

No. 5 Ike Crescent, Off Eliozu Raod, Port Harcourt, Rivers State.

INDIVIDUAL ACCOUNT OP	ENING FORM	Passport Photograph
☐ Entity Care Account for School Children ☐ E ☐ Entity Target Savings Account ☐ E ☐ Entity Daily Savings Account (Akawo 1) ☐ E	Entity Hybrid Account Entity Saving Account Entity Individual Current Account Entity Fixed Deposit Account Entity Joint Account	
Branch:	WE WE WE	
BVN:	A/C No.:	
Title: Surname:	1000 1000 1000 1000 1000	
First Name:	Middle Name:	
L.G.A of Origin:	State of Origin:	
Residential Address:	Town/City:	State:
Nationality:	Mother's Maiden Name:	424
Office Address:	Town/City:	State:
Mobile No.	Postal Address:	
E-mail Address:	45 45 45 45	16 19 15
Gender:M F Date of Birth:	Marital Status:	NUNC
Customer's Occupation:	Line of Business:	1575
Employment Status: Paid Employment Self B	Employmed Unemployed Student Retired Oth	ners
Employer's Name:	115 115 115 115	15 1/5
Employer's Address:		
Next of Kin:	45454545	15 15
Address of Next of Kin:		
Relationship with Next of Kin:	Phone No. Of Next of Kin:	15 115
Gender:M F Date of Birth:	E-mail of Next of kin:	
Any Existing Account with ENTITY MFB? Yes	SMS Alert E-Statement (fees apply)	E-mail Alert
Means of Identification: National ID card	nternational Passport Driver's License Permaner	nt INEC Voter's Card
Others (specify)	1D No. 9 4 4 9 6	15 45
ID Issued Date:	ID Expiry Date:	TOLE
I/We request ENTITY Microfinance Bank (given here is correct to the best of my/our limits)	"the Bank") to open an account as specified above knowledge and belief.	e and that information
Signature:	ACACAC	Date:

DD MM YYYY

## ACCOUNT OPENING AGREEMENT

To: Entity Microfinance Bank Limited ("the bank)

I/WE HEREBY REQUEST AND AUTHORIZE ENTITY MICROFINANCE BANK LIMITED:

To open an account as specified overleaf in my/our name at any time subsequently to open further accounts as may be directed by me/us.

To honour all cheques or other orders which may be drawn on the said accounts provided such cheque or orders are signed by me/us and to debit cheques or orders, to the said account provided such account has sufficient credit to cover the cheque amount or order.

## I/We also agree:

- 1. To be bound by "the bank's" rule for the conduct of an account(s), receipt of which I/We hereby acknowledge,
- 2. That all funds stand to my/our credit are payable on demand only in such local currency as may be in circulation.
- 3. To free "the bank" from any responsibility for any loss of fund deposited with "the bank" due to any future government order, law. Levy, tax, embargo, moratorium, exchange restriction or other such causes beyond the bank's control.
- 4. To be bound by any notification of change in conditions governing the account(s) directed to my/our last known address and any mail sent to my/our last known address shall be deemed to have been delivered to me/us at the time would have been delivered in the ordinary cause of post.
- 5. That interest will be paid on deposit in my/our savings account at bank's ruling rate and subject to prevailing conditions.
- 6. That my/our attention has been drawn to the necessity of safe-guarding my/our passbook so that unauthorized persons will not have access to it to the fact that neglect of this precaution may be a ground for consequential loss been charged to my/our account.
- 7. That in addition to any general lien or similar right to which you as bankers may be entitled by law you may at anytime and without notice to me/us combine or consolidate all or any of my/our accounts without liability to you and set off or transfer any sum or sums interest charges for standing to due credit any or more of such accounts or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging to me/us towards the satisfaction of any of my/our liabilities to you or any other accounts or in any respect whether such liabilities be actual or contingent, primary or collateral and several or joint.
- 8. That any change in my particulars as given overleaf shall be immediately communicated to "the bank" branch where the account was opened.
- 9. That any disagreement with entries on my/our bank statement(s) shall be made by me/us in writing and delivered to the bank within 15 days of the print date indicated thereon, failing which, the bank shall consider the statement and the entries therein.
- 10. I/We hereby agree that "the bank" may at its discretion close my/our account in the event that is dissatisfied in any way with the operation thereof.
- 11. That "the bank" is authorized to debit from my/our account any bank charges, Commission, and service charges from time to time.
- 12. I/W agree that where more than 3 withdrawals are made on a savings account in one month, I/We shall not be entitled to any interest payments on the account for that month. Also other terms and conditions holds on all our savings Accounts.

Names	Signa	ature/Date:	
MANDATE CARD			
Account Number	Mobile Phone No.	1816	
Please Specify Mandate Authorization and Combination Rule	Mandate	Affix Passport Photograph here	Affix Passport Photograph here
FOR BANK USE ONLY	Signature/Date —		
Opened By: Name:	Signature/Date —	WE WE	- WE
Approved By: Name:	Signature/Date —	121	
Managed By: Relationship Officer:	Signature/Date —	100	THE
Risk Profile: Low Medium High	Risk Justification —	ASA	
ame: A	Sign & Date-	100	