

On the letter head of the Company

CIN:-----

CERTIFIED TRUE COPY OF THE RESOLUTION PASSED AT THE MEETING OF THE BOARD OF DIRECTORS (SR. NO.: 2015-2016/BM/01) OF (NAME OF THE COMPANY) ON (WEEKDAY), THE (DATE) DAY OF (MONTH) (YEAR) AT THE REGISTERED OFFICE OF THE COMPANY AT (ADDRESS OF THE COMPANY), AT 11.00 A.M.

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**OPENING OF COMPANY'S BANK ACCOUNT WITH BANK NAME, BRANCH NAME:**

The Chairman explained the need for opening of bank account of the Company with Bank Name, Branch Address . The Board discussed the need to open the Bank Account for operational convenience and passed the following resolution unanimously:

“RESOLVED THAT a current account in the name and style of “Name of the Company” for the company be opened with the Bank Name, Branch Address and the said bank be and is hereby authorized to honour all cheques, bills of exchange, promissory notes, and other negotiable instruments, letter of credit application forms, request letter for issuance of guarantee, instructions for negotiation/purchase/discounting of export and inland bills, request letters for booking of forward contracts in foreign currency for payment drawn, accepted or endorsed signed or made on behalf of the Company by the directors/authorized signatories to the extent of the limits mentioned against their name, acting singly or jointly and to act on any instructions so given by them relating to the transactions of the Company or their duly constituted attorney / nominee, whether such account be in credit or overdrawn:

**RESOLVED FURTHER THAT** the bank is hereby requested to provide Name of the Company the following services:

- Corporate Internet Banking
- Phone Banking
- Debit/ATM Card Services
- Any other services requested by the Company in writing (Incl. E-mail) and agreed by the Bank;

The below mentioned shall act as Authorized Signatories of the Company;

Name	Designation	Limit
Mr./Ms./Mrs. Name of the Director/ Authorized Signatory	Director/Authorized Signatory	Without any limits/ Upto Rs.....
Mr./Ms./Mrs. Name of the Director/ Authorized Signatory	Director/Authorized Signatory	Without any limits/ Upto Rs.....
Mr./Ms./Mrs. Name of the Director/ Authorized Signatory	Director/Authorized Signatory	Without any limits/ Upto Rs.....

**RESOLVED FURTHER THAT** the bank be requested to hand over the related Corporate Internet Banking ID(s) and Password(s) to any of the above mentioned directors to view the said account, interalia against the terms and conditions for Corporate Internet Banking

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issued by the Bank from time to time. The related Internet Banking ID(s) and Password(s) will be mailed/ couriered to the address provided by the account holder and recorded with the Bank;

**RESOLVED FURTHER THAT** this resolution shall remain in force until notice in writing of its withdrawal or cancellation is given to the Bank by the Company;

**RESOLVED FURTHER THAT** any one of the Director be and is hereby authorized to issue a copy of this resolution certified to be a true copy be furnished to the said bank for their records and to act thereupon.”

**Certified True Copy**

For **Name of the Company**

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**Name of the Director**  
**Director**  
**(DIN: .....)**  
Date: **DD/MM/YYYY**

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**SPECIMEN SIGNATURES OF DIRECTORS/AUTHORIZED SIGNATORIES**

Name	Specimen Signature
Mr./Ms./Mrs. (Name of the Director/ Authorized Signatory)	
Mr./Ms./Mrs. (Name of the Director/ Authorized Signatory)	
Mr./Ms./Mrs. (Name of the Director/ Authorized Signatory)	