

Commercial Bank of Ceylon PLC (Reg. No: PQ116)

Treasury Division, Commercial House, No: 21, Sir Razeek Fareed Mawatha, P.O.Box 853, Colombo 01, Sri Lanka. (Fax: 011 2449516/2384650)

 **COMMERCIAL BANK****APPLICATION TO INVEST IN GOVERNMENT SECURITIES UNDER RE-PURCHASE AGREEMENT / OUTRIGHT (INDIVIDUAL/JOINT/SOLE PROPRIETORSHIP/PARTNERSHIP)****INDIVIDUAL CLIENT / JOINT CLIENT / SOLE PROPRIETOR / PARTNER INFORMATION****(To be completed in BLOCK Capitals)**

Title	:	Mr./Ms./Dr./Mrs./Rev.	NIC No	:	<input type="text"/>
Surname	:	<input type="text"/>			
Other Name	:	<input type="text"/>			
Title	:	Mr./Ms./Dr./Mrs./Rev.	NIC No	:	<input type="text"/>
Surname	:	<input type="text"/>			
Other Name	:	<input type="text"/>			
Title	:	Mr./Ms./Dr./Mrs./Rev.	NIC No	:	<input type="text"/>
Surname	:	<input type="text"/>			
Other Name	:	<input type="text"/>			
Title	:	Mr./Ms./Dr./Mrs./Rev.	NIC No	:	<input type="text"/>
Surname	:	<input type="text"/>			
Other Name	:	<input type="text"/>			
Address	:	<input type="text"/>			
Tel No	:	<input type="text"/>	Fax No	:	<input type="text"/>
Email	:	<input type="text"/>			

FOR SOLE PROPRIETORSHIP & PARTNERSHIPS ONLY

Business Name	:	<input type="text"/>																					
B/R No	:	<input type="text"/>																					
Address	:	<input type="text"/>																					
Tel No	:	<input type="text"/>										Fax No	:	<input type="text"/>									
Email	:	<input type="text"/>																					

INVESTMENT INFORMATION

(Please mark with "X" as appropriate)

☐ Investment ☐ Face Value , , .

Amount in words: _____

TERM:
☐ 1 ☐ 3 ☐ 6 ☐ 12 Months ☐ Others (Specify)
SOURCE OF FUNDS

Cash / Remittance/ Cheque No _____ Drawn on _____

Debit my/our Current/Savings Account bearing Number _____ at your bank.

MATURITY INSTRUCTIONS

- ☐ Please re-invest principal with accrued interest for a similar period.
- ☐ Please re-invest principal without accrued interest for a similar period and credit accrued interest to my/our Current/Savings Account Number _____ at _____ Bank _____ Branch.
- ☐ Please credit maturity proceeds to my/our Current/Saving Account Number _____ at _____ Bank _____ Branch
- ☐ (Other instruction if any) _____

OPERATING INSTRUCTIONS-FOR JOINT ACCOUNTS & PARTNERSHIPS ONLY.

All instructions with regard to withdrawal, disposal or otherwise will be given by;

Name :

Contact No/s :

I/We undertake to give prior written reinvestment instructions of any change in maturity instructions **before the Maturity Date.**

I/We also authorize you to open and maintain a Securities Account in my/our Name at the Central Depository System (CDS) to record securities allocated on this transaction.

I/We here by affirm that General Terms and Conditions overleaf have been read and understood.

Authorized Signatories..... (1) (2) (3) (4)

Date:/...../.....

GENERAL TERMS & CONDITIONS

- All primary dealer transactions are subject to the Customer Charter available in the Central Bank of Sri Lanka (CBSL) website www.cbsl.gov.lk
- Investor shall agree to abide by the CBSL & Commercial Bank of Ceylon PLC (The Bank) rules & regulations already inforce & that shall be enforced in future.
- All transactions on Government Securities shall be dealt by the Bank in accordance with the terms and conditions of the Master Repurchase Agreement (MRA) entered into with the Investor/s.
- Facilities are made available by the Public Debt Department of the CBSL to receive periodic statements of their Government Securities account in electronic form or through the postal system.
- Investor shall provide all documents and other information required by the Bank/ regulator for the purposes of engaging in Government Securities transactions.
- Bank shall keep information relating to the Investor as confidential. However, the Bank may disclose such information if the Investor consents to or if any such information is required to be disclosed by any statute or by any Court of Law.
- Investor/s agrees to indemnify the Bank from any loss or liability arising due to carrying out any instruction provided by the Investor.
- Investor/s agrees to provide instructions pertaining to maturity proceeds at least **seven (07) calendar days** prior to maturity. In the event of such instruction not being received, the Bank may reinvest such proceeds for a period not exceeding the period of the earlier transaction, in accordance with the Customer Charter.
- Investor/s shall immediately notify the Bank of any changes to existing operating instructions along with required supporting documentation.
- Investor/s shall pay applicable fees & charges if any published by the Bank from time to time.
- Investor/s shall inform Primary Dealer Unit of the Bank of any discrepancy on a transaction relating to investments within **14 working days** of such transaction.

OFFICE USE ONLY

We confirm having obtained following documents

- ☐ Know Your Customer form/s
- ☐ Master Repurchase Agreement
- ☐ Certified copy of Power of Attorney (if applicable)
- ☐ Certified copy of Custodian Agreement (if applicable)
- ☐ Certified copy of Business Registration
- ☐ Certified copy of CA15 form
- ☐ Authorized signatories

(IN CASE OF STAFF MEMBERS)

EMPLOYEE NO:

DEPARTMENT/BRANCH : Authorized Signatory /Branch Manager (Signature No _____)

REMARKS (IF ANY)

☐ Funds confirmed and Signature verified