

ACCOUNT APPLICATION FORM



BRANCH.....

Please complete in block capitals and tick where appropriate
PERSONAL INFORMATION

TitleSurname:.....First name.....Other name.....
Date of Birth:...../...../.....Sex.....Marital Status Single [] Married [] Divorced [] Widowed []
Contact Address:..... City..... State:.....
Telephone:..... e-mail:.....Resident in Nigeria [] Yes [] No Nationality..
Next of Kin:..... [b] Relationship:..... [c] Address.....Mother's Maiden Name.....
Employment Status [] Employed [] Unemployed Occupation:.....
Employer's Address:..... City:..... State.....
Business Telephone:..... Fax:..... Name of Business [e.g. Bakery].....
Date of commencement in current employment..... Total gross income per N.....
Do you have an account with Afribank? [] Yes [] No Existing Account No/ Branch [if applicable].....
How is income received? [] Cash [] Cheque [] Direct Credit Will income be paid into Afribank current
Account? [] Yes [] No
Identification Presented: [] International Passport [] Driver License [] Authentic Identification Card

JOINT ACCOUNTS ONLY [2ND APPLICANT]

TitleSurname:.....First name.....Other name.....
Date of Birth:...../...../.....Sex.....Marital Status Single [] Married [] Divorced [] Widowed []
Contact Address:..... City..... State:.....
Telephone:..... e-mail:.....Resident in Nigeria [] Yes [] No Nationality..
Next of Kin:..... [b] Relationship:..... [c] Address.....Mother's Maiden Name.....
Employment Status [] Employed [] Unemployed Occupation:.....

BUSINESS ACCOUNTS

Name of Business:.....

No. of Employees:..... Types of Business:.....

No. of Branches [if applicable]:..... Location of Branches [e.g. within Nigeria, abroad].....

Do you have an account with Afribank? [] Yes [] No Existing Account No. / Brach[if applicable].....

Most Recent Annual Turnover : N..... Volume of Business Expected Per Annum: N.....

Ownership Structure[eg. Fed. Govt. 60% Private Investors 40%]:.....

Registration Number:.....Registration Classification [eg. Limited company]:.....

TYPE OF ACCOUNT REQUIRED

Personal Current [individual] Personal Current [Joint] Business Current Staff Current
 Saving Time Deposit Domiciliary

ACCOUNT INFORMATION

Statement of account should be issued: Daily Monthly Quarterly Yearly
Statement of account should be: Mailed Held at Branch for collection

PRODUCT REQUIREMENT

Smart Card Home Banking Other [OD, Terms Loan etc.]
 AGES [Afribank Cash Evacuation Scheme] STWC [Short term Working Loan] Real Estate Management*
 PASS [Pay Accounts Student's Scheme] Telephone Banking Stock Brokerage*
 Collection / Payment Services MoneyNett [Intl. Money Transfer] Pension Fund Management

REFERENCES

1.Name of Referee.....2. . Name of Referee.....
Name of Bank:..... Name of Bank:.....
Address of Branch:..... Address of Branch:.....

DECLARATION

By signing below, you the individual[s] named in this application form are:
[i] applying to us, Afribank Nigeria PLC, for banking services,
[ii]confirming that any details you have supplied are true and complete,
[iii]authorizing us to make enquiries in connection with this application in accordance with our normal procedures,
[iv] agreeing to accept the relevant terms and conditions for the various products you have applied for. Details will be sent to you:
[v] agreeing that the bank reserves to close thr account without prior notice in case it is detected as being used for fraudulent purposes

For Joint Account Only

[i] You agree that we may debit your account with cheques and other payment orders authorized by any of you.
[ii] You authorize us to supply joint statements in respect of your account.

For Deposit Account only

[i] You agree to the interest rate, value date, maturity date and type of deposit account discussed with our Customer Service Officer.

Information on Group Products and Services

You agree that we may use date and any other information we hold on you on the Afribank Group customer systems to bring to your attention products and services that may be of interest to you.

Signature[s] if joint account, all parties must sign

Date

..... / /

..... / /

Customer to sign in the presence of a bank officer.

FOR INTERNAL USE ONLY

- Signature Cards [2] All References Received Mandate for a club, Society or Other Association
- Appointment of Bankers Resolution of the Board of Directors Copy of memorandum and Articles of Association
- Mandate for Joint Account Certificate to Commence Business Certificates of Registration Approved by Ministry of Trade and Industry
- Mandate for Partnership Account Mandate for Account of a Limited Co. Following Appointment of Banks Initial Deposit Received N.....
- Mandate for Representative Signature [Per Pro- Signatures] Mandate for Estate Accounts

All relevant document have been received. Account approved for opening by: Account Opened Date...../...../.....

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