Commercial Bank of Ethiopia

APPLICATION FOR OPENING OF NON-RESIDENT FOREIGN CURRENCY ACCOUNTS FOR ETHIOPIANS AND FOREIGN NATIONALS OF ETHIOPIAN ORIGIN RESIDING ABROAD (Foreign Housing Development Scheme)

NAME OF APPLICANT_____

OFFICE ADDRESS_____P. O. BOX_____TEL_____

E-MAIL_____NATIONALITY_____

OCCUPATION **OR** NATURE OF BUSINESS _____

PLACE OF PERMANENT RESIDENT_____

PASSPORT/ETH. ORIGIN ID NO. _____ PLACE OF ISSUE _____

INITIAL DEPOSIT _____

TYPES OF ACCOUNTS TO BE OPENED

☐ DEMAND DEPOSIT ☐ FIXED TIME DEPOSIT

☐ NON-REPATRIABLE BIRR A/C

NB I have agreed to transfer 50% of the construction cost of the Diaspora Housing Program from my foreign currency bank account at the Commercial Bank of Ethiopia as soon as the Housing Association opens a blocked birr account for its members'. ☐ Yes ☐ No
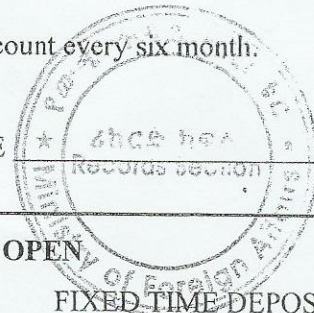
I CONFIRM THE ABOVE INFORMATION AND STATEMENT ARE CORRECT AND TRUE. I AM ALSO AWARE OF THE CRIMINAL AND CIVIL LIABILITY FOR MAL OPERATION OF ACCOUNTS.

NOTICE

1. If your account does not show any movement for six month or over, the account will be considered as dormant and be transferred to INACTIVE ACCOUNTS.

2. If the balance in each INACTIVE ACCOUNT is less than Birr 50.00 a charge of Birr 5.00 will be deducted at the end of each six month, and if the balance is Birr 5.- or less, the whole balance thereof will be charged and the account will be closed.

3. When you start living in Ethiopia after completion of your stay abroad, your account will be closed and the balance will be transferred to local account.

Bank will dispatch statement of account monthly and for inactive account every six month.

DATE _____APPLICANT SIGNATURE _____

FOR OFFICE USE ONLY PLEASE OPEN

☐ DEMAND DEPOSIT ☐ FIXED TIME DEPOSIT

☐ NON-REPATRIABLE BIRR A/C

ACCOUNT IN THE NAME OF _____

ACCOUNT NO. _____

OUR REFERENCE NUMBER **ETH/DIASP /** _____

PLEASE NOTE THAT THE PROPOSED ACCOUNT HAS TO BE OPERATED STRICTLY IN LINE WITH NATIONAL BANK DITRECTIVE

DATE _____   STAMP _____

Counter clerk's signature_____   Auditor's Signature _____

Approved by: - _____