



ACCOUNT UPDATE FORM (INDIVIDUAL)

Customer Details

Account Name _____
(Surname/First Name/Middle Name)

Account No. 1

BVN

Please Indicate Other Related Account(s) That You Wish To Update/ Reactivate

Account No. 2

Account No. 3

Please tick as appropriate Customer Information Update Account Reactivation Reason for Dormancy _____
(Where Applicable)

Name Change

New Name _____
(Surname/First Name/Middle Name)

Reason For Name Change Marriage Others _____
(Please Attach Supporting Document)

Contact Information

Old Residential Address _____

New Residential Address _____
(For Change of Address Only)

Nearest Bus Stop/Landmark _____ City/Town _____

Local Govt. Area _____ State _____

Old Phone Number

New Phone Number _____
(For Change of Phone Number Only)

Old E-mail Address _____

New E-mail Address _____
(For Change of E-mail Address Only)

Details of Next of Kin (Where Applicable)

Full Name _____
(Surname/First Name/Middle Name)

Relationship _____ Tel/Mobile

E-mail Address _____

Contact Address _____

Other Information

Date of Birth / / Marital Status Single Married Others _____

Maiden Name _____ Mother's Maiden Name _____

Nationality _____ State of Origin _____ Local Govt. _____

Employer's Name _____ Nature of Business/Occupation _____

Office Address _____

Date of Employment / / Tax Identification No. _____

Means of Identification International Passport National ID Driver's License Voter's Card Others _____

Identification No. _____ Expiry Date / /

Residence/Work Permit No. _____ Expiry Date / / Nationality _____
Foreigners Only

Signature _____ / / Signature _____ / /

For Official Use Only

Please tick as applicable Marriage Certificate Utility Bill Sworn Affidavit Proof of ID Newspaper Publication

CCO's Name: _____ CCO's Signature _____ / /

BSM's Name: _____ BSM's Signature _____ / /