

ZENITH BANK PLC

ONLINE INDIVIDUAL CURRENT ACCOUNT FORM

ACCOUNT OPENING REQUIREMENTS

- 1. Account Opening form duly completed.
- 2. Two specimen signature cards duly completed by the signatory to the account
- 3. Two independent and satisfactory references. Referees must be current account holders. Referees who maintain current account with ZENITH BANK PLC must have done so for a minimum of six (6) months.
- 4. Two clear passport size photographs of signatory with name written on the reverse.
- 5. Means of Identification i.e. drivers license or International Passport (Original to be sighted)
- 6. Photocopy of Public Utility Receipt i.e. Tax Clearance Certificate, NEPA, NITEL, etc (Original to be sighted.)
- 7. Residence Permit (where applicable)

APPLICATION FOR AN ONLINE INDIVIDUAL CURRENT ACCOUNT

	Е:		OTHER NAMES:
DATE OF	BIRTH		NATIONALITY
SEX:	MALE	FEMALE	
OFFICE AI (NOT P.O		MAILING ADDRESS	RESIDENTIAL ADDRESS (NOT P.O.BOX)
EMAIL A	DDRESS		
TELEPH	ONE NUMBE	CR	
OCCUPA	TION		
EMPLOY	ER		
STATE O	FORIGIN		LOCAL GOVERNMENT ARE
		NAME	

ACCOUNTS WITH OTHER BANKS (INCLUDING **ZENITH BANK PLC**)

NAME & ADDRESS OF BANK	ACCOUNT NAME & NUMBER
1.	
2.	
3.	

REFERENCES

NAME & ADDRESS	OCCUPATION	BANKER
1.		
2.		

I request the opening of a current account and confirm that the above information is true.

I agree to the terms and conditions of this application.

Customer's Signature & Date

DATE.....

To: ZENITH BANK PLC

.....

Dear Sir,

Please open a Current Account in my name.....

I request and authorize you that until I shall give notice in writing to the contrary to honour all cheques or other Orders which may be drawn on the said account provided such cheques, or Orders are signed by me, and I request and authorize you to debit such cheques or Orders to the said account with you whether such account be for the time being in credit or overdrawn on consequences of such debit in consideration of which I agree: -

- 1. To be responsible for the repayment of any such overdraft with interest accruing thereon.
- 2. To assume full responsibility for the genuineness, correctness and validity of all endorsements appearing on all cheques, Orders, bills, notes, negotiable instruments and receipts or other documents deposited in my account.
- 3. To hold you free from any responsibility for any loss or damaged to funds deposited with you due to any future Government order, law, levy, tax, embargo, moratorium, exchange restriction or any other cause beyond your control, and that any or all funds standing to the credit of all the account are payable only at your bank, on demand only and only in such local; currency, or at your option, in such local currency as may then in local circulation.
- 4. That the bank may debit my account for any services charges, from time to time set by the Management, if the account proves to be unremunerative to the Bank.
- 5. To accept as due notification any notice of change in conditions governing the account directed to my last known address and to be bound by such change.
- 6. That any notice or letter addressed to me and sent through the post to the addressed to me and sent through the post to the address supplied by me shall be considered duly delivered and received by me at the time would be delivered in the ordinary course of post.

- 7. That if a cheque credited to my individual current account is returned dishonoured, the same may be transmitted to me through my last known address either by bearer or by post.
- 8. That I note that the Bank will accept no liability whatsoever for funds handed to members of its staff outside banking hours or outside the Bank's premises.

My attention has been drawn to the necessity for safeguarding my cheque books so that unauthorized persons are unable to gain access to it and the fact that neglect of this precaution may be ground for any consequential loss being charged to my account. I understand and agree that you are under no obligations to honour any cheque(s) drawn on this account unless there are sufficient funds in the account unless there to cover the value of the said cheque(s) and I understand and agree that such cheque may be returned to me unpaid.

I agree that any disagreements with entries on my Bank Statements shall be made to me within 15 days of the dispatch of the Bank Statement. Failing receipt by the Bank of a notice of disagreement of the entries within 15 days of the dispatch of my Bank Statements; it will be assumed by the Bank that the statement as rendered is correct. I further understand that that any sum standing to the debit of the current account shall be liable to interest charges at the rate fixed by the Bank from time to time.

