



COCOA RESEARCH CO-OPERATIVE CREDIT UNION LTD.

ACCOUNT NUMBER:.....(Official use only)

CORPORATE ACCOUNT APPLICATION FORM

We hereby apply for a **Corporate Account** in the above-named Union and agree to be bonded by the Byelaws or Regulations governing the operations of the union. We understand that to become an active member (Accountholder), we must pay an entrance fee of **GHS50.00**, subscribe the minimum share of **GHS500.00**, make regular savings of not less than **GHS100.00** monthly. We may qualify for **loan** for good purposes after saving continuously for **not less than six (6) months**, make regular loan repayments when granted and attend **Annual / Special General Meetings**.

CORPORATE DATA

Corporate Name (Block letters):.....
Phone:..... Email:.....
Postal Address:..... Office Location:.....
GPS Address..... Street Name:..... Date Formed:.....
Purpose of formation:

EXECUTIVE DIRECTORS' PROFILE (FOR ACCOUNT MANAGEMENT AND IN CASE OF EMERGENCY)

S/N	FULL NAME	Designation	Postal Address	House No. & GPS	Mobile No.
1					
2					
3					

We promise to **save** at least GHS..... every month with effect from.....

- Required:**
- Corporate policy/Constitution/Byelaws and Certificate of Registration from an appropriate Regulatory Body in Ghana.
 - At least two (2) months old Utility bills (Water bill/Electricity bill) of Directors should be provided.
 - A national ID Card (Ecowas Identity Card (Ghana Card), Passport, Voters ID, Driver's License) of Directors.

ACCOUNT DECLARATION AND MANDATE

1. I/We the undersigned refer to our request to open a Corporate Account with under the name
.....
2. We confirm that all information provided in connection with this application is true and complete.
3. We confirm that all documents provided in connection with this application are genuine.
4. We shall be jointly and severally liable for any loan facility which shall be granted to us.
5. We agree to be jointly and severally liable for all obligations in connection with the Credit Union Agreement.

SIGNATORIES TO ACCOUNT

S/N	NAME	PICTURE	SIGNATURE
1			
2			
3			

SIGNING AUTHORITY

- Either One to Sign
 Two to Sign
 All Directors to Sign

Others (please specify):.....

Recommended by (Existing Member)

I (Acc. No:.....) having been satisfied with good the conduct of the above-named persons and by the power vested in me as a member, I recommend these applicants to the Management for Membership in the Union.

Signed:.....

Date:.....

Officer in Charge:

Approved By

Name:..... Signature:..... Date:.....

Head Office location: CRIG Public Affairs Block, New Tafo - Akim

P. O. Box 8, New Tafo

Office Lines: 034-229-2400/02/04