

Additional Account Opening Form

GTCO

Guaranty Trust Bank Ltd

Title:

Mr

Surname:

David

Other Name:

Olamide

First name

Olasupo

Middle name

Existing Account No.:

0232823678

Type of Account:

(Please tick the type of account(s) you want to open)

Current

☒

Savings

☐

Deposit

☐

Call

☐

Domiciliary A/C:

(Reference required)

US Dollars

☒

Pounds Sterling

☐

Euro

☐

Kindly issue a cheque book and debit my/our account:

Yes

☐

Signature:

David

Residential Address (not P.O. box):

32, Dremarin Street, Agege Meeting
Ikorodu, Lagos, Nigeria

Telephone number:

09060880561

Home/Office

Mother's Maiden Name:

Aramide Sammi

SMS Alert required: (Charges apply):

Yes

☐

No

☒

Tax identification No:

N-12161658

E-mail address:

ggnetlink@gmail.com

Privacy Policy

The bank takes your privacy seriously and only processes your personal information to make your banking experience better. In accordance with NDPR and other applicable regulations, signing below indicates your consent to the processing of your personal data by Guaranty Trust Bank, its strategic partners/service providers, Guaranty Trust Bank's Holding company and its subsidiaries, as detailed in our Privacy Policy available at <https://www.gtbank.com/privacy-policy>

David Olamide03

Day

01

Month

2024

Year

Declaration:

I/We hereby apply for the opening of an additional account(s) with Guaranty Trust. I/We understand that the information given herein and the documents supplied are the basis for opening such account(s) and therefore warrant that such information is correct.

Terms and Conditions as specified on existing account(s) also apply on additional account(s).

David Olamide

Signature

David Olamide

Signature

Date:

03

Day

01

Month

2024

Year

Date:

03

Day

01

Month

2024

Year