

**TOPKRIM DT SAVINGS AND CREDIT
CO-OPERATIVE SOCIETY LTD**

Empowering Lives, Like Never Before!!



www.topkrimsacco.co.ke

Kisii – Kisumu Highway
Opposite Post Bank
P.O Box 127 - 40222
Oyugis, Kenya.
Call: 0800724607
Email:

INDIVIDUAL ACCOUNT OPENING FORM

I the undersigned, hereby apply to open a Personal Savings Account with the following particulars:

Name	_____	Home Address	_____
ID No.	_____	Location	_____
D.O.B	_____	Sub-Location	_____
M / No.	_____	Employer	_____
P/TSC No.	_____	Work Station	_____
Mobile No.	_____	Station Address	_____
Email	_____		

SPECIMEN SIGNATURE

INDEMNITY CLAUSE

I agree that this account shall be operated solely at the discretion of the Sacco and hereby indemnify the Society against any loss incurred or claim out of the account being closed without notice because of unsatisfactory performance.

Name _____ Signature _____ Date _____

**OFFICIAL USE ONLY
FOSA Account Number**

Authorized Signature: _____ Date: _____

Requirements

(i) Copy of National Identity Card / Passport

(ii) Ksh 1000, Account Minimum balance

(iii) Ksh 100, Account Opening charges

(iv) Two passport size photos (to be taken free of charge at the Sacco)

NEXT OF KIN'S DETAILS

- I. Name.....I.D.No.....Relationship.....
- II. Nominee Percentage (%).....
- III. Name.....I.D.No.....Relationship.....
- IV. Nominee Percentage (%).....
- V. Name.....I.D.No.....Relationship.....
- VI. Nominee Percentage (%).....