

# Account Opening Form

*for personal single and joint accounts*



**HSBC** 

The world's local bank

Branch: \_\_\_\_\_ الفرع:

Date: \_\_\_\_\_ التاريخ:

**Personal Details****بيانات شخصية**

	Account Holder (1) صاحب الحساب (١)	Account Holder (2) صاحب الحساب (٢)	Account Holder (3) صاحب الحساب (٣)	
Title	Mr./Mrs./Miss./Others السيد/السيدة/الآنسة/غيرها	Mr./Mrs./Miss./Others السيد/السيدة/الآنسة/غيرها	Mr./Mrs./Miss./Others السيد/السيدة/الآنسة/غيرها	اللقب
Family Name				الشهرة
First Name				الاسم
Middle Name				اسم الأب
ID/Passport/Extract No.				رقم الهوية/جواز السفر/إخراج القيد
Expiry Date				تاريخ الانتهاء
Nationality/N.N				الجنسية/الرقم الوطني
Place and Date of Birth				تاريخ ومكان الولادة

**Residential Address****عنوان السكن**

	Account Holder(1) صاحب الحساب (١)	Account Holder(2) صاحب الحساب (٢)	Account Holder(3) صاحب الحساب (٣)	
Bldg. Name/No. & Floor				اسم / رقم البناية والطابق
Nearby				قرب
Street Name/No.				اسم/رقم الشارع
Sector/City				المنطقة/المدينة
P.O. Box No.				صندوق بريد رقم
Postal Code				الرمز البريدي
Country				البلد
Home Telephone No.				رقم هاتف المنزل
Fax No.				رقم فاكس
Mobile Number				رقم الهاتف الخليوي
E-mail Address				عنوان البريد الإلكتروني

**Employment Details and Address****بيانات وعنوان العمل**

	Account Holder(1) صاحب الحساب (١)	Account Holder(2) صاحب الحساب (٢)	Account Holder(3) صاحب الحساب (٣)	
Job Title				الوظيفة/المنصب
Monthly Income in JOD				الدخل الشهري بالدينار الأردني
Years with Employer				عدد سنوات الخدمة لدى الشركة
Employer Name/Code				اسم صاحب العمل/رمز
Office Telephone No.				رقم هاتف المكتب
Employer Address				عنوان صاحب العمل

**Type of Account****نوع الحساب**

	Currency العملة	Resident/Non Resident مقيم / غير مقيم	ATM Card بطاقة الصراف الآلي	
Current Account				حساب جاري
Savings Account				حساب التوفير
Statement of Account Issuance	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half yearly <input type="checkbox"/> Yearly		<input type="checkbox"/> ربع سنوي <input type="checkbox"/> شهري <input type="checkbox"/> نصف سنوي <input type="checkbox"/> سنوي	إصدار كشف الحساب

\*Interest Waiver: Please note that I/we do not wish to receive interest on my/our above account with you, unless and until you receive my/our signed instructions to the contrary, in whichcase I/we agree that computation of interest will commence from the date of receipt by you of such signed instructions

Sig. \_\_\_\_\_

يرجى العلم بانتي/بانتنا لا نرغب في استهفاء فائدة على حسابي/حسابنا لديمك، إلا إذا تم استلام تعليمات خطية من قبلي/قبلنا على غير ذلك كما وأوافق على ان احصاء الفائدة سوف يبدأ من تاريخ استلام التعليمات الخطية الموقعة

التوقيع

Permanent Address in home country (Note for Jordanian)

العنوان الدائم في بلد الوطن (لغير الأردنيين)

Bldg. Name/No. & Floor		اسم/رقم البناية والطابق
Street Name/No.		اسم/رقم الشارع
Nearst Land Mark		أقرب المعالم المعروفة
City/Zip/Country		المدينة /رمز المنطقة/البلد
Contact name at the address		اسم الشخص الذي يمكن الإتصال به هناك
Telephone/Country Code Area Code/Tel/Fax		هاتف:رمز البلد رمز المنطقة/رقم الهاتف/الفاكس

Other Personal Information: (Please mark appropriate box)

بيانات شخصية أخرى: (الرجاء وضع علامة على المربع المناسب)

