

BANK VERIFICATION NUMBER ENROLMENT & UPDATE FORM

*Please provide the necessary information (Fields marked with * are compulsory)*

DATE: ____/____/____

TITLE*: _____ SURNAME*: _____ MOTHERS MAIDEN NAME _____

NAMES*: _____
FIRST NAME OTHER NAMES

MARITALSTATUS*: SINGLE MARRIED WIDOW WIDOWER DIVORCED OTHERS

ACCOUNTNUMBER*(1) _____ ACCOUNT NUMBER (2) _____

TYPE OF ACCOUNT*: MICRO SAVINGS ACCOUNT REGULAR SAVINGS ACCOUNT CURRENT ACCOUNT

ID TYPE*: NATIONAL ID INT'L PASSPORT D/LICENSE VOTERS CARD GMFB ID CARD

ID CARD NO: _____ ID DATE OF ISSUE _____ ID DATE OF EXPIRY _____

BVN NO (If already enrolled) _____ BANK WHERE ENROLLED _____

GENDER*: MALE FEMALE PLACE OF BIRTH: _____

DATE OF BIRTH (DD/MM/YYYY) *: ____/____/____ NATIONALITY*: _____

STATE OF ORIGIN*: _____ LGA OF ORIGIN*: _____

RESIDENTIAL ADDRESS*: _____

STATE OF RESIDENCE*: _____ LANDMARKS: _____

HOME COUNTRY ADDRESS (Expatriate): _____

PHONE NUMBER 1*: _____ PHONE NUMBER 2: _____

E---MAIL ADDRESS: _____ LOCATION OF COLLECTION: _____

SPECIAL NEEDS: YES NO IF YES PLEASE EXPLAIN: _____

I hereby attest the above information is true and complete.

Agreement Clauses

- I agree to submit my Biometric information to the bank As may be required for account opening maintenance and operation purposes, to enhance the security of my account and transactions from time to time.
- I give permission for the bank to securely store and transmit this Biometric data for the purposes of operating my bank account.
- I understand that a Biometric is a unique physiological data such as fingerprints, iris and hand scans or face and voice recognition, used to positively identify a particular person.

SIGNATURE / DATE

ENROLMENT TICKET ID
ENROLLED BY: _____

Disclaimer Clause.

The bank shall not be liable for breaches/disclosures that may occur if it is compelled by law or regulation to disclose Customer biometrics data to third parties. However, the Bank shall exercise due care to ensure that the customers biometrics data is secure and protected

BANK ONLY
VERIFIED BY: _____