



Account Opening Check List

(Please ensure all of the documents listed below are attached)

- Two (2) current passport photograph of each signatory (with names written behind)
- Signed signature cards(with form attached)
- Recent utility bill issued (within the last three months)
- Completed reference form (excluding savings account)
- Valid identification for each signatory
- Two (2) reference IRO account signatories (see enclosed forms)

ADDITIONAL REQUIREMENTS FOR CORPORATE/INCORPORATED BODIES

- Certificate of registration/incorporation
- Certified form C07, C02 (Particulars of Directors)
- Certified true copy of Articles of Association and memorandum
- Board Resolution
- Partnership deed
- Company seal

All original documents to be sighted. Resolutions and Mandate, terms and conditions to be signed by the director(s) and company secretary with company seal

Account Introduced by:

Name.....Signature.....

Branch..... Date.....



EMPIRE TRUST
Microfinance Bank

ACCOUNT OPENING FORM-INDIVIDUAL

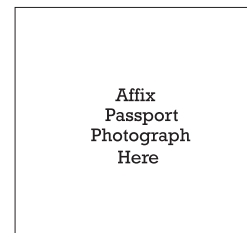
This form should be completed in CAPITAL LETTERS,

Category of Account: (Please tick as appropriate)

Joint Account Fixed Investment Account Savings Account

Account Type: (Please tick as appropriate)

Current Account Fixed Deposit Account Savings Account Domiciliary Account £ € \$ Others



Affix
Passport
Photograph
Here

BRANCH

ACCOUNT No. (For official use only)

BANK VERIFICATION ID NO:

1. PERSONAL INFORMATION

Title First Name

Surname Other Names

Marital Status (Please tick) Single Married Others (Please specify) Gender: Male Female

Date of Birth Country of Birth

Mother's Maiden Name

Nationality 2nd Nationality

Country of Residence Permit Issue Date: Permit Expiry Date:

L.G.A State of Origin

Tax identification Number (TIN) Resident permit No.

Purpose of Account Religion (Optional)

2. CHILD'S DETAILS

First Name Other Names

Surname Date of Birth Gender: Female Male

3. CONTACT DETAILS

House Number Street Name

Nearest Bus Stop/Landmark

City/Town L.G.A

State

Mailing Address

Phone Number (1) Phone Number (2)

E-mail Address

4. VALID MEANS OF IDENTIFICATION

National ID Card National Driver's Licence International Passport INEC Voters Card Others (Please Specify)

ID No. ID Issue Date ID Expiry Date

Country of Issuance

5. ACCOUNT SERVICE(S) REQUIRED (Please tick applicable below)

Card Preference: Verve Card Master Card Visa Card Others (Specify)

Electronic Banking Preferences: ETMB Online ETMB Mobile ATM POS Other Electronic Channels (Fees may apply) Specify

Transaction Alert Preferences: Email Alert (Free) SMS Alert (Fee applies)

Statement Preferences: Email Collection at Branch Statement Frequency: Monthly Quarterly Bi-Annually Annually

Cheque Book Requisition: (Fee applies) Open Cheque Crossed Cheque 25 Leaves 50 Leaves 100 Leaves

Cheque Confirmation: Will you like to pre-confirm your cheques? Yes No

Cheque Confirmation Threshold: If yes, please specify the threshold

6. EMPLOYMENT DETAILS

Employed Self Employed Unemployed Retired Student Others (Please specify)

Date of Employment (If employed)

D	D	M	M	Y	Y	Y	Y

Annual Salary/Expected Annual Income

(a) Less Than N50,000 (c) N51,000 - N250,000 c) N251,000 - N500,000 (d) N501,000 - Less than N1million

(e) N1million - Less than N5million (f) N5million - Less than N10million (g) N10million - Less than N20million (h) Above N20million

Employer's Name

House Number Street Name

Nearest Bus Stop/Landmark

City/Town L.G.A

State

Type of Business/
Occupation

Office Phone No2.

7. DETAILS OF NEXT OF KIN

First Name Other Names

Surname

Date of Birth

D	D	M	M	Y	Y	Y	Y

 Gender Male Female Title (Specify)

Relationship

Phone Number 1 Phone Number 2

Country Code

Country Code

E-mail Address

House Numbre Street Name

Nearest Bus Stop/Landmark

City/Town

State

8. ADDITIONAL DETAILS

I Name of Beneficial Owner(s) (if any)

II Spouse's Name (if applicable)

III Spouse's Date of Birth

D	D	M	M	Y	Y	Y	Y

 Spouse's Occupation

IV Source of Funds to the Account 1.
2.

Expected Annual Income from Other Sources

V Name of Associated Business(es) (if any) 1.
2.
3.