Account Holder(1) صاحب الحساب (١)		Account Holder(2) صاحب الحساب (٢)		Account Holder(3) صاحب الحساب (٣)		
<b>Gender</b>	الجنس	<b>Car Ownership</b>				امتلاك سيارة
Male	ذكر	Yes				نعم
Female	أنثى	No				لا
<b>Marital Status</b>	الوضع العائلي	<b>Occupation</b>				مجال العمل
1.Single	١.عازب	1. Professional/ Senior Administrative				١.دو اختصاصي/ إداري رئيسي
2.Married	٢.متزوج	2. Administrative/ Executive				٢. إداري / تنفيذي
3.Widowed	٣.ارمل	3.Clerical				٣.موظف
4.Divorced	٤.مطلق	4.Skilled Manual				٤.حرفي
No. of Dependents	عدد الأشخاص الذين تعولهم	5.Unskilled Manual				٥.غير حرفي
<b>Education</b>	المستوى التعليمي	6.Agricultural				٦.مزارع
1.None/Limited	١.غير متعلم	7.Student				٧.تلميذ
2.Primary	٢.ابتدائي	9.House Wife				٩.ربة منزل
3.Secondary/ High School	٣.ثانوي	10.Retired				١٠.متقاعد
4.University(BS/BA)	٤.إجازة جامعية	11.Self Employed				١١. مهنة حرة
5.University(MS/MA)	٥.دراسات عليا	12. Teacher				١٢. معلم
6.University(Ph.D)	٦.دكتوراه	13.Armed Forces				١٣.جيش
<b>Home Ownership</b>	السكن	14.Police				١٤.شرطة
1.Private Rental	١.إيجار شخصي	15.Unemployed				١٥.عامل من العمل
2.Public Housing	٢.سكن عمومي	16.Others				١٦.غيره
3.Mortgage Property	٣.مقار مرهون	Yearly Income Level / Household				مستوى الدخل السنوي العائلي
4.Owned Property	٤.ملك خاص					
5.Living with Parents/Relative	٥.يعيش مع الأهل/الأقارب					
6.Provided by company	٦.مؤمن من قبل الشركة					
No.of years at current address	مدة الإقامة في العنوان الحالي					

Children	Account Holder(1) صاحب الحساب (١)	Account Holder(2) صاحب الحساب (٢)	Account Holder(3) صاحب الحساب (٣)	الأولاد
Number of Children				عدد الأولاد
Name of Child/Date of Birth				اسم الولد/تاريخ الميلاد
Name of Child/Date of Birth				اسم الولد/تاريخ الميلاد
Name of Child/Date of Birth				اسم الولد/تاريخ الميلاد

Other Banks	Account Holder(1) صاحب الحساب (١)	Account Holder(2) صاحب الحساب (٢)	Account Holder(3) صاحب الحساب (٣)	مصارف أخرى
How many other banks do you use in Jordan				ما هو عدد المصارف التي تتعامل معها في الأردن
Which bank do you consider to be your main bank				أي مصرف تعتبره مصرفك الأساسي
Type of account/facility in that bank				نوع الحساب أو التسهيلات المصرفية في هذا المصرف

Why did you choose HSBC?	Account Holder(1) صاحب الحساب (١)	Account Holder(2) صاحب الحساب (٢)	Account Holder(3) صاحب الحساب (٣)	لماذا اخترت HSBC ؟
1.Recommendation by a friend				١.توصية من صديق
2.Family has always banked with HSBC				٢.العائلة تعاملت دوما مع المصرف
3.Response to particular advertising				٣.استجابة لإعلان معين
4.Dissatisfaction with previous Bank				٤.عدم رضائي عن مصرف آخر
5.Convenient location of the Bank				٥.موقعه الجغرافي مناسب
6.Salary Transfer				٦.التوظيف الراتب
7.Price-related reason				٧.بسبب الرسوم
8.Service-related reason				٨.بسبب الخدمة
9.Other (specify)				٩.أسباب أخرى (حدد)

## YOUR CHOICE

Please tick against appropriate requirements:

- MasterCard Standard     MasterCard Gold  
 Visa Classic     Visa Gold     In-site Virtual

## REQUIRED INFORMATION

Name as it should appear on the Card:

\_\_\_\_\_

(not to exceed 19 characters including spaces)

For security reasons, please choose a word that we can identify you with:

\_\_\_\_\_ (not to exceed 10 characters)

Name of a friend/relative in Jordan: \_\_\_\_\_

Relationship: \_\_\_\_\_ Tel./Mobile: \_\_\_\_\_

## YOUR EMPLOYMENT

Company Name: \_\_\_\_\_

Office Address: \_\_\_\_\_ Street: \_\_\_\_\_ Area: \_\_\_\_\_ Department: \_\_\_\_\_

P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_

Office Tel.: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Employment Status:

- Salaried     Self Employed     Both     Others \_\_\_\_\_

Job Title/Designation: \_\_\_\_\_

Organisation Type:

