



PO Box 1748, Boroko,
 NCD, Papua New Guinea
 Telephone: 323 3396 / 323 3337 Fax: 323 3438
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APPLICATION FOR NEW TERM DEPOSIT:

Date _____

I/We wish to open up a new Term Deposit on the terms and conditions detailed on this application as follows:

Customer/Company Name _____

Postal/Business Address _____

Telephone Number _____

Facsimile Number _____

Email Address _____

New Term Deposit Details:

Term in Days	Principal Amount	Interest Rate (p.a)	Maturity Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Terms & Conditions:

The depositor(s) acknowledges that in the absence of any written instructions for the renewal of this deposit prior to the date of maturity, Heduru Moni Limited will automatically renew the deposit for a similar term and at the prevailing interest rate at the date of maturity. Interest will be calculated on the number of days in the term.

Interest payments on short term deposits will be made on maturity. Quarterly interest payments will be made on deposits for a term of one year or more.

We are required by the Internal Revenue Commission to deduct 15% of the gross interest income paid or credited after 1st January 1999.

We wish to advise that early redemption of deposits will not be permitted however if such a request is agreed to by "Heduru Moni Limited", a penalty interest rate will be advised at the time of transaction. Other than that, any prepayments is to be done on maturity date.

Minimum deposit is K5,000.00

This application must be signed personally. In the case of Joint applications, all customers must sign.

Authorised Signature(s)

No	Print Name	Position	Signature
1			
2			
3			
4			

(If more than one signature required)

 Organisation/Company Seal



CUSTOMER INFORMATION SHEET

Date _____

A) FOR INDIVIDUALS ONLY

Surname:		First & Middle Name:		Date of Birth:	_____
Surname:		First & Middle Name:		Date of Birth:	_____

B) FOR COMPANIES/CLUBS AND SOCIETIES ONLY

Company Name _____

Contact Person _____ Position _____

Type of Business or Activity: _____

C) DOCUMENTATION FOR BUSINESS/CLUBS AND/OR SOCIETIES

Companies Only

Clubs/Societies etc.

Cert. of Incorp. Held Yes No

Minutes Held Yes No

IPA Certificate Held Yes No

Written Const. Held Yes No

D) BANK ACCOUNT DETAILS: (for all withdrawals/repayments and interest payments)

*** Bank Account Name must be same as Term Deposit name for payment purposes***

Bank Account Name _____

Branch Name _____ Account No. _____

E) AUTHORISED SIGNATORIES:

For Individuals

_____ Date _____

1. Customer's Signature 2. Customer's Signature 3. Customer's Signature

Signature Option for Joint Accounts One to Sign Either to Sign Both to Sign

For Companies/Clubs/Societies etc:

1	Name:		Position:		Signature:	
2	Name:		Position:		Signature:	
3	Name:		Position:		Signature:	

[Company: Director & Secretary, or two Directors or Sole Director/Sole Secretary to sign]
 [Club/Society: Chairman/President & Secretary to sign]

Office Use Only

Verified by:	Authorised by:
_____	_____

Date _____ Date _____

Form of Payment
- Chq No.
Receipt No.
Date:/...../.....