

5. SOLE PROPRIETORSHIP/CORPORATE ACCOUNT

[illegible]

Registration No.									Date of Registration:	D	D	M	M	Y	Y	Y	Y
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[illegible]

Registered Address:

Operating Address:
Office No. Street Name:

[illegible]

LGA: [] [] [] [] [] [] [] [] [] Tax Identification No.: [] [] [] [] [] [] [] [] [] [] [] []

[illegible]

Declaration:

I/We apply for the opening of an account with Above Only Microfinance Bank Limited. 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 opening of the account(s)

Signature(s): _____ Date: DD MM YY YY YY YY YY

6. SIGNATORY DETAILS (1)

[illegible]

Marital Status: Single ☐ Married ☐ Others ☐ (Specify) _____ Gender: F ☐ M ☐ Date of Birth

[illegible]

Address:
House No. Street Name:

Land Mark: City/Town: State:

Business/Occupation:

BVN

[illegible]

Means of Identity

National ID card ☐ Driver's License ☐ International Passport ☐ NIN ☐ INEC Voter's Card ☐

ID No.: [][][][][][][][][][] Issue Date: [D][D][M][M][Y][Y][Y][Y] Expiry Date: [D][D][M][M][Y][Y][][]

Signature: _____

SIGNATORY DETAILS (2)

[illegible]

Marital Status: Single ☐ Married ☐ Others ☐ (Specify) _____ Gender: F ☐ M ☐ Date of Birth

[illegible]

Address: Street Name:

House No.

Land Mark: City/Town: State:

[illegible][illegible]

Means of Identity

National ID card ☐ Driver's License ☐ International Passport ☐ NIN ☐ INEC Voter's Card ☐

ID No.: [][][][][][][][][][] Issue Date: [D][D][M][M][Y][Y][Y][Y] Expiry Date: [D][D][M][M][Y][Y][][]

Signature: _____

SIGNATORY DETAILS (3)

Signature: _____

(NOT SOLE PROPRIETORSHIP)

Signature: _____

5. DIRECTOR'S DETAILS (2)

Signature: _____

TERMS / CONDITON

I/WE (the Customer) HEREBY REQUEST AND AUTHORISE YOU TO

1. Open an account in my/our name and at any time subsequently open further accounts as I/We may direct.
2. Honour all orders which may be drawn on the said account provided such orders are signed by me/us and to debit such order to the said account whether such account be for the time being in credit or overdrawn or may become overdrawn in consequence of such debit without prejudice to your right to refuse to allow any overdraft or increase of overdraft and in consideration,
- 3 I/We agree
 - a) To assume full responsibility for the genuineness, correctness and validity of endorsements appearing on all cheques, orders, bills, notes, negotiable instruments, receipts and/or other documents deposited in my/our account.
 - b) 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 will be delivered in the ordinary course of post.
 - c) And I/We note that the Bank will accept no liability whatsoever for funds handed to members of staff outside the Bank's premises.
 - d) That any disagreements with entries on my/our Bank Statements will be made by me/us within 15 days of the dispatch of the Bank Statement. Failing receipt by the Bank of a notice of disagreement of entries within 15 days from the date of dispatch of my/our Bank Statement as rendered is correct.
 - e). I/we pledge that we shall not issue any cheque or instruction or instrument on our account without first ensuring that our account with the Bank is sufficiently funded to accommodate such payments. Consequently, we hereby authorize the Bank to report to the Central Bank of Nigeria (CBN), Economic and Financial Crimes Commission and/or any other regulator, details of any transaction or incident of returned cheque or instrument on our accounts due to insufficient funds for further investigation and prosecution.
 - f) I/We also agree that in addition to any general lien or similar right to which you as bankers may be entitled bylaw you may at any time without notice to me/us combine or consolidate all or any of my/our accounts without any liabilities 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 credits, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging tome/us with you in or towards satisfaction of any of my/our liabilities to you or any other account or in any other respect whether such liabilities be actual or contingents, primary or collateral and joint or several.
 - g) The Customer hereby agrees that the Customer shall, at his/its own expense, indemnify, defend and hold harmless Above Only Microfinance Bank Limited from and against any and all liability any other loss that may occur, arising from or relating to the operation or use of the Account or the Services or breach, non-performance or inadequate performance by the Customer of any of these Terms or the acts, errors, representations, misrepresentations, misconduct or negligence of the Customer in performance of its obligations.
 - h) If a fraudulent activity is associated with the operation of your account, the bank has the right to apply appropriate restrictions and report to law enforcement agencies.

FOR BANK USE ONLY

	REQUIREMENT CHECKLIST (INDIVIDUAL SAVINGS/CURRENT)	CHECKED	DEFERRED	WAIVED
1	Account opening form duly completed			
2	Specimen signature card duly completed			
3	Valid means of Identity			
4	Proof of Address (Utility bill, light bill, waste bill, etc			
5	Passport Photograph			
	REQUIREMENT CHECKLIST (SOLEPROPRIETORSHIP/CORPORATE)	CHECKED	DEFERRED	WAIVED
1	Account opening form duly completed			
2	Specimen signature card duly completed			
3	Copy of certificate of Registration			
4	Board Resolution/Minutes of meeting authorizing account opening			
5	Copy of Memorandum and Article of Association			
6	Form C07 Particulars of Directors/Form C02 allotment of shares			
7	Valid means of ID of all signatories and Directors			
8	Two (2) passport sized photograph of each signatory to the account			
9	Proof of Company address			

ACCOUNT OPENED BY: _____

Signature: _____ Date:

D	D	M	M	Y	Y	Y	Y
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DEFERRAL/WAIVER OF DOCUMENT (IF ANY) AUTHORISED BY: _____

Signature: _____ Date:

D	D	M	M	Y	Y	Y	Y
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ACCOUNT OPENING AUTHORIZED/APPROVED BY: _____

Signature: _____ Date:

D	D	M	M	Y	Y	Y	Y
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Above Only Microfinance Bank Limited

No. 1, University Way, Ugbor Raod, G.R.A Benin City

Account Name: _____

Address: _____

_____ Phone No: _____

Name(s)

Signature (A)

Name(s)

Signature (B)

Name(s)

Signature (C)

Mandate Instruction

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5. SIGNATORY DETAILS (1)

[illegible]

6. SIGNATORY DETAILS (2)

[illegible]

7. SIGNATORY DETAILS (3)

Title Surname First Name Middle Name

Marital Status: Single ☐ Married ☐ Others ☐ (Specify) _____ Gender: F ☐ M ☐ Date of Birth

D	D	M	M	Y	Y	Y
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Phone No. [] [] [] [] [] [] [] [] [] [] Nationality: _____ LGA of Origin: [] [] [] [] [] [] [] [] [] []

Address: Street Name:

House No.

Land Mark: [] [] [] [] [] [] [] [] [] City/Town: [] [] [] [] [] [] State: [] [] [] [] [] []

[illegible][illegible]

Means of Identity

National ID card ☐ Driver's License ☐ International Passport ☐ NIN ☐ INEC Voter's Card ☐

ID No.: [][][][][][][][][][] Issue Date: [D][D][M][M][Y][Y][Y][Y] Expiry Date: [D][D][M][M][Y][Y][Y][Y]

Signature: _____