- Public Sector     Private Ltd. Co.     Armed Forces  
 Public Ltd. Co.     Partnership     Government/Ministry  
 Multinational Co.     Proprietorship     Others \_\_\_\_\_

Income(In JOD):  Salaried

Self Employed

Monthly Salary: \_\_\_\_\_ Annual Income: \_\_\_\_\_

Monthly Allowance: \_\_\_\_\_ Other Income: \_\_\_\_\_

Salary date: \_\_\_\_\_

No. of years in Current Job/Business: \_\_\_\_\_ years

Previous job reference:

Company Name: \_\_\_\_\_ P.O.Box: \_\_\_\_\_

No. of years in previous job: \_\_\_\_\_ years

## YOUR BANK REFERENCE

HSBC Customer  Yes  No No. of years with HSBC \_\_\_\_\_ years

HSBC A/C No. \_\_\_\_\_

Other Credit Cards:

Bank Name Card No. Limit Member Since

\_\_\_\_\_

\_\_\_\_\_

Your Liabilities:

Bank Name/Company Name Monthly Instalment Balance Outstanding

Personal loan

Car loan

Overdraft

Other

## SUPPLEMENTARY CARD INFORMATION

Suppl.App.1  Mr.  Mrs.  Ms.

Full name \_\_\_\_\_ (maximum 19 characters)

Date of Birth: DD/MM/YYYY \_\_\_\_\_

N.N./Passport Number for non Jordanians \_\_\_\_\_

Relationship: \_\_\_\_\_ Nationality: \_\_\_\_\_

Suppl.App.2  Mr.  Mrs.  Ms.

Full name \_\_\_\_\_ (maximum 19 characters)

Date of Birth: DD/MM/YYYY \_\_\_\_\_

N.N./Passport Number for non Jordanians \_\_\_\_\_

Relationship: \_\_\_\_\_ Nationality: \_\_\_\_\_

## BENEFITS FOR HSBC ACCOUNT HOLDERS

Automatic settlement of Card bills:  Yes  No

HSBC Current/Savings A/C No.(to be debited)

\_\_\_\_\_

Monthly Payment  5%  Others \_\_\_\_\_ (Select between 5%-100%)

ATM ACCESS

I would like ATM access to my HSBC accounts for my supplementary applicant(s) and myself to be provided in the following manner. (Please note the following:

1. the account you nominate for access through ATM and/or settlement must be your sole account or joint account with "any" or "either" signing instructions.
2. Any ATM access to supplementary applicant(s) can be provided only if the supplementary applicant(s) are joint account holders with any/either signing mandate).

	Primary Applicant	Suppl. App. 1	Suppl. App. 2
1st A/C No.			
2nd A/C No.			

## MAILING INSTRUCTIONS

would like my statements mailed to:

P.O.Box: \_\_\_\_\_

City: \_\_\_\_\_ Postal code: \_\_\_\_\_

## CARD DELIVERY

Please deliver my card:

To my HSBC Branch \_\_\_\_\_

By courier to:  Work  Home

## DECLARATION

I hereby apply for the issue of an HSBC Card(s) and declare that the information included in this application is true and correct and authorise HSBC to verify this from whatever source that HSBC may choose. I accept that HSBC is entitled in its absolute discretion to accept or reject this application without assigning any reason whatsoever. I acknowledge that for use of my card and any supplementary card issued on my account will be subject to the Terms and Conditions of HSBC Cardholder Agreement (which may be amended from time to time) which I received a copy of and which are binding on me. Upon approval of issuing the card, I agree to pay the fees due thereon. If I submitted an application bearing my personal photograph and signature I authorise HSBC to print the attached photograph and signature on my HSBC card. I confirm that this photograph of my Supplementary Card Applicant is a clear, unobstructed true identity. Where requested, I authorise HSBC to issue a supplementary card(s) for use on my account to the person(s) named who is (are) over 18 years old of age and agree that you can provide information to him/her (them) about the account. I acknowledge that the accounts opened in conjunction with the card service will be subject to normal terms and conditions which govern ATM facility as stated in the Cardholder Agreement (which may be amended from time to time). As per the Credit Card application and the Cardholder Agreement to issue the primary card and/or any supplementary card to any party as per my request both signed by myself, I am considered responsible for all transactions, fees, charges and interests appearing on my monthly card account statement to which I shall have no objection. I agree with no objection that the bank may hold a lien of any amount in any currency equivalent to \_\_\_\_\_ % of the maximum limit which I am permitted to draw under this credit card and which is available in my account with the bank No. \_\_\_\_\_, which is not to be used to settle any drawings under the card but is to be held as security for the credit limit assigned to me. Drawings from the security amount can be made to cover outstanding balance in case of recalling the credit card. In addition to that, and in the event of recalling the credit card, HSBC Bank Middle East limited will retain any deposit taken as security against the card limit for a period of 45 days following the cancellation, in order to settle amounts that may be processed during the period and the undertaking remains valid until all dues are settled. Furthermore, the bank reserves the right to settle the card account outstanding balance without reference, from any of my accounts held with any of HSBC Middle East limited branches. Furthermore, I agree in advance to the value of any limit granted to me by the Bank without my objection and to consider my agreement as an integral part of this application of mine. I further undertake that my drawings under the credit card(s) shall not exceed such limit. Should the assigned credit limit be exceeded, the bank may cover the excess immediately in Jordanian Dinars from any account held in the bank in my name with no objection on the amount deducted over the exchange rate used.

