



# DOLLAR DENOMINATED ACCOUNT OPENING AND CONVERSION AUTHORIZATION FORM

(For existing members only)

## A. Applicant's Personal Details (Fill as appropriate)

**FULL NAME:** \_\_\_\_\_

**MEMBER NO.** \_\_\_\_\_ **GENDER:**  Male  Female

NATIONALITY:	IDENTITY DOCUMENT	IDENTITY DOCUMENT No.
_____	<input type="checkbox"/> National ID- Kenyans (Attach copy)	_____
<b>KRA PIN:</b> (Attach copy) _____	<input type="checkbox"/> Passport- Non Kenyans (Attach copy)	_____
Country of Residence: _____		Duty Station: _____

## CONTACT INFORMATION

Cell Phone 1:	_____	Cell Phone 2:	_____
Personal Email:	_____		
Work/Other Email:	_____		
Postal Address:	_____		
Physical Residence:	_____		

## B. Preferred Accounts Instructions

I hereby authorise UN SACCO to;

Open dollar denominated accounts (Deposit & FOSA) and wholly convert my Kenya shillings deposits and FOSA savings to USD at prevailing rates.

Open dollar denominated accounts (Deposits and FOSA) which will run parallel to my existing Kenya shillings accounts until further advice.

### (NOTE:)

1. If you choose to hold a USD account and submit funds to the SACCO in KES, the funds will be converted at the prevailing market rates before crediting your account. Individuals earning in Kenya Shillings (KES) are strongly recommended to save in Kenya Shillings.
2. For the conversion to happen, no liability or guarantee should be outstanding on the Kenya shillings accounts.

## C. Declaration

I hereby authorise UN SACCO to open and/or convert my Kenya Shillings Deposit and FOSA accounts to USD accounts. I agree to abide by the UN SACCO by laws, the laws of the land, policies, procedures, regulations and the terms governing operations of all my accounts. I confirm that the information provided by me is true and complete.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

D	D	M	M	Y	Y	Y	Y
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## D. Employment Details

EMPLOYER AGENCY: \_\_\_\_\_ DUTY STATION: \_\_\_\_\_

INDEX / PAYROLL NO.: \_\_\_\_\_ STAFF NO.: \_\_\_\_\_

**TO: PAYROLL AGENCY:** \_\_\_\_\_

I.....Index No.....hereby authorize you to deduct  
.....(Amount in words).....(Amount in figures).....)

From my monthly salary and pay to United Nations Deposit Taking Savings & Credit Co-operative Society Limited with effect from the month of.....20..... until further notice. Instructions to terminate this can only be given with a written approval of the United Nations Deposit Taking Savings & Credit Co-operative Society Limited. Please deduct an Entrance/Registration Fee of \$20 or along with the first contribution. I authorize my employer to have the liabilities deducted from my final benefits.

### NON CHECK-OFF CONTRIBUTIONS

I.....Index No.....hereby wish to contribute  
.....(Amount in words).....(Amount in figures).....)

as monthly deposit to United Nations Deposit Taking Savings & Credit Co-operative Society Limited with effect from the month of.....20..... until further notice. Please deduct an Entrance/Registration Fee of \$20 along with the first contribution.

Applicant's Signature:

Date:

D	D	M	M	Y	Y	Y	Y
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## E. Terms and Conditions of Membership

1. By filling this form, I authorize the SACCO to convert and/or open my membership Deposit savings account and FOSA savings account to US Dollars.
2. The KES to USD conversion and/or opening will be executed using the SACCO's prevailing exchange rate on the day of processing. I understand that exchange rates are subject to change and may affect the final amount received in USD.
3. Membership conversion and/or opening will be completed within 24 hours, subject to completion of the membership conversion form and compliance verification.
4. UN SACCO reserves the right to admit me into membership and/or discharge me from membership if I do not abide by the bylaws of the organization.
5. I understand that conversion/opening of my Kenya Shillings account to a USD account will only be processed upon the full clearance of any loans currently held under my Kenya Shillings account. The SACCO will only proceed with the conversion and/or opening of the USD account at the point where such loans are fully cleared, the member has been released from any guarantorship obligations tied to Kenya Shillings loans and the account reflects a zero loan balance.
6. The Share Capital account shall be maintained in Kenya Shillings as per Sacco by laws.
7. It is my obligation as a member to ensure I make regular monthly contribution. Where I do not meet minimum prescribed savings/deposits in a year, the dividend, rebates & interest payable will be used to update the same.
8. As a member, I shall be bound by all decisions of the general meetings and I shall contribute to common funds like insurance/benevolent contribution as prescribed from time to time.
9. I confirm that information and documents submitted in hard or soft (digital) are accurate and true copies of the originals and authorize UN SACCO to use them.
10. The SACCO shall be deemed to have made formal communication to me through any of the registered emails, phone numbers, address, or other channels held in the SACCO's records as shall be developed from time to time.
11. Broadcast communication to the membership through emails, SMS, website postings, newspaper, social media or notice board by the SACCO shall be deemed to be sufficient communication to me as a member. I consent to receiving these communications from the SACCO.
12. As a member, it is my obligation to access my statements regularly through the platforms provided by the SACCO and seek for clarification/corrections within 3 months on any item. Any matter not raised within 3 months shall be deemed to be correctly posted.
13. My accounts shall be deemed dormant if i do not undertake any transaction over a period of 6 months. Restrictions in operations shall be placed on my accounts. Activation of the account shall attract a fee as prescribed in the tariff guide.
14. Accounts not operated for 5 years or more shall be deemed to be abandoned. The funds in these accounts may be transferred to relevant government agencies.
15. In the event of a breach/loan default, UN SACCO reserves the right to offset any of my BOSA/FOSA accounts without reference to me.
16. The accounts shall attract interest & fees as shall be prescribed from time to time in the tariff guide available to members.
17. It is my obligation as a member to update the SACCO with any changes in my circumstances and contacts so that the SACCO's records are always up to date.
18. A member is required to disclose if they hold a Political office, are a prominent government official or are related to or closely associated with such persons. The SACCO reserves the right to conduct enhanced due diligence on such individuals in line with regulatory requirements.
- 19. Indemnity:** Communication received from myself through my email, phone number, address or digital platforms as held in the SACCO's records shall be deemed to have originated from myself. I hereby undertake to indemnify the SACCO from any liabilities arising from misuse, errors or compromise of such digital sources arising from these channels as a member.
- 20. AML/CTF/CPF:** A member shall comply with all applicable laws, regulations, and directives, including but not limited to Anti-Money Laundering (AML)/ Counter-Terrorism Financing (CTF) and Counter Proliferation Financing (CPF) regulations. The SACCO reserves the right to request any information or documentation necessary for the purposes of AML/CTF/CPF compliance. The SACCO will treat member information confidentially but may disclose such information as required by law or for purposes related to AML/CTF/CPF compliance.
- 21. Data Privacy and Protection:** I acknowledge and consent to the collection, processing, storage, and use of my personal data by the SACCO for the purpose of providing services to me. These includes digital processing, data analysis to enhance products and services, communication and member identification, as well as product development and promotion. My information may be shared with stakeholders or regulatory bodies for the purposes of providing services. My information may be collected, processed, stored, and shared solely as necessary for legitimate business purposes, regulatory compliance, and under appropriate safeguards. I understand that all data handling will be conducted in accordance with applicable laws and regulations.

**I have read and understood the terms and conditions. I agree to be bound by them.**

Name: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: 

D	D	M	M	Y	Y	Y	Y
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### FOR OFFICIAL USE ONLY

Date of Admission..... Member No. Allocated.....

Admitting Officer..... Signature.....

Approving Officer (Supervisor)..... Signature.....