You are authorized to debit from the account your usual bank charges, interest commissions etc. I agree that in addition to any general lien or similar right to which you as bankers are entitled by law, you may at any time and without notice to me combine or consolidate all or any of my accounts with you and liabilities to you and set off or transfer any sum or sums standing to due credit of any one or more of such accounts or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging to me with you in or towards satisfaction of any liabilities to you or any other account or in any other respect whether such liabilities be actual or contingent, primary or collateral and several or joint.

Dated this ------day of -----200-----

SIGNATURE

"CAUTION IT IS DANGEROUS TO II PERSON WHO IS NOT WE YOU	NTRODUCE A	200
The Manager, ZENITH BANK PLC,		
Dear Sir,		
	ROSPECTIVE ACCOUNT NAME	
I/We understand that the abo	ove- named person(s) has/have applied t	o open a Current Account with you.
I/We have known the above-	- named person(s) for	(Period) and I/We comment on his/
their means and reputation as	s follows: -	
I/We also confirm that the ap	pplicant is a person/applicants whom the	e usual banking facilities may be
	nt(s) with:	8
	nt(s) with: BANKER'S ADDRESS	ACCOUNT NUMBER
extended. I/We maintain current accou NAME OF BANK 1.		
I/We maintain current accou NAME OF BANK		
I/We maintain current accou NAME OF BANK 1. 2. The above information is pro Yours faithfully,	BANKER'S ADDRESS	ACCOUNT NUMBER

Authorised Signatory

Authorised Signatory

		200
The Manager, <i>ZENITH BANK PLC,</i>		
Dear Sir,		
	OSPECTIVE ACCOUNT NAME	to open a Current A googet with you
	re- named person(s) has/have applied t	(Period) and I/We comment on his/
their means and reputation as f		(renod) and 1/ we comment on ms/
nen means and reputation as r	010ws	
I/We also confirm that the app I/We maintain current account		e usual banking facilities may be extend
NAME OF BANK	BANKER'S ADDRESS	ACCOUNT NUMBER
1.		
2.		
The above information is provi	ded in confidence.	
Yours faithfully,		
REFEREE'S ACCOUNT NA	ME:	
REFEREE'S ADDRESS:		

MANDATE FOR IND	DIVIDUAL CURRENT ACCOUNT
AME OF ACCOUNT	
CCOUNT NUMBER	
NAME OF SIGNATORY	PLEASE TICK AS APPROPRIATE CHEQUE CONFIRMATION REQUIRED Yes NO
MOBILE PHONE NO:	Ninount to be committed. The Theodetic N
	FOR BANK USE
	RSM OFFICER
ADDROVAL	
	DATE
	DATE
MANDATE FOR IN NAME OF ACCOUNT	DIVIDUAL CURRENT ACCOUNT DIVIDUAL CURRENT ACCOUNT PLEASE TICK AS APPROPRIATE CHEQUE CONFIRMATION REQUIRED? Yes NO Amount to be confirmed: All Amounts
MANDATE FOR IN NAME OF ACCOUNT ACCOUNT NUMBER NAME OF SIGNATORY MOBILE PHONE NO:	DIVIDUAL CURRENT ACCOUNT DIVIDUAL CURRENT ACCOUNT PLEASE TICK AS APPROPRIATE CHEQUE CONFIRMATION REQUIRED? Yes NO NO Amount to be confirmed: All Amounts N
MANDATE FOR IN NAME OF ACCOUNT ACCOUNT NUMBER NAME OF SIGNATORY	DIVIDUAL CURREN'T ACCOUN'T
MANDATE FOR IN NAME OF ACCOUNT	DIVIDUAL CURREN'T ACCOUN'T

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S/N	DOCUMENTS OBTAINED		IN PLACE	WAIVER	
1.	IDENTIFICATION:				
	(a)				
	(b)				
2.	PASSPORT PHOTOGRAPHS				
3.	VERIFICATION OF SIGNATURES				
4.	SIGNATURE CARDS				
5.	MANDATE				
6.	REFERENCE FORMS	INTERNAL			
		EXTERNAL			
7.	RESIDENT PERMIT				
8.	VISITATION REPORT				
9.	PUBLIC UTILITY/INVOICE				

CUSTOMER INTRODUCED BY

NAME & SIGNATURE

RELATIONSHIP OFFICER

NAME & SIGNATURE

WAIVER APPROVED BY _____

NAME & SIGNATURE

APPROVED BY	INITIAL	DATE
LEGAL OFFICER		
BRANCH MANAGER		
APPROVAL		