## YOUR PHOTOGRAPH

Primary Card Applicant

Remove tape and affix your passport size color photograph



Please write your name on the reverse of your photograph

Supplementary Card Applicant

Remove tape and affix passport size color photograph



Please write your name on the reverse of your photograph

## YOUR SIGNATURE

Primary Card Applicant

\_\_\_\_\_

Please ensure signature is within box provided in black ink only.

Please engrave ( ) do not engrave ( ) my signature on the reverse of the card. I hereby sign & confirm correctness of the information provided.

Supplementary Card Applicant (Optional)

\_\_\_\_\_

Please ensure signature is within box provided in black ink only.

### Documents\*Required for Processing Card Application:

- Copy of passport(s) Jordanian ID/Residency and Work Permit for expatriates.
- Recent dated salary and employment confirmation from employer.
- Copy of commercial registration certificate and most recent 6 months company/personal bank statement (if self employed).
- Salary Transfer letter.
- Most recent 3 months bank statement of the account where salary/income is transferred (not required if account is with HSBC for more than 3 months).
- No documentation required for supplementary applicants.

\* Documents submitted with the card application are Bank's property.

Issued by HSBC Bank Middle East Limited, P.O. Box 921286, Amman 11190 Jordan, which is incorporated in Jersey, Channel Islands and regulated by the Jersey Financial Services Commission to carry on deposit-taking business under the Banking Business (Jersey) Law 1991. Accounts and facilities subject to the Bank's terms and conditions.



MY EXPECTED Monthly CREDIT TURNOVER IS \_\_\_\_\_

MY REASONS FOR OPENING THE ACCOUNT:  Salary Transfer  Others, please specify \_\_\_\_\_

Introduced by:

المعرف:

Name _____ الاسم _____	Relationship _____ الصلة _____
Account No. _____ رقم الحساب _____ (if any) (إن وجد)	

Third Party Funds Transfer Limit for the Personal Internet Banking/Phone Banking Service is:

حد التحويل لإجراء دفعات لأطراف أخرى من خلال الخدمة المصرفية الشخصية عبر الإنترنت/خدمة الهاتف المصرفي هو:

My Third Party Transfer limit for the Personal Internet Banking/Phone banking Service is \_\_\_\_\_ per day  
إن حد التحويل الممنوح لي لإجراء دفعات لأطراف أخرى من خلال الخدمة المصرفية الشخصية عبر الإنترنت/خدمة الهاتف المصرفي هو \_\_\_\_\_ يوماً

### Terms & Conditions

I/We agree that the information given above is true and complete and that I/We have received the bank's General Terms and Conditions for the operation of the Accounts and Electronic Banking Services which I/We understand and expressly agree and accept to be bound by them whether set out in English and/or in Arabic. I/We authorise the Bank to send all correspondence, statements, ATM cards/PINs, Phone Banking/Personal Internet Banking PINs and notices through mail, any private distribution company or electronic mail.

Joint Account only: I/WE acknowledge that the provisions for joint account mandates are set out in the Bank's General Terms & Conditions.

I/We note that if I/We elect to use Personal Internet Banking service, I/We will be required to accept the relevant Personal Internet Banking service terms and conditions on-line.

I/We agree that where I/We accept the Personal Internet Banking Service terms and Conditions on line, I/We will be agreeing to accept and be bound by them and any subsequent amendments whether set out in English and/or Arabic.

I/We hereby request and authorise the Bank to grant me/us the ability to make Third Party Fund Transfers\* to the extent of the daily amount specified above from time to time permitted by the Bank when using Personal Internet Banking and/or Phone Banking Services, or any other relevant service (as such service may be amended, replaced or varied from time to time).

