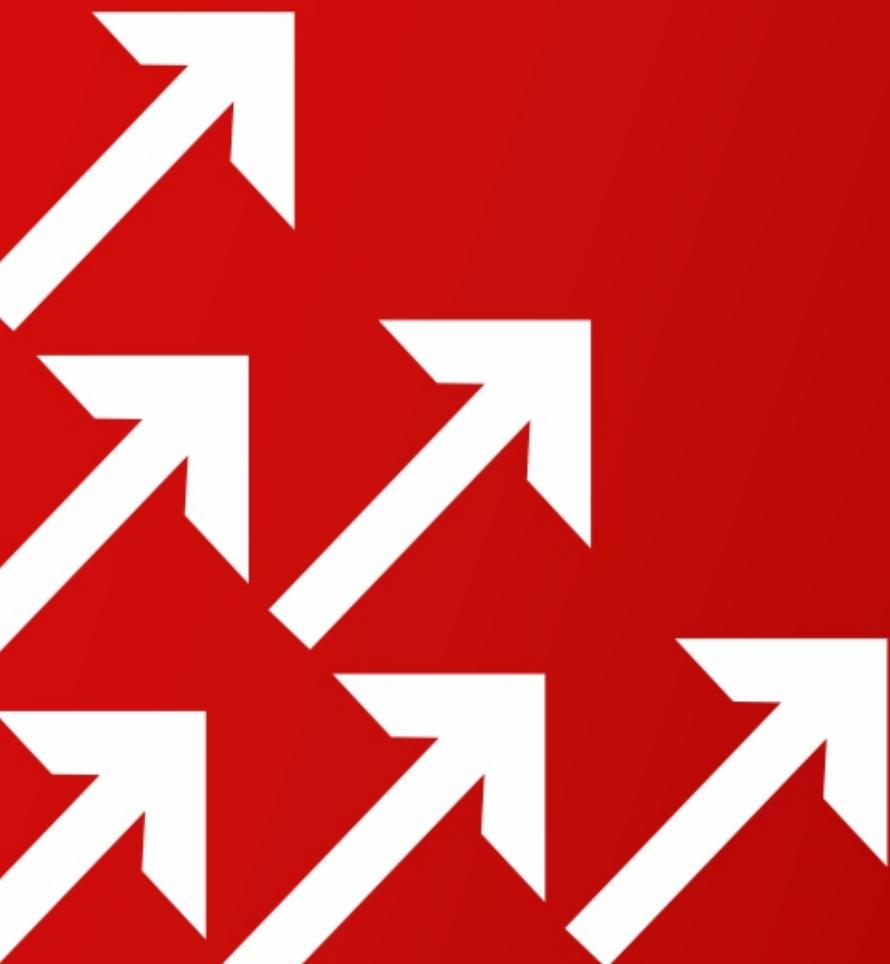




ACCOUNT OPENING FORM

Individual Account



4. EMPLOYMENT DETAILS

Employment Status - Employed <input type="checkbox"/>	Self Employed <input type="checkbox"/>	Unemployed <input type="checkbox"/>	Retired <input type="checkbox"/>	Student <input type="checkbox"/>	Others <input type="checkbox"/>									
Employer's Name <input type="text"/>						Date of Employment (if employed)	D	D	M	M	Y	Y	Y	Y
Street number <input type="text"/>	Street Name <input type="text"/>					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
City/Town <input type="text"/>	<input type="text"/>					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Nearest Bus Stop <input type="text"/>	<input type="text"/>					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Nature of Business / Occupation <input type="text"/>	<input type="text"/>					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Office Phone Number <input type="text"/>	<input type="text"/>					Fax Number <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

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

Card Preference - Naira Debit Card Dollar Debit Card (For domiciliary account)

Electronic Banking Preference - Internet Banking Mobile Banking ATM POS Other electronic Channels (Fees may apply) Specify

Transaction Alert Preference - Email Alert (Free) SMS Alert (Fees Apply)

Statement Preference - Email Collection at Branch Statement Frequency - Monthly Quarterly Semi-Annually Annually

Cheque Book Requisition

Cheque Confirmation Policy - To ensure the safety of your funds at PremiumTrust Bank, We recommend you confirm cheques of N500,000 and above before such cheques are presented over the counter or via clearing, such cheques below N500,000 will be paid without prior confirmation.

