

Product Type: RAPID SAVING RAPID FIXED DEPOSI	TADVANTAGE INVESTMENT A/C RAPID
Personal Details	
Title:	Gender
First Name	Last Name
Initial Deposit GH¢	TIN (*)
Date of Birth	Place of Birth
Nationality	Education Level
Religious Affiliation	
Religion	
Transaction Notification	
Phone Numbers	Email
Identification	
Form of Identification	Social Security No
ID Number	Date of ID Issue
ID Issues Authority	Place of ID Issue
	Mobile Money Number
Nationality	Region / State
Residential Information	
Region/state	Residential Digital Address
Suburb P	ostal Address
Nearest Landmarks	
Work Information	
Occupation	Suburb
Name of Employer	Employer's Contact Person

Rapid Link Microfinance Limited is a member of the Ghana Deposit Protection Scheme. If the license of this MFI / SDI is revoked by the Bank of Ghana and this MFI / SDI goes into receivership, GDPC shall reimburse insured depositors of this MFI/ SDI up to the limits specified by the Ghana Deposit Protection Act, 2016, Act 931, as amended.



Digital Address of Employer Employer's Contact No			
Employer's Postal address Region/State			
Nearest Land mark			
Net Income Ghc Source of Fund			
Marital Status .			
Marital status No of Children/Dependants			
Spouse's Surname Other Names			
Spouse's Date of Birth Spouse's Occupation			
Spouse's Employer's Name Tel			
Nationality			
Next of Kin			
First Name Surname			
Relationship Phone Number			
I/WE, CONFIRM THAT ALL THE INFORMATION I/ WE			
HAVE GIVEN ARE THE MOST ACCURATE TO THE BEST OF MY/ OUR KNOWLEDGE. I/WE AUTHORIZE RAPID LINK MFI TO SEEK CHARACTER REFERENCE IN ADDITION TO OTHER RELEVANT INFORMATION THAT MAY BE REQUIRED			
SIGN: Date:/			
FOR OFFICIAL USE ONLY			
Account Number:			
Account Officer in charge/ Date/			
Signature:			
Authorized Officer: Date/			
Signature			

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TERMS AND CONDITIONS	
Please read this page carefully. It provides you with important information about Rapid Link Microfinance Limited Savings Account.	
A. SCOPE	
We/Our/Us/the Microfinance" means Rapid Link Microfinance Limited	
"You/your/ yours" means the customer or customers	
"Account" means a Savings Account with us.	
.B. Your Account	
We reserve the right to refuse to accept an application. You agree that we may contact you by email, phone, SMS, and by any other means we deem appropriate. All notices or letters may be sent to the a supplied by you and be considered duly delivered and received at the time it is delivered or seven days after posting.	address
We may refuse to carry out instruction:	
If it does not comply with the Mandate	
If you do not have sufficient funds available	
If we doubt the authenticity of an instruction	
 If the instruction is ambiguous or not sufficiently clear Where we believe acting on such instruction might put us in breach of any law, regulation, code or contractual obligation binding on us. 	
• If we suspect that your Account has been or is likely to be misused, whether fraudulently or otherwise. It is your responsibility to check any transaction notifications carefully. Any anomaly in the entries on your notification must be brought to our atter soon as reasonably practicable, in writing and in any case within twenty-one (21) days from the date on which the transaction notification was dispu- you. If you make a claim that an unauthorized transaction has been made on your account, we may ask you to make or support us to make a report	ntion as atched to t to the
police. You agree that you will provide us with all the information you have about the transaction and take steps we deem necessary to assist with a recovery of funds. You warrant that the information you provide is accurate, true and complete. If the information is found to be false or you misre the facts, we may report you to the police and you will be responsible for all costs we may incur. All transactions will be processed in accordance wi	presented
processes and procedures. However, if in a rare instance we mistakenly perform a transaction on your account we may take all steps necessary including but not limited to del	
account without prior notice. In such circumstances we may notify you within fourteen (14) days of processing the transaction. C. Dormant Account	0,
If you do not operate your account for a period of TWO YEARS (2) we will classify your account as dormant. If you wish to use a dormant account yo write to us.	ou must
Change of Terms and Conditions	
We (Rapid Link) have the absolute discretion to amend or supplement any of the terms at any time.	
D. Disclosure Policy	
Where we are required under anti money laundering regulations to verify the identity of potential account holders and authorized persons when op account, we shall do so. This shall include but not be limited to verifying your name and address. We may carry out searches at credit reference age may add a record of our search to their records. You agree that we may use your data and customer information for assessment to meet our compl obligation on your account held with the institution. Declaration on Customer information.	encies who
You warrant that information given in respect of this account opening is correct. You further undertake to indemnify the Institution for any loss suff result of any false information or error in the information provided to the institution.	fered as a
I acknowledge that I have read and that I accept the SAVINGS Account Terms and Conditions and I agree to be legally bound by them.	
Signed	
Required Documentation (Personal)	
Valid ID	
1 size Passport Picture with clear face shown Digital Address	
ccount opening mandate	
lease tick as appropriate	
ole signatory Either to sign Both to sign	

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Joint and Several Clause

Savings Joint Account Number

To Rapid Link Microfinance Limited

Date (dd/mm/yyyy)

I/ We request you to open a joint savings account subject to the regulations relating to savings account for the time being in force in the name(s) of



And I/ we authorize you to permit withdrawals by either/both/any one or more/all of us of any amount.

This authority is to remain in force until either/both/any one or more/all of us shall have expressly revoked it by notice in writing delivered to you.

For Internal use	Signature
	Circustowe
Account Number	Signature
	Signature

CONFIRMATION OF RECEIPT OF LEAFLET AND VERBAL EXPLANATION ON THE GHANA DEPOSIT PROTECTION SCHEME

I hereby confirm that I have received from RAPIDLINK Microfinance Limited verbal explanations and a leaflet on the deposit protection scheme in Ghana.

(Name of the client)

(Name of officer)

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