VI Type of Business

VII Business Address

VII How did hear about us? TV Radio Press Online Word of Mouth Others (Please specify).....

Endorsement
Date..... Signature.....

Declaration

I/We hereby apply for the opening of account(s) with Empire Trust Microfinance Bank Ltd. I/We understand that the information given herein and the documents abounding are the basis for opening such accounts and thus warrant that such information is correct. I/We have read the terms and conditions governing the operations of the account(s) which are presented here-in and agree to be bounded by them.

I/We hereby request and authorize you to:

Open the account(s) marked overleaf in my/our name(s) and at anytime consequently to open such further account as I/We may direct and in consideration, I/We agree

a. To take full responsibility for the genuineness, correctness and validity of all endorsement that appears on all cheques orders, bills negotiable instruments, receipts and other document concerning the account.

b. To be bound by the bank's rule for the conduct of an account(s) receipt of which I hereby acknowledge.

c. To free the Bank from any accountability for any loss or damage to fund deposited with the bank due to any future government order, law, levy, tax, embargo, restriction, such other causes beyond the Bank's control.

d. That all funds standing to my/our are payable only in such local currency as may be in circulation.

e. That the Bank will admit no responsibility, accountability or liability whatsoever for funds handed to members of the bank's staff outside banking hours or outside the Bank's premises with the exception of an agreement in writing.

f. That the Bank statement on my/our account(s) shall be sent to the last known address or as indicated overleaf and from time to time such other information relevant to the account(s) may be sent to the mobile telephone number provided overleaf. Any disagreement with entries or information on my/our Bank statement(s) shall be made by me/us in writing and delivered to the Bank within 15days of the print date stated thereon, failing which, the Bank shall consider the statement(s) to be accurate.

g. That interest will be payable on deposits in my/our savings account(s) at the bank's

ruling rate and prevailing conditions.

h. That any change in my/our particulars indicated overleaf shall immediately be communicated to Empire Trust Microfinance Bank Ltd at the branch where the account was opened.

i. Not to use the account(s) as a medium to convert funds belonging to other individuals/group.

j. To honor all cheques or orders which may be drawn on my/our current account provided such cheques or orders are signed by me/us and to debit such cheques or orders to the said account, whether such account(s) be for time being in credit or overdrawn in consequence of such debit without prejudice to your right to decline any overdraft or increase of overdraft.

k. That if a cheque credited to my/our account(s) is dishonored, the Bank may notify me/us via telephone or mail/e-mail indicated overleaf.

l. That my/our notice has been drawn to the necessity of protection my/our cheque book and other Bank's Instruments so that unauthorized individual(s) are unable to gain access to them and to the fact that neglect of this preventative measure may be basis for any resulting loss being charged to my/our accounts.

m. That the Bank is under no obligation to honor any cheque drawn on my/our account unless there are sufficient funds to cover the value of the cheque(s) and I/We identify with and agree that any such cheque(s) may be returned to me/us unpaid but if paid, I/We am/are obliged to repay the Bank on demand any outstanding sum on my/our account in addition to charges and interest accrued thereon.

n. That any sum standing to the debit of my/our current account shall be liable to interest charges at the rate set by the Bank from time to time. The Bank is authorized to debit the account(s) with the usual Banking charges, interest, commissions, and any service charges predetermined by the Bank from time to time.

o. That in addition to any general lien or related right to which you as bankers may be permitted by law, you may at any time and

without notice to me/us consolidate or combine all or any of my/our account without any liability to you and set of or transfer any sum or sums standing to the credit of any one or more of such account(s) or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other property with you or any other respect whether such liabilities be contingent or actual primary collateral and several or joint.

p. To be bound by these and other terms and conditions on hand now and in the future governing the running of the account(s) and other services which include internet Banking, Automated Teller Machine (ATM) and Domestic Money Transfer.

q. (for joint account): We agree that, in the event of the demise of either or both of us, the Bank is to pay or deliver to the other of the survivor(s) of us,; all money, deeds, securities, and other property whatsoever standing to the credit or held by the Bank for any account(s) in our joint name.

Fixed Deposit

r. That Empire Trust Microfinance Bank Ltd must be notified before any investment under this fund is assigned, transferred or negotiated to any other person other than the investor and the Bank reserves the right to dishonor any order from any third party other the investor if it is not notified prior to the assignment, transfer or negotiation.

s. That the certificate must be surrendered to the Bank at maturity/withdrawal of investment or any section thereof.

t. That the investment shall be placed on call after the date on which it becomes repayable except prior agreement for its repayment has been prepared with the Bank.

u. That rates may be attuned with market realities.

v. That offers rates are only indicative and may be adjusted depending on market realities.

Name.....

Signature..... Date.....