

Dual Signature Account Establishment

Date: [Insert Date]

To,

The Bank Manager,

[Bank Name]

[Branch Address]

Subject: Request for Establishment of Dual Signature Account

Dear Sir/Madam,

We, the undersigned, [Your Name] and [Co-signer's Name], wish to establish a dual signature account with your esteemed bank.

Account details are as follows:

- Account Type: [e.g., Savings/Current]
- Desired Currency: [e.g., USD/EUR]
- Proposed Account Name: [e.g., Company Name or Joint Name]

We request that all transactions on this account require both of our signatures to enhance security and promote mutual agreement on financial decisions.

Kindly let us know about the required documentation and processes to proceed with the establishment of the dual signature account.

Thank you for your attention to this matter. We look forward to your prompt response.

Sincerely,

[Your Name]

[Your Address]

[Your Contact Number]

[Co-signer's Name]

[Co-signer's Address]

[Co-signer's Contact Number]