I/We undertake to advise HSBC of any changes to the information stated in this form.

\*Third Party Fund Transfers defined as any funds transfers other than transfers between my/our own accounts held with HSBC JORDAN or to effect bill

### البنود والشروط العامة

أقر/نحن بأن المعلومات الواردة أعلاه صحيحة وهي كاملة ونحن / إننا نعلمت / نعلمنا البنود والشروط العامة لإدارة الحسابات والخدمات المصرفية الإلكترونية والتي / إننا نوافق / نوافق / طوبها كإيجاب وأقبل / نقبل لالتزام بها سواء ذكر باللغة العربية والإنجليزية. كما أوافقكم / نوافقكم لإرسالي / لإرسالنا كل ما يتعلق بحسابي/حسابنا من بريد ومراسلات وكشوفات حساب وبطاقة الصراف الآلي/ الرمز الحدي خدمة الهاتف المصرفي والخدمة المصرفية الشخصية عبر الإنترنت و إشعارات بواسطة البريد العادي أو بواسطة شركة توزيع خاصة أو بالبريد الإلكتروني.

الحساب المشترك فقط: أقر/ نقر بأن الأحكام الخاصة بالحسابات المشتركة واردة في البنود والشروط العامة لهذا

إلي / إننا على علم بأنني / بأننا إننا اخترت / اخترنا استخدام خدمة الإنترنت المصرفية الشخصية، فعليه ويوجب علي / علينا قبول شروط وبنود خدمة الإنترنت المصرفية الشخصية ذات العلاقة (عبر الإنترنت).

إلي / إننا نوافق / نوافق على قبول والتعهد بأية تعديلات لاحقة لهذه الشروط و البنود سواء ذكرت باللغة العربية أو الإنجليزية.

بهذا أطلب / نطلب وأقرض / نقرض البنك أذني / أذنتنا إمكانية تحويل الأموال لأطراف أخرى في حدود المبلغ اليومي المحدد أعلاه حسبما يسمح به البنك من وقت لآخر عند إستعمال الخدمة المصرفية الشخصية عبر الإنترنت و/أو خدمة

الهاتف المصرفي أو أي خدمة أخرى متصلة بها (حسبما قد يتم تعديل أو استبدال أو تغيير هذه الخدمة من وقت لآخر).

أتعهد بتعهد بإبلاغ بنك HSBC عن أي تغيير في المعلومات المذكورة أعلاه

تحويل الأموال لأطراف أخرى - أي تحويل الأموال بخلاف التحويلات التي تتم بين حساباتي / حساباتنا الخاصة والوجودية لدى إتش إس بي سي الأردن أو التي تستخدم لسداد الفواتير

signing Instructions  joint  either /or

(for joint accounts only)


Account Holder(s) Signature (s)

توقيع صاحب (أصحاب) الحساب

Name 1: \_\_\_\_\_ الاسم ١: \_\_\_\_\_ Name 2: \_\_\_\_\_ الاسم ٢: \_\_\_\_\_ Name 3: \_\_\_\_\_ الاسم ٣: \_\_\_\_\_

Signature 1: _____ التوقيع ١: _____

Please ensure signature is within the box provided in black ink only الرجاء التأكد من التوقيع في اللون الأسود وبالحبر الأسود

Signature 2: _____ التوقيع ٢: _____

Please ensure signature is within the box provided in black ink only الرجاء التأكد من التوقيع في اللون الأسود وبالحبر الأسود

Signature 3: _____ التوقيع ٣: _____

Please ensure signature is within the box provided in black ink only الرجاء التأكد من التوقيع في اللون الأسود وبالحبر الأسود

### FOR BANK USE ONLY

Account Number	Form completed and signed in my presence	Bank Authorized Signature/Stamp	Approved
Date Account Opened:	Black List Checked ____C35____CBJ____C11		

### ADDITIONAL MAINTENANCE

E81	
1. Name Amendment	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. GIMIS Attribute	<input type="checkbox"/> CSV
3. Statement Cycle	<input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> H <input type="checkbox"/> Y
4. Service Charge Exemption	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Credit Interest Rate Type	<input type="checkbox"/> NIL <input type="checkbox"/> STC <input type="checkbox"/> CSV

C21	
1. Basefile Add	<input type="checkbox"/> Yes <input type="checkbox"/> No
(Used for conversion of FRS to FR)	
2. Name amendment	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Residential Status	<input type="checkbox"/> Resident <input type="checkbox"/> Non Resident
(Nationality Code)	
4. Statement Cycle	<input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> H <input type="checkbox"/> Y