CUSTOMER KYC FORM

Type of customer: ☐ Individual ☐ Corporate

Account Number(s)	Date Account Opened	Account Status (active, dormant, frozen, closing, closed)

Full Name: _____

Nickname (Alias): _____

Phone Number: _____ Email Address: _____

Date of Birth: _____ Marital Status: _____

Religion: _____ Mother's Maiden Name: _____

Place of Birth: _____ Home Town: _____

LGA: _____ State of Origin: _____

Occupation/Profession: _____ BVN: _____

Employment Status: _____ Employer' s Name: _____

Employer's Address: _____ Employer' s Phone: _____

Next of Kin	Relationship	Phone number	Address

ID type: ID Num: Issue Date: Expire Date:

Expected Annual Income	Primary Source of Income	Other(Specify)

Who introduced you to the Bank? _____

Customer's present Address? _____

_____

Nearest Bus Stop _____

Description: _____

_____

_____

_____

For official use only

_____ The relationship officer of _____ who is a prospective/existing customer of the bank, do hereby confirm that I have carried our relevant verification to establish the identity, address and nature of business of the customer and his/her eligibility as an account holder with the bank.

I also certify that the customer is engaged in (state nature of business) _____ _____ it shall be my responsibility to continuously monitor the account holder, the account activities and inform the bank's management at any point in time there is / are profound change(s) in the standing of the account holder and /or suspicious transaction as required by statutory regulations.

Name of Relationship Officer	Signature	Date

Name of Head of Marketing	Signature	Date