Preferred Language of Communication - English Hausa Igbo Yoruba Others (state)

Authorized Signatory

Authorized Signatory

6. DETAILS OF NEXT OF KIN

Surname <input type="text"/>	Middle Name <input type="text"/>	First Name <input type="text"/>	Date of Birth <input type="text"/> D D M M Y Y Y Y Y Y	Gender F <input type="checkbox"/> M <input type="checkbox"/> Title (specify) <input type="text"/>
E-mail Address <input type="text"/>	Relationship <input type="text"/>			Mobile Number (1) <input type="text"/> Mobile Number (2) <input type="text"/>
Mobile Number (1) <input type="text"/>	House Number <input type="text"/> Street Name <input type="text"/>			LGA <input type="text"/>
Contact Details <input type="text"/>	City / Town <input type="text"/>			State <input type="text"/>
House Number <input type="text"/>				
Nearest Bus Stop <input type="text"/>				

7. ADDITIONAL DETAILS

Spouse's Name																					
Spouse's Date of Birth	D D	M M	Y Y Y Y	Spouse Occupation																	
Country of Birth											Nationality										
Street Name																					
City/Town											Country										
Phone Number (1)											Phone Number (2)										
Source of Fund to the Account 1																					
Expected Monthly Income from Other Sources																					
Name of Associated Business(es) (if any) 1																					
2																					
Type of Business																					
Business Address																					

8. ACCOUNT MANDATE

Account Name											
Account Number											(for official use only)

Mandate authorisation/combination rule (Please tick as appropriate)- Sole Signatory Either to sign Both to sign

Signatories:

Surname											First Name																		
Other Name											Class of Signatory																		
Identification Type																													
Identification Number																													
										Date	D D	M M	Y Y Y Y																
																				Affix Passport Photograph Here									

Signature: _____

Surname											First Name																		
Other Name											Class of Signatory																		
Identification Type																													
Identification Number																													
										Date	D D	M M	Y Y Y Y																
																				Affix Passport Photograph Here									

Signature: _____

FOR BANK USE ONLY										FOR BANK USE ONLY									
Name					Signature					Name					Signature				

9. ACCOUNT HELD WITH OTHER BANKS:

S/N	NAME AND ADDRESS OF BANK/BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	STATUS: ACTIVE/DORMANT



10. ADDITIONAL INFORMATION

Government Issued Identification - ID Type ID Number

Issue Date: DD MM YY Expiry Date: DD MM YY

Are you tax resident in more than one country? - Yes No If yes, please specify _____

Tax Identification Number (TIN)
(if available)

Power of Attorney if yes - Yes No If yes, please specify (Name) _____

Street number Street Name

City/Town _____

Mobile Number (1) _____ Mobile Number (2) _____

Waiver

I hereby authorize the Bank to take appropriate action to comply with relevant regulations.

Signature: _____

Date: _____

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) FORM

Information of Authorised signature (FATCA US Indication)

Please confirm the signatory's FATCA status by checking the relevant box.

1	Please list all countries for which you hold citizenship		
2	What is your birthplace?		
3	Are you a U.S. citizen or lawful permanent resident? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide form W-9 or W-BBEN and Non-U.S. Passport or similar documentation establishing foreign citizenship, and written explanation regarding U.S. citizenship.		
4	Is there power of Attorney or signatory authority granted to person with U.S. address? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide form W-9 or W-BBEN; and Non-U.S. Passport or similar documentation establishing foreign citizenship.		
5	Will there be instructions to transfer funds to U.S. Account or directions regularly received from a U.S. address? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide form W-9 or W-BBEN; and documentary evidence establishing non-U.S. status.		
6	Will there be an address on file which is (U.S. Address in care of or U.S. Address in hold mail) or U.S. P.O. Box and/or U.S. Telephone number? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide form W-9 or W-BBEN; and documentary evidence establishing non-U.S. status.		
7	U.S. Residence address or a U.S Correspondence address (including a U.S. P.O. Box) Yes <input type="checkbox"/> No <input type="checkbox"/>		
8	Additional information		

11. AUTOMATIC EXCHANGE OF INFORMATION (AEOI) - COMMON REPORTING STANDARD INFORMATION

THIS SECTION IS ONLY ELIGIBLE FOR EITHER

1. CUSTOMERS THAT DO NOT RESIDE IN EITHER NIGERIA OR UNITED STATES
 2. CUSTOMERS THAT ARE NON-NIGERIANS. (THIS IS INCLUSIVE OF CUSTOMERS THAT HAVE DUAL

COUNTRY/JURISDICTION OF RESIDENCE FOR TAX PURPOSES AND RELATED TAXPAYER IDENTIFICATION NUMBER OR EQUIVALENT NUMBER

Please complete the following table indicating

- (I) where the Account Holder is tax resident
(II) where the Account Holder's TIN for each country/jurisdiction indicated. Countries/ Jurisdiction adopting the wider approach may require that the self-certification include a tax identifying number for each country/jurisdiction of residence (rather than for each Reportable Jurisdiction)

If a TIN is unavailable, please provide the appropriate reason A, B or C-

Reason A- The country/Jurisdiction where the Account Holder is resident does not issue TINs to its residents

Reason A- The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents
Reason B- The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

Reason C- No TIN is required. (Note. Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)



Country/ Jurisdiction of tax residence		TIN	If no TIN available, enter Reason A, B or C
1			
2			
3			

12. JURAT (this should be adopted where the applicant is not literate or is blind and the form is read to him or her by a third party)

I agree to abide by the content of this agreement and acknowledge that it has been truly and audibly read over and explained to me by an interpreter

Mark of Customer/Thumbprint	Magistrate/Commissioner of Oaths
	Name of Interpreter
Address of Interpreter	
Telephone Number	Language of Interpretation

13. ACCOUNT OPENING AUTHORIZED / APPROVED BY

Signature: _____

Date:

D	D	M	M	Y	Y	Y	Y

BSM

Signature: _____

Date:

D	D	M	M	Y	Y	Y	Y

CUSTOMER INFORMATION UPDATE NOTICE

We are aware that some or all of the information you have provided on this form is subject to change, in light of this, PremiumTrust Bank requires that you update your information with us anytime there is a change. This will ensure we are able to keep in touch with you. As a standard, PremiumTrust Bank carries Customer Information Update Exercise Bi-annually.

14. INDIVIDUAL ACCOUNT MANDATE

To PremiumTrust Bank

I/WE (the Customer) HEREBY REQUEST AND AUTHORISE YOU TO

1. Open an account in my/our name and at any time subsequently open further accounts as I/We may direct.
2. Honour all orders which may be drawn on the said account provided such orders are signed by me/us and to debit such order to the said account whether such account be for the time being in credit or overdrawn or may become overdrawn in consequence of such debit without prejudice to your right to refuse to allow any overdraft or increase of overdraft and in consideration, I/We agree:
 - a) To assume full responsibility for the genuineness, correctness and validity of endorsements appearing on all cheques, orders, bills, notes, negotiable instruments, receipts and/or other documents deposited in my/our account.
 - b) To be responsible for the repayment of any overdraft with interest and to comply and be bound by the Bank's rules for the conduct of a Savings Account receipt of which I/We hereby acknowledge.
 - c) To free the Bank from any responsibility for any loss or damage to funds deposited with the Bank due to any future government order, law, levy, tax, embargo and/or all other causes beyond the Bank's control.
 - d) That all funds standing to my/our credit are payable on demand only in such local currency as may be in circulation.
 - e) To be bound by any notification of change in conditions governing the account directed to my/our last known address and any notice or letter sent to my/our last known address shall be considered as duly delivered and received by me/us at the time it will be delivered in the ordinary course of post.
 - f) And I/We note that the Bank will accept no liability whatsoever for funds handed to members of staff outside the Bank's premises.
 - g) That any disagreements with entries on my/our Bank Statements will be made by me/us within 15 days of the dispatch of the Bank Statement. Failing receipt by the Bank of a notice of disagreement of entries within 15 days from the date of dispatch of my/our Bank Statement as rendered is correct.
 - h) The Customer hereby agrees that the Customer shall, at his/its own expense, indemnify, defend and hold harmless PremiumTrust Bank from and against any and all liability any other loss that may occur, arising from or relating to the operation or use of the Account or the Services or breach, non-performance or inadequate performance by the Customer of any of these Terms or the acts, errors, representations, misrepresentations, misconduct or negligence of the Customer in performance of its obligations.
 - i) Under no circumstances shall PremiumTrust Bank be liable to the Customer for any indirect, incidental, consequential, special or exemplary damages in connection with the Account or the Services.
 - j) PremiumTrust Bank shall not be liable for any failure to perform any obligation contained in these Terms or for any loss or damage whatsoever suffered or incurred by the Customer howsoever caused and whether such loss or damage is attributable (directly or indirectly) to any dispute or any other matter or circumstances whatsoever.
 - k) The Customer shall keep PremiumTrust Bank indemnified at all times against, and save PremiumTrust Bank harmless from all actions, proceedings, claims, losses, damages, costs, interest (both before and after judgement) and expenses (including legal costs on a solicitor and client basis) which may be brought against or suffered or incurred by PremiumTrust Bank in resolving any dispute relating to the Customer's Account with PremiumTrust Bank or in enforcing PremiumTrust Bank's rights under or in connection with these Terms and conditions contained herein, or which may have arisen either directly or indirectly out of or in connection with PremiumTrust Bank performing its obligations hereunder or accepting instructions, including but not limited to, fax and other telecommunications or electronic instructions, and acting or failing to act thereon.
 - l) If any sum due and payable by the Customer is not paid on the due date, including without limitation any moneys claimed under this Paragraph, the Customer shall be liable to pay interest (both after as well as before any judgement) on such unpaid sum at such rate or rates as PremiumTrust Bank may from time to time stipulate from the date payment is due up to the date of payment.
 - m) The Customer shall solely be responsible for ensuring full compliance with all the applicable laws and regulations in any relevant jurisdiction in connection with establishment of his/her Account with PremiumTrust Bank and shall indemnify and keep indemnified PremiumTrust Bank from all actions, proceedings, claims, losses, damages, costs and expenses (including legal costs on a solicitor and client basis) which may be brought against or suffered or incurred by PremiumTrust Bank in connection with any failure to comply with any such applicable laws/regulations.
 - n) The indemnities as aforesaid shall continue notwithstanding the termination of the Account.
 - o) That any sum standing to the debit of the current account shall bear interest charges at the rate fixed by the Bank from time to time. The Bank is authorized to debit from the account the usual banking charges, interest, commissions and any service charge set by the Management from time to time.
 - p) I/We also agree that in addition to any general lien or similar right to which you as bankers may be entitled by law you may at any time without notice to me/us combine or consolidate all or any of my/our accounts without any liabilities to you and set off or transfer any sum or sums standing to the credit of anyone or more of such accounts or any other credits, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging to me/us with you in or towards satisfaction of any of my/our liabilities to you or any other account or in any other respect whether such liabilities be actual or contingent, primary or collateral and joint or several.
 - q) I/We shall be solely responsible for the safe-keeping and the confidentiality of the statements of account, balance confirmation certificate, cheque books, Debit card and its PIN, User Id and passwords relating to internet banking and such other items relevant or pertaining to the Account.
3. Honour all online instruction to transfer funds from the said account to another account held by me or any other person in PremiumTrust Bank or to make payment for service without prejudice to your right to refuse to allow any overdraft or increase in overdraft and without liability to you for such transfer.

YOU SHOULD READ THESE TERMS AND CONDITIONS CAREFULLY*

You will be bound by them once you sign an application form, so ensure that you read them before that. You should also retain a copy of it for future reference.

I/We ("Customer") hereby confirm and agree to the following terms and conditions in relation to all banking and other financial transactions between me/us and PremiumTrust Bank Limited ("the Bank"). I/We further agree that where the services to be provided by the Bank are not regulated by the terms and conditions contained herein, they shall be regulated by customary banking practices in Nigeria. Opening of an account with us is subject to certain restrictions. For example, you must be at least 18 years of age to open a current account with us and we will require you to place a minimum deposit with us. Exceptions may however be created for special accounts for certain categories below 18 years. We reserve the right to decline your account application or accept your money if you are unable to provide us with any of the information we require or for any other reason. We are not obliged to inform you of the reason why your application was declined, and we will not enter into any correspondence in these circumstances.

E-BANKING SERVICES

Before you can be availed of the bank's E-banking Services, you must have any one or a combination of the following:

- (a) An account with the bank
- (b) A pass code, access code, username, password or Token authenticators.
- (c) A Personal Identification Number "PIN"
- (d) An E-mail address
- (e) GSM Number

We may issue you with Personal Identification Numbers (PINs) or other security information (for example details that allow you to access your accounts through our Internet Banking Service). You must not disclose your security information to anyone else and you must take reasonable steps to keep it secure. For example you should not choose obvious codes or passwords, write down the information in a way that is recognisable or let another person overhear or observe its use.

You understand that your Pass code, Access code/Password/E-mail is used to give instruction to the bank and accordingly undertake:

- (a) That under no circumstance shall the Pass code, Access Code / Password be disclosed to anybody.
- (b) Not to write the Pass code, Access Code / Password in an open place in order to avoid a third party coming across same.
- (c) To instruct and authorize the bank to comply with any instruction given to the bank through the use of the service.
- (d) Once the bank is instructed by means of the customer's Pass code.
- (e) To immediately change your Pass code, Access code if it becomes known or you suspect that it has become known to someone else.
- (f) To exempt the bank from any form of liability whatsoever for complying with any or all instruction(s) given by means of your Pass code, Access code if by any means the Pass code, Access code becomes known to a third party.
- (g) Where you notify the bank of your intention to change your Pass code, Access code arising from loss of memory of same or that it has come to the notice of a third party, the bank shall, with your consent, delete same and thereafter allow you to enter a new Pass code or Access code PROVIDED that the bank shall not be responsible for any loss that occurs between the period of such loss of memory of the Pass code, Access code or knowledge of a third party and the time the report is lodged with the bank.
- (h) Once your Pass code/Access code is given, it shall be sufficient confirmation of the authenticity of the instruction given.
- (i) You shall be responsible for any instruction given by means of your Pass code/Access code. Accordingly, the bank shall not be responsible for any fraudulent, duplicate or erroneous instruction given by means of your Pass code/Access code.

TERMS AND CONDITIONS

THE RESPONSIBILITIES OF THE ACCOUNT HOLDER

1. Send account opening documentation and required documentation to amend existing mandates and other related instructions on the account as may be prescribed by the Bank from time to time.
2. Ensure proper completion of signature cards
3. Promptly send in cheque book requisition slip/ letter
4. I/we pledge that we shall not issue any cheque or instruction or instrument on our account without first ensuring that our account with the Bank is sufficiently funded to accommodate such payment. Consequently, we hereby authorize the Bank to report to the Central Bank of Nigeria (CBN), Economic and Financial Crimes Commission and/or any other regulator, details of any transaction or incident of returned cheque or instrument on our accounts due to insufficient funds for further investigation and prosecution.
5. I/we pledge to comply with the rules and regulations put in place by the CBN regarding dud cheque from time to time. Consequently, we hereby irrevocably and unconditionally authorize the Bank to enforce without further recourse to us, such CBN rules and regulation on dud cheque as may be applicable against us in the event of our breach CBN rules.
6. Where you provide personal and financial information relating to others (e.g. dependants or joint account holders) for the purpose of opening or administering your account, you confirm that you have their consent or are otherwise entitled to provide this information to us and for us to use it in accordance with these terms and conditions.
7. If you are opening account with another person ("Joint Account"), we will ask for a specimen signature from all parties to the account. Each of you can take or use everything in the joint account, and all of you are jointly and individually responsible for any money owed to us on the joint account. We may demand repayment from all of you, any of you, and any combination of joint account holders for any money owed on the account, even if one of you generally puts money in the account, or if only one of you takes all the money and spends it.
8. Provide PremiumTrust Bank with specimen signatures of its authorised signatories
9. Inform PremiumTrust Bank immediately of any change(s) to the list of authorised signatories
10. Complete necessary details for cheque payments
Keep his/her/its cheque booklet properly and promptly notify PremiumTrust Bank the loss of a cheque booklet and/ or detachment of leaves of a cheque booklet
11. Shall assume full responsibility for the genuineness or and validity of all cheques, orders, bills, notes, negotiable instruments, receipts and/or other documents including endorsements appearing on the same, deposited in or drawn on in respect of his/her/its account(s) with the Bank.
12. Shall ensure that he/she/it collects duly stamped deposit slip for any sum deposit into the account.
13. Shall indemnify the Bank against any loss, damage, expense or claim the Bank may suffer by reason of opening the said account(s) or by reason of the falsehood or inaccuracy of any information or misrepresentation made to the Bank by the Account Holder except those losses, damages, expenses or claims directly resulting from the acts, defaults or gross negligence of the Bank.
14. Shall hold the Bank harmless and free of any liability whatsoever for any loss, damages, fraud or claims that the Account Holder may incur from the fraudulent use of any telephone number, fax number or email address supplied in this form or subsequently by the Account Holder whether for the purpose of issuing instructions, receiving/sending account information or indeed any transaction related to this account.
15. You undertake to be absolutely responsible for safe-guarding your username, access code, Pass code, PIN and password and under no circumstance shall you disclose any or all of these to any person.
16. The bank is expressly exempted from any liability arising from unauthorized access to your account and/or date as contained in the bank's records via the E-banking service, which arises as a result of your inability and/or otherwise to safeguard your PIN Pass code/Access code and/or password and/or failure to log out of the system completely by allowing on screen display to this account's information.
17. The bank is further relieved of any liability as regards breach of duty of secrecy arising out of your inability to scrupulously observe and implement the provisions of not disclosing to anybody or keeping your Access code/password in an open place as stated above, and/or instances of breach of such duty by hackers and other unauthorized access to your account via the service.
18. Under no circumstance will the bank be liable for any damages, including without limitation direct or indirect, special, incidental or consequential damages, losses or expenses arising in connection with this service or use thereof or inability to use by any party, or in connection with any failure of performance, error, omission, interruption, defect, delay on operation, transmission, computer virus or line or system failure, even if the bank or its representatives therefore are advised to the possibility of such damages, losses or hyperlink to other internet resources are at your risk.
19. Copyright in the cards and other proprietary information relating to the service including the screens displaying the pages and in the information