

FOR USE WITH SINGLE OR JOINT ACCOUNTS

Name in full (1)

Address

Name in full (2)

Address

* to the BANK OF NEVIS LTD.

Please open an account in your Bank in the joint names of the undersigned. All monies deposited in this account from time to time, and the interest thereon are to be paid upon the signature of either of the undersigned, and in the case of the death of either, upon the signature of the survivor.

Signature (1)

Signature (2)

Occupation (1) (2)

Date

Account No.

.....
S2

.....
Witness

* TICK IF APPLICABLE.

COMPLETE IF JOINT A/C

We hereby agree that any cheque or orders for payments of money payable to either of the undersigned may be deposited to the joint account conducted with you in our names.

.....
Signature

.....
Witness

.....
Signature