No. _____
ACCOUNT NUMBER _____	ACCOUNT NUMBER _____

TERM DEPOSIT      TERM: \_\_\_\_\_

Time Deposit

Others

*Disposition of proceeds of placement at maturity:*

Automatic Renewal of Principal plus Interest (Roll-over)

Automatic Renewal of Principal Only  
Interest Credit to CA / SA# \_\_\_\_\_

Others, specify \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_

**ISSUANCE OF STATEMENT OF ACCOUNT AND CORRESPONDENCE**

Mail to     Present Address     Permanent Address     Business Address

Pick-up (Maintaining Branch)

**NOTE:**  
For pick-up, please submit authorization if picked up by a representative. Further, after (6) months from statement date, the unclaimed Bank statements of accounts including the scanned images of cancelled / negotiated checks and client's copies of debit and credit memos shall be disposed of by shredding.

We affirm that the information given by me/us in this application is true and correct. We hereby allow PNB to verify and investigate said information and/or secure such other information as may be required by PNB. We have read and accepted the applicable terms and conditions of the Deposit printed in this application form and other agreements executed between the BANK and the DEPOSITORS.

For purposes of remitting funds to my PNB deposit account in the Philippines, I hereby waive my rights under the provisions of R.A. 1405, otherwise known as the Law on Secrecy of Bank Deposits, and hereby authorize the Bank, its branches, agencies or any of its subsidiaries or correspondent banks to gain access and inquire into my PNB deposit accounts and to disclose such data and papers as are required by regulatory agencies conformably with the "Know Your Customer Policy" principles, without incurring any criminal, civil or administrative liability therefor.

SIGNATURE OF DEPOSITOR

SIGNATURE OF CO-DEPOSITOR

SIGNATURE OF CO-DEPOSITOR

**TERMS AND CONDITIONS GOVERNING THE OPENING AND MAINTENANCE OF DEPOSIT ACCOUNTS**

**A. GENERAL PROVISIONS FOR DEPOSIT**

- Each check/ draft/ negotiable instrument received by BANK for deposit or collection is subject to actual receipt in cash of the proceeds thereof. Until such receipt the deposit item shall be held at the risk of DEPOSITOR and BANK assumes no responsibility beyond the exercise of due care. BANK will not be liable for default or negligence of its duly selected correspondents nor for losses in transit and no correspondent so selected shall be liable except for its negligence. BANK reserves the right to charge back any defective or lost item previously credited to the account regardless of the time that has elapsed and regardless of whether or not the Deposit Item itself can be returned. DEPOSITOR assumes full responsibility for the validity of the Deposit Item as well as the correctness and genuineness of endorsement/s thereon.
- BANK shall not be responsible for any payment it may make on a Deposit Item prior to its notice of loss/ theft of Deposit Item and such payment shall have the same effects as if made to the DEPOSITOR personally except in case of patently discernable acts of forgery or irregularity.
- Stop payment request of Deposit Item shall not be valid unless made in writing and duly acknowledged as received by BANK. Stop payment revocation shall also be in writing.
- DEPOSITOR shall advise BANK in writing of any change in authorized signatories to the Account and shall submit to BANK a sworn certification by the Corporate / Association's Secretary or by all the partners in a partnership regarding the approval of the appropriate resolution authorizing such change/s in form and tenor acceptable to BANK. Pending acceptance by BANK of such certification, BANK may at its exclusive option continue to recognize existing signatories to the Account.
- FOR JOINT AND SEVERAL ACCOUNT (AND/OR) - Undersigned DEPOSITORS agree with one another and with BANK that all moneys heretofore, now or hereafter deposited by us or any of us to the credit of this Account are and shall be received and held by BANK with the understanding and upon the condition that said moneys deposited without reference to previous ownership shall be THE PROPERTY OF ANY ONE OF US AS SOLIDARY OWNER AND SHALL BE PAYABLE TO AND COLLECTABLE BY ANY ONE OF US DURING OUR LIFETIME AND AFTER DEATH OF ANY ONE OF US SHALL BE PAYABLE TO AND COLLECTIBLE BY THE SURVIVOR OR ANY OF THE SURVIVORS LIFETIME AND AFTER DEATH OF ANY ONE OF US SHALL BE PAYABLE TO AND COLLECTIBLE BY THE SURVIVOR OR ANY OF THE SURVIVORS UPON COMPLIANCE WITH BANK REQUIREMENTS.

