

INDIVIDUAL & JOINT ACCOUNT



Duly completed account opening form

Two specimen signature cards duly completed by signatory to account

Two Independent and satisfactory references [Detachable reference forms are included in the package]

Two clear recent passport photographs of signatory to the account

Photograph of satisfactory evidence of identification of the signatory, a photocopy of current driving licence /International passport or national I.D. Card [original copy to be sighted] or original copy of notarial certificate.

Evidence of residence- photocopy of utility bill [original copy to be sighted]

Residence permit [where applicable]

Basic information report on the customer

Membership identification number from a professional body [where applicable]

Postage stamp & Signature Column

INDIVIDUAL & JOINT ACCOUNT



Customer Information

Name

Surname

Other Names

Date of Birth

Occupation

Business /Office Address

Tel:

Mailing address

Res. Tel

E-mail

Fax

Nature Type of Business

Account with other Banks

Name of Bank	Address of Bank/ Branch	Account Name and Number

If married

Name of Occupation of Spouse

Declaration

I/ We apply for the opening of an account with AFRIBANK NIGERIA PLC

I/We understand that the information given herein is the basis for opening such account [s] and therefore warrant that such information is correct.

I/We agree to be bound by the terms and conditions governing the operation of the account [s]

Signature

Date

INDIVIDUAL & JOINT ACCOUNT



To:AFRIBANK PLC /I The Bank"

I/WE HEREBY REQUEST AND AUTHORISE YOU:

1. To open a current account in my/our name and at any time subsequently to open further accounts as I/we may direct.
2. To honour all cheques or other orders which may be drawn on the said account provided such cheques or orders are signed by me/us and to debit such cheques or orders to the said account w h e the r such account be for the time being in credit or over drawn or may become over drawn in consequence of such debit without prejudice to your right to refuse to allow any overdraft or increase of overdraft and in consideration thereof
I/We agree:
3. To assume full responsibility for the genuineness or correctness and validity of all endorsements appearing on all cheques, orders, bills, notes, negotiable instruments, receipts, and/or other documents deposited in my/our account.
4. To be bound by any notification of change in conditions governing the account directed to my/our last known address and any notice or letter sent to my/our last known address shall be considered as duly delivered and received by me/us at the time it would be delivered in the ordinary course of post.
5. That the Bank will bear no liability whatsoever for funds handed to members of the staff outside banking hours or outside appropriate Banking premises.
6. Unless there are sufficient funds in the account to cover the value of the said cheques and I/we understand and agree that any such cheques may be returned to me/us unpaid but if paid, I/we are obliged to repay the Bank on demand. The Bank may at its discretion grant financial accommodation to me/us where there are insufficient funds in my lour account to meet my/our instructions in connection with any transaction.
7. That any disagreement with entries on my/our Bank Statements will be made to the Bank within 15 days of the receipt of the Bank Statements. Failing receipt by the Bank of a notice of disagreement of the entries within 15 days from the date of receipt, my/our Bank statement as rendered is correct.
8. I/we agree that the Bank may at its discretion close my lour account(s) in the event that it is dissatisfied in anyway with the operation thereof.
9. I/we also agree that in addition to any general lien or similar right to which you as bankers may be entitled by law you may at any time and without notice to me/us combine or consolidate all or any of my/our accounts without any liability to you and set off or transfer any sum or sums standing to the credit of anyone or more of such accounts or any other credit, be it cash, cheque, valuables, deposits, securities, negotiable instruments or other assets belonging to me/us with you in or towards satisfaction of my/our liabilities to you or any other account or in any other respect whether such liabilities be actual, contingent, primary, collateral, several or joint.

INDIVIDUAL & JOINT ACCOUNT



Dated this day of

SIGNATURE (over 50k stamp)
Name and Address

INDIVIDUAL & JOINT ACCOUNT



REFERENCE FORM

The Manager,
AFRIBANK NIGERIA PLC.

CAUTION
IT IS NOT ADVISABLE TO INTRODUCE
ANY PERSON NOT WELL KNOWN TO YOU

Name of applicant

I/ We wish to confirm that the above named individual is well known to me and is suitable to maintain a current Account with you.

The Applicant signs thus

And I witness the signature as being correct.

I maintain a current account with

Name of bank:

I/ We maintain a current account with:

Name of Bank:

Address

Account Number:

Type of Account

Business/ Occupation:

Your faithfully,

Signature

Date

Name:

Address:

INDIVIDUAL & JOINT ACCOUNT



REFERENCE FORM

The Manager,
AFRIBANK NIGERIA PLC.

CAUTION
IT IS NOT ADVISABLE TO INTRODUCE
ANY PERSON NOT WELL KNOWN TO YOU

Name of applicant

I/ We wish to confirm that the above named individual is well known to me and is suitable to maintain a current Account with you.

The Applicant signs thus

And I witness the signature as being correct.

I maintain a current account with

Name of bank:

I/ We maintain a current account with:

Name of Bank:

Address

Account Number:

Type of Account

Business/ Occupation:

Your faithfully,

Signature

Date

Name:

Address:

INDIVIDUAL & JOINT ACCOUNT



FOR BANK USE ONLY DOCUMENTS OBTAINED

	Yes	Deferred	Waived
COMPLETED SIGNATURE CARD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TWO RECENT PASSPORT PHOTOGRAPHS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REFERENCE FORMS [2] -[CONFIRMED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
POWER OF ATTORNEY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACCOUNT HOLDER ADDRESS CONFIRMED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[VISITATION REPORT]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(UTILITY BILLS ETC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHERS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACCOUNT CLASSIFICATION INFORMATION

SECTOR CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDUSTRY CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACCOUNT OFFICER CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RMG CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

UNIQUE IDENTIFICATION FEATURE

A). RC NUMBER (FOR CORPORATE BODIES)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B). MOTHER'S MAIDEN NAME (FOR INDIVIDUALS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C). DATE OF BIRTH (FOR INDIVIDUALS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DOCUMENTATION CHECKED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACCOUNT NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

NAME

SIGNATURE

DATE

ACCOUNT OPENING AUTHORISED

INDIVIDUAL & JOINT ACCOUNT



NAME

SIGNATURE

DATE

SPECIAL INSTRUCTIONS

NAME

SIGN

INDIVIDUAL & JOINT ACCOUNT



FOR BANK USE ONLY DOCUMENTS OBTAINED

	Yes	Deferred	Waived
COMPLETED SIGNATURE CARD (1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TWO RECENT PASSPORT PHOTOGRAPHS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEMO & ARTICLES OF ASSOCIATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPY OF CERTIFICATE OF INCORPORATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPY OF FORM C 07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PASSPORT PHOTOGRAPHS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHERS (UTILITY BILLS ETC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CEIRTIFICATE OF COMMENCEMENT OF BUSS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEARCH REPORT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VISITATION REPORT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACCOUNT CLASSIFICATION INFORMATION

SECTOR CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDUSTRY CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACCOUNT OFFICER CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RMG CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

UNIQUE IDENTIFICATION FEATURE

A). RC NUMBER (FOR CORPORATE BODIES)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B). MOTHER'S MAIDEN NAME (FOR INDIVIDUALS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C). DATE OF BIRTH (FOR INDIVIDUALS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DOCUMENTAT1ON CHECKED
CSO

NAME

SIGNATURE

DATE

INDIVIDUAL & JOINT ACCOUNT



DEFERRAL/WAIVER OF DOCUMENTS AUTHORISED BY:

NAME

SIGNATURE

DATE

ACCOUNT OPENING AUTHORISED BY:

NAME

SIGNATURE

DATE