

CURRENCY BASKET APPLICATION FORM

The Director
AfrAsia Bank Limited
Bowen Square
10, Dr Ferriere Street
Port Louis

Date: ____/____/____

Dear Sir / Madam

Kindly open a Currency Basket Account at your bank in name of:

Main Applicant: _____
_____ CIF No. _____

Second Applicant: _____
_____ CIF No. _____

(In case of minor)

Minor Name: _____
_____ CIF No. _____

Legal Guardian: _____
_____ CIF No. _____

The Mode of operation on this Account will be:

- Singly by _____
- Either by _____ or _____
- Jointly by _____ and _____
- In case of minor, account will be operated by legal guardian.

DEPOSIT AMOUNT : MUR _____

FOREIGN CURRENCY PLACEMENT: CLASS 1 CLASS 2

CURRENCY SPLIT : AFRICA BASKET ASIA BASKET GLOBAL BASKET

DEBIT ACCOUNT NUMBER : _____

INTEREST CREDIT ACCOUNT : _____

(Special instructions if any: _____)

These instructions remain valid unless I/We notify you otherwise. If for any reason I/we have to withdraw my/our deposit, a week's notice will have to be given prior to encashment.

I/We confirm that the funds to be credited to this account are not connected in any way to any unlawful financial activity, pursuant to any Anti-Money Laundering Legislation in force in the Republic of Mauritius.

Yours faithfully,

Signature (Main Applicant/Legal Guardian)

Signature (Second Applicant)

FOR BANK USE ONLY

Customer Number(s): _____

Account Number: _____



Transaction Number: _____

Prepared By: _____

Checked By: _____