6. FOR JOINT ACCOUNT (AND) - UNDERSIGNED DEPOSITORS agree with one another and with BANK that all moneys heretofore, now or hereafter deposited by us or any of us to the credit of this Account are and shall be received and held by BANK with the understanding and upon the condition that said moneys deposited without reference to previous ownership shall be THE PROPERTY OF ALL OF US JOINTLY AND SHALL BE PAYABLE TO AND COLLECTIBLE BY ALL OF US DURING OUR LIFETIME AND AFTER DEATH OF ANY ONE OF US SHALL BE PAYABLE TO AND COLLECTIBLE JOINTLY BY THE SURVIVOR(S) AND THE LEGAL HEIR(S) OF THE DECEASED DEPOSITOR UPON COMPLIANCE WITH BANK REQUIREMENT.
7. In case of joint accounts where the DEPOSITORS are married to each other, both spouses agree to give consent to either of them to constitute a holdout on the Deposits to secure any loan or credit accommodation to be obtained from the BANK by either one of them. In case of single-name accounts where the DEPOSITOR is married or in case of joint accounts where the DEPOSITORS are both married but to persons other than his/her CO-DEPOSITOR, the DEPOSITORS warrant/s that the deposits are his/her/their exclusive separate properties.
8. The BANK reserves the right to close the account without prior notice to the DEPOSITOR if the same is improperly handled by the DEPOSITOR as determined by the BANK. The BANK is authorized to report such closure and reasons therefor to the Bankers Association of the Philippines (BAP), Bangko Sentral ng Pilipinas (BSP) or to any monitoring body established by BAP / BSP. The DEPOSITOR shall hold the BANK free and harmless from all liabilities claims and demands arising from the above actions by the BANK.
9. DEPOSITOR hereby agrees to be bound without need of prior notice by BSP rules and regulations, the rules and regulations of the Bankers Association of the Philippines and BANK policies heretofore and hereafter adopted which may have relation to or in any way affect the account.
10. This agreement is binding on each and all of us and our respective heirs, executors, administrators and assigns. It is agreed that no change or alteration shall be effective until reduced to writing and signed by the DEPOSITORS and the BANK.
11. Opening/maintenance of COMBO accounts shall be governed by separate deposit agreement while the opening/maintenance of savings deposits is governed by the terms and conditions indicated in the savings passbook.
12. DEPOSIT INSURANCE - Deposits are insured by the Philippine Deposit Insurance Corporation (PDIC) up to a maximum amount of P250,000 per depositor. PDIC shall presume that the name/s appearing on the deposit instrument is/are the actual/beneficial owner/s of the deposit, except as provided herein. In case of transfer or break-up of deposits, PDIC shall recognize actual/beneficial ownership of transferees who are qualified relatives of the transferor. Qualified relatives are transferees within the third degree of consanguinity or affinity of the transferor.
- In case of (a) deposits in the name of, or transfers or break-up of deposits in favor of, entities, either singly or jointly with individuals, and (b) transfers or break-up of deposits in favor of non-qualified relatives, whenever such transfers/break-up will result in increased deposit insurance coverage, PDIC shall recognize beneficial ownership of the entity or transferee provided that the deposit account records show the (1) details or information establishing the right and capacity or the relationship of the entity with the individuals, or (2) details or information establishing the validity or effectivity of the deposit transfer, or (3) copy of Board Resolution, order of competent government body/agency, contract or similar document as required/provided by applicable laws. In the absence of any of the foregoing, PDIC shall deem the outstanding deposit maintained for the benefit of the transferor although in the name of the transferee, subject to consolidation with the other deposits of the transferor. PDIC may require additional documents from the depositor to ascertain the details of the deposit transfer or the right and capacity of the transferee or his relationship to the transferor.
13. INTEREST - Deposits with a minimum balance as prescribed by the Bank shall earn interest based on the prevailing rates. However, the amount of said minimum balance that will earn interest and interest rates are subject to change in accordance with the regulations issued or promulgated by the BANK. Interest will be computed based on the average daily balance of the deposit and credited to the account and shall become part of the principal. No interest shall be paid on savings and demand deposit accounts closed prior to prescribed interest payment dates even if these accounts meet the required minimum balance to earn interest at the time of closure. All interest earned shall be subject to the prevailing withholding tax rate except those with BIR Certification of Exemption.
14. SERVICE FEES/PENALTY CHARGES - A fee shall be charged on the following:
- Accounts falling below the required minimum balance for two (2) consecutive months
  - Dormant accounts or those with no deposit or withdrawal for a continuous period of two (2) years for savings and one (1) year for current
  - Accounts closed within a month after opening
  - Request for the issuance of certification of account balances
  - Replacement of lost passbook
  - Other fees and charges which the BANK may impose depending on whatever policy it may adopt in the future.
- The service fees/penalty charges shall be in accordance with existing bank regulations.
15. Pursuant to Act 3936 as amended by PD 670 of April 2, 1976, all unclaimed balances held by this BANK in favor of any person known to be dead or who has not made further deposits/withdrawals for a period of 10 years or more shall be transferred to the credit of the Republic of the Philippines.
16. A statement of account shall be sent by the BANK to the DEPOSITOR. The DEPOSITOR shall be deemed to have received the statement of account or have accepted the correctness of the entries made therein or deemed to have waived any

