SAVINGS BANK



Office: _____ APPLICATION FOR A CALL ACCOUNT

PERSONAL DETAILS	
Title (Mr/Mrs/Dr/Prof/Miss): Sun	rname:
First Name(s): (W) (Ce	10
Postal Address: (W) (Ce	Residential Address:
r Ostar Address.	
Nationality/Citizenship:	
Identity/Passport Nr:	Date of Birth:
Identification type: Passport	Gender: FM Marital Status: MSDW
Occupation: Source of Funds: 1.	Amount:
2.	Amount:
EMPLOYER/BUSI	
Employer/Business: Employer/Business Physical Address:	
Employer/Business Physical Address:	
INVESTMENT INSTRUCTION	
Amount invested: N\$	
DISPOSAL OF INTEREST	
(Mark with an X where applicable)	
END OF TERM OR	MONTHLY
Compound	Transfer to my SmartCard
Transfer to my SmartCard	Pay into my bank account
Pay into my bank account	
BANKING DETAILS	
Account no.	
Branch code:	Bank:
I hereby declare that my account may be managed in	accordance with the rules and regulations of
NamPost Savings Bank.	
Customer signature:	Date:
FOR OFFICIAL USE Approved rate: SB 10 Receipt no.:	
Client identified and verified by:	(Full name)
Signature:	Supervisor: Date stamp
	Date stamp