Branch Name: Account No: 1. APPLICANTS 'S PERSONAL DETAILS Mr/Mrs/Miss/Other: Date of account opening: Other Names: Surname: Date of birth: Cell phone: Land line: **Email Address:** Please specify if CONTACT is: I. Addition II. Replacement Voter ID* ID Type: National ID card **Drivers Licence** NHIS Passport If other please specify NOTE: Below applies to amendment of residential address only if current address differs from what we hold in the system 2. Proof of Residential Address: Utility Bills Bank Statement Tenancy/lease+ Utility Bill Accountants Search report from lands commission **Amendment Requested** Applicant's Signature /Thumb print Date Bank Use Only CID No.: Sybrin No.: Personal Banker: Branch/Ops Mgr Name: Signature: Signature:

Customer Details Update Form

Date:

Third parties can pick up forms on behalf of account holders. Please ensure a valid ID is attached when the form is being returned.

Date:

