Dormant Account Activation Form



Branch/Sub Branch:	Date:					
Account Holder's Information (Cu	ustomer's Phy	sical Pre	sence is	MANE	DATORY)
Account Title:						
Account No:						
The Manager, I/We would like to active the above-mentioned acco	ount, which becam	e "Dormant	" due to the	e following	g reason:	
From now on, I/We intend to operate the account regunder account on my/our behalf. Appreciate your earliest are defect.						
	Signature Verified & Mode of Operation Checked					
** Signature of 1st Accountholder		** Signature of 2nd Accountholder				
For Service Outlet use only: Following document	nts/information are	checked &	confirmed:			
□ Valid NID /Passport copy, if not available/updated in					nission Serv	er)
□ Valid Passport copy [only for Probashi accounts/ No						
□ Address checked & confirmed (if address changed,				-		
Personal & Account Information, Email & Contact NAstha Enrolled (as applicable)Updated Profe	ession/Income docu			_		
Obtain updated Trade License and other related do	•					0 101111.
□ UN Sanction Screening of the Customer, Beneficial					•	
☐ An amount to be deposited into customer's a/c before			<i>5,</i> 2	0.0 (0.0 0.0)	p,	
	_	·				
Modified By (Signature with Seal/PIN)		_	Verified By	(Signatur	e with Sea	I/PIN)
For Operations use only:						
☐ Account is activated in due process ☐ Suppo	orting Documents	checked & fo	ound ok (if a	attached)		
Note: KYC review (if required). High Risk accounts are periodineeds to undergo KYC/CDD obligation as per bank's policy be completion before dormant status is lifted will follow five year	efore dormant status is	lifted. Other th	nan high risk a	ccount requ	uirement of C	