claims against the BANK if after the lapse of fifteen (15) days from the date of receipt of such statement of account, the BANK does not receive any written notice to the contrary from the DEPOSITOR. Unless the pick-up option is specified, the statement of account will be mailed to the DEPOSITOR. The DEPOSITOR shall promptly notify the BANK in writing of any change of address.

#### B. ADDITIONAL PROVISIONS FOR CURRENT ACCOUNTS

- The DEPOSITOR shall make an initial deposit in such amounts as may be prescribed by the BANK.
- Dormant current accounts shall be charged a monthly service fee. A monthly service charge shall be imposed in case the balance falls below the minimum requirements. A fee may also be imposed by the BANK for certification of deposit balances. Interest-bearing deposits shall earn interest at the rate and manner set forth by the BANK.
- The BANK shall send DEPOSITOR a monthly remitted statement of account together with scanned images of cancelled/negotiated checks. BANK shall consider the statement accepted and acknowledged to be correct by DEPOSITOR in case the BANK does not receive any notice from DEPOSITOR on any error in the statement not later than thirty (30) days from date of receipt by DEPOSITOR of the statement. Further, after six (6) months from statement date, the unclaimed Bank statements of accounts including the scanned images of cancelled/negotiated checks and client's copies of debit and credit memos shall be disposed of by shredding.
- DEPOSITOR may request closure of the account at any time provided that such closure shall be effected by BANK only after all checks drawn by DEPOSITOR against the account and unissued checks shall have been accounted for to the satisfaction of the BANK. The DEPOSITOR is under obligation to return to the BANK all unissued checks and DEPOSITOR shall be liable to BANK for any damage or liability which the BANK may incur or suffer or be put to by reason of DEPOSITOR's failure to surrender said unused checks.

#### C. DEPOSITORS AVAILING OF THE AUTOMATED TELLER MACHINE (ATM) FACILITY ARE BOUND BY THE FOLLOWING CONDITIONS

- The DEPOSITOR acknowledges that the Automated Teller Machine (ATM) card is and shall remain the property of the BANK and must be surrendered to the BANK upon request.
- The DEPOSITOR further agrees that the BANK may cause the ATM to retain the card automatically at any time and without notice to the client.
- The DEPOSITOR must keep the ATM card in a secure place at all times and to exercise due caution to prevent its loss, theft or misuse. In case of lost/damaged/mutilated ATM card, a fee shall be charged if the DEPOSITOR requests for a replacement card.
- Confirmed loss or theft of card should be immediately reported to the BANK's branch where the account is maintained, using the Notice of Lost Card (ATM Form No. 2). The BANK will not be responsible for any unauthorized transaction caused by use of lost/stolen ATM card until after 24 hours that the written notice has been filed by the DEPOSITOR. Phoned-in notice of loss may be entertained subject to the above condition.
- The DEPOSITOR must not reveal the Personal Identification Number (PIN) or cause to reveal the PIN to any person under any circumstances.
- The DEPOSITOR shall assume full responsibility for all transactions made by the use of his/her ATM card whether or not made with his/her knowledge or authority.
- Cash and check deposits shall be credited to the DEPOSITOR's account only after verification and count by two (2) authorized representatives of the BANK. Checks will be accepted on collection basis and may be withdrawn only after the prescribed reglementary clearing period. The BANK may charge back any defective or lost item credited to this account regardless of the time that has elapsed whether or not the item itself can be returned. Only first endorsed checks are allowed for deposit thru the ATM.
- The BANK shall issue a Statement of Account -
  - to the DEPOSITOR who has signified his/her desire to be provided with bank statements on a quarterly basis; and
  - upon the DEPOSITOR's request with the maintaining branch.

The DEPOSITOR must notify the BANK of any error in ATM transactions/statements within 15 days from the date error occurred.

- The BANK or the DEPOSITOR may cancel this agreement at any time even without prior notice, subject to applicable laws and regulations.
- The BANK reserves the right to change a part or the whole of this agreement with notice to be given to the DEPOSITOR within 21 days except immediate change(s) necessary to protect the security of the ATM or the account.
- The DEPOSITOR are bound by the additional provisions contained in the PIN matter envelope.

#### D. ADDITIONAL PROVISIONS FOR TIME DEPOSITS

- Upon maturity of the time deposit. The DEPOSITOR shall present to the BANK the duly endorsed covering Certificate for purposes of renewal or redemption, as the case may be.
- The Certificate is non-transferable and may be opened for a minimum amount and term as determined by the BANK.
- Matured time deposit not withdrawn or renewed on its due date shall earn interest at the rate applicable to savings deposits from maturity to the date of actual withdrawal or renewal.
- In case of pre-termination of time deposit, the equivalent documentary stamp tax shall be collected from the client including other penalties which may be imposed by the bank.

ADDENDUM TO THE TERMS AND CONDITIONS GOVERNING THE OPENING  
AND MAINTENANCE OF DEPOSIT ACCOUNTS

"Depositor/Beneficiary and Remitter (hereinafter collectively referred to as Accountees) warrant that their accounts (of whatever nature such as but not limited to remittances, deposits, investments or trust accounts, and herein referred to as Accounts) shall not be utilized for money laundering activities nor for funding terrorism; and that the funds thereof, including all increments and additions thereto, shall not emanate from illegal/or criminal activities or sources.

Any rule or law to the contrary notwithstanding, the Accountees agree that regulatory authorities of the Philippines as well as of countries where the funds or moneys originate may conduct reasonable examination, inquiry or investigation of the Accounts or otherwise require submission of pertinent data and papers for the purpose of removing any doubt or suspicion that the Accounts are involved in money laundering activities or in financing terrorist activities or other illegal activities. Accountees allow, consent, permit, or authorize the Bank or its branches, agencies and instrumentalities to participate in such examination, investigation or inquiry and to submit pertinent data and papers relevant to the objectives of such examination or inquiry.

For this purpose, the Bank, its branches, agencies and instrumentalities are authorized to disclose such data and papers as are required by said regulatory agencies conformably with the "Know Your Customer Policy" principles, without incurring any criminal, civil or administrative liability therefore".

Authorized Signature/s:

\_\_\_\_\_/\_\_\_\_\_

Account No. : \_\_\_\_\_

Account Name : \_\_\_\_\_

Date : \_\_\_\_\_