

**EKWULOBIA MICROFINANCE BANK NIGERIA LTD RC214413**

**ACCOUNT OPENING FORM**

**ACCOUNT CATEGORY:**

**(Tick appropriate)**

Individual

Joint

Corporate

**ACCOUNT TYPE:**

**(Tick appropriate)**

Savings

Thrift

Current

**ACCOUNT INFORMATION**

Name Of Account: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Landmak \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Business Address: \_\_\_\_\_

Landmak \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Nature Of Business \_\_\_\_\_

Sources Of Income: \_\_\_\_\_ Phone No: \_\_\_\_\_

Cac Registration No: \_\_\_\_\_ Registration Status (Incorporation Or  
Business Name) \_\_\_\_\_

Directors of Trustees:

1. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

2. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

3. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

4. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

5. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

6. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

7. Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone No \_\_\_\_\_

**INFORMATION OF SIGNATORY 1**

Title: Lastname Firstname Othername

Contact Address.....NIN \_\_\_\_\_

Business Address.....Occupation.....

Home Town.....LGA of Origin.....

State of Origin.....Place of Birth.....

Phone Number.....BVN.....

Email.....Date of Birth.....

Next of Kin:

Customer's Signature

Title: Lastname Firstname Othername  
 Contact Address.....NIN \_\_\_\_\_  
 Business Address.....Occupation.....  
 Home Town.....LGA of Origin.....  
 State of Origin.....Place of Birth.....  
 Phone Number.....BVN.....  
 Email.....Date of Birth.....  
 Next of Kin: Customer's Signature

Title: Lastname Firstname Othername  
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Title:	Lastname	Firstname	Othername
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