

PERSONAL ACCOUNT OPENING FORM

Please complete this form in CAPITAL letters and tick where applicable

I wish to open the following account(s), and related services. I undertake to comply, observe and be bound by the Terms and Conditions and tariffs made by Jitegemee Sacco and as amended from time to time pertaining to such accounts as per the General terms and Conditions document availed and read by me

(To expedite processing, please enclose the requisite documents in the checklist on page 2)

Jitegemee Sacco Branch Account Name:	Date of Application: Account Number:						
GENDER:	MARITAL STATUS:	☐ Single ☐	Married Divorced	☐ Widowed			
PERSONAL DETAILS	First 12 - 2 - 2 (-)		041				
Surname			Other names				
Nationality	•		Date of birth				
Postal Address	Postal Code	Postal Code		City/Town			
Home phone/Office phone	Mobile No		E-Mail				
Document of Identification: National ID Page 1	assport 🗌 Alien ID 📗 Oth	ers (Please specify)					
ID No/Passport No	Date of Issue		Passport's expiry Date				
KRA Pin No:	Residential Status: Ov	ned Tenant T	Mortgaged Years in current residence				
Physical address							
Estate/Residential Area	Block/House Name		Floor/House No				
Next of kin/contact person							
Name			ID No. / Birth Cert. No.:				
Postal Address							
E-mail	Relationship		City/Town				
Other accounts with Jitegemee Sacco							
Name	Branch		Customer No				
Name	Branch		Customer No				
Employment/Business Details							
Current Employer/Business	Area/City/Office location	Area/City/Office location		Employee No.			
			Floor/ Office No				
Years in Employment/Business		Telephone No:					
SECTOR: Agriculture Mining & Quarr	ving Manufacturing	Energy & Water □ Bu	uilding & Construction	rade Government			
☐ Transport & Communication	_	_	-				
FOR JUMBO SUPERIOR APPLICATIONS (FILL T	HE FOLLOWING SECTION) T	CK APPROPRIATELY-0	CHILD'S GENDER IS	MALE FEMALE			
· OTTOOMES CO. ETHORY I LIGHTING (IEE I	TIE T GEEGVIIVA GEGTIGIV, TI	017,111101111711221	THE GALINDENTIG	1717 (22			
Child's First Name: Midd	dle Name:	Last Name:					
Date of Birth: Birth	n Certificate/Notification N	0.					
Relationship with Child (Tick) Parent	Guardian	Others (Specify	· II	Affix Passport Photo			
Applicant's Signature (Sign at the center of the Box)				niin i asspuit Filutu			



M-JITE REGISTERATION (MOBILE BANKING SERVICE) Yes ■ No ■										
Mobile Number for M-Jite Services:	Si				Signature					
Cancel out if not applicable:										
Alerts: Automatic sending of Mobile All Credit Alerts alert (Tick to subscribe)	s Y[□ N □	All Debit Alerts	Υ□Ν	1 🗆					
TO JITEGEMEE SACCO										
I agree that this account(s) shall be operated solely at the discretion of Jitegemee Sacco and hereby agree to indemnify the										
Sacco my cost against any loss or claims arising out the account being closed by Jitegemee Sacco without notice due to										
unsatisfactory performance. I confirm having read and understood the general terms and conditions a copy of which has										
been availed to me this day Month Year and which I accept.										
TERMS AND CONDITIONS APPLY										
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Name in Full (BLOCK LETTERS) of Authorised Signature		National ID / Passport No.		Specimen Signature						
Applicant's Name:										
For Official use only										
CUSTOMER INFORMATION CHECKLIST										
Valid identification documents obtained and authenticated as per procedure	Yes	No	All customer contacts information obtained		Yes	No				
Photographs obtained/Captured and authenticated	Yes	No	Mandated signatures obtained		Yes	No				
Mobile Banking Registered	Yes	No	Next of kin ID/Cert copy		Yes	No				
Sales Rep No:										
Branch										
Account Opened By: Name										
Account Authorized By:		Signature .	D:	ate						
Branch Manager		Signature .	Da	ate						