

FOSA ACCOUNT OPENING APPLICATION FORM

	ACCOUNT TYPE	TICK		ACCOUNT TYPE	TICK
1.	SAVINGS ACCOUNT / (JIPANGE A/C)		5.	HOLIDAY ACCOUNT (BAMBIKA A/C)	
2.	SALARY ACCOUNT (SALOH A/C)		6.	FIXED DEPOSIT ACCOUNT	
3.	CHILDREN ACCOUNT (KULEA A/C)		7.	VIP ACCOUNT	
4.	JOINT GROUP ACCOUNT (UMOJA A/C)		8.	COMPANY ACCOUNT (TUJIJENGE A/C)	

APPLICATION TO OPEN AN ACCOUNT

I/We the undersigned hereby apply to open an account to be styled/named as follows:						
articulars are as detailed here below:						
SURNAME: OTHER NAMES:						
ID/PASSPORT NO: PASSPORT EXPIRY DATE:						
PHONE NO/s.:						
PRESENT BANKER: BRANCH:						
NEXT OF KIN: CONTACT NO.:						
POSTAL ADDRESS.:						
RESIDENCE.:						
Indemnity Clause: "I/we agree that the information given above is true and tis account shall be operated solely at the discretion if the SACCO and hereby indemnify the SACCO at my/out cost against any loss incurred or claims arising out of the account being closed without notice because of unsatisfactory performance.						
NAME:						
SIGNATURE: SIGNATURE:						
DATE:						

Kenya Airports Authority, HQS K.A.A Fire Training School

P.O. Box 19048 - 00501, Nairobi – Kenya Website: www.airportssacco.co.ke

FOR OFFICIAL USE ONLY

Witnessed by:		
NAME:	SIGNATURE:	DATE:
Authorized by:		
NAME:	SIGNATURE:	DATE:

SB 2 AIRF	SPECIMEN SIGNATURE CARD PORT SACCO SOCIETY LTD (FOSA SECTION) Date	
Title of Accou	nt	
Account No.		
	Name	
Signature		РНОТО
	ID NO	
Signing Instru	ections	_
Authorized Si	gantureDate	