



CO-OPERATIVE BANK

We are you

Co-operative Bank Digital integration

Open Banking Onboarding Form

Please complete this questionnaire and return to your Relationship Manager. This onboarding questionnaire will assist in collecting critical information needed to transition your company smoothly and enable complete integration with the bank.

GENERAL INFORMATION

Company Name: _____

Date: _____

Address: _____

Official Email: _____

Primary Contact:

Name: _____

Email: _____

Phone: _____

Sign: _____

Note: Your Primary Contact is responsible for the following:
 a) Local administration
 b) Responsibilities during the onboarding process
 c) Support

Technical Contact:

Name: _____

Email: _____

Phone: _____

Sign: _____

PRODUCTS REQUESTED (Tick whichever is appropriate)

- Internal Funds Transfer (IFT)
- Transaction Status Enquiry
- Pesalink
- Instant Notification Service
- Account Balance Enquiry
- Exchange Rate Enquiry
- Account Transaction Enquiry

- Bank to M-pesa Wallet
- Bank to Card
- Full Account Statement
- Mini Statement
- Account Validation

INTEGRATION END POINTS

Public Test IP: _____

Port: _____

Public Production IP: _____

Port: _____

(User Name, Password and any other details to be shared separately)
NB: Port 80 is disallowed

Call Back URL _____

Comments: _____

ACCOUNT SET-UP
Provide details of accounts to be serviced below

#	Account Name	Account Number	Domicile Branch
1.			
2.			
3.			
4.			
5.			

TRANSACTION LIMITS

Daily Limits: _____

SYSTEM REQUIREMENTS

Indicate your preferred Platform e.g JAVA, PHP, PYTHON etc

On-boarding checklist

OK	N/A	Particulars
		Terms and Conditions Agreement (Signed in triplicate)
		Company Registration Certificate
		Company KRA PIN
		Company Tax Compliance Certificate
		For subsidiaries, particulars of the parent company
		Directors ID/Passports
		Directors KRA PINS
		Directors CRB Certificates
		Letter of introduction for third party developers (If the company will use external developers)
		Company Board Resolution
		Memorandum & Articles of Association
		SACCO/Welfare minutes authorizing Open Banking
		SACCO/Welfare Bylaws

DECLARATION AND ACCEPTANCE BY ACCOUNT SIGNATORIES / DIRECTORS

I/WE accept the terms and conditions governing the service, for which I/we have applied for to form an integral part of our contractual relationship with the Bank. The terms are available and can be accessed at the Bank's website **www.co-opbank.co.ke**. I/we agree that the signature page also serves as a resolution and indemnity to use open banking platform in its entirety. In the event you require any clarification on any of these clauses or you wish to raise any issue with regard to the effect of any of these terms and conditions, you are invited to raise such issue or seek such clarification directly with the Bank via the following email addresses **openbankingcustomersupport@co-opbank.co.ke**. By signing this form, I, WE have read, understood, accepted and sought legal advice where necessary and are bound by the same terms without reservation in its entirety
on this _____ day of year 20

Name _____ Designation _____ Signature _____

Name _____ Designation _____ Signature _____

Name _____ Designation _____ Signature _____



Name _____ Designation _____ Signature _____

For more information contact our
Customer Service Officer at your nearest branch.

Or call us on:

020 277 6000, 0703 027 000, SMS 16111

or email openbankingcustomersupport@co-opbank.co.ke

 Co-op Bank Kenya (Official)  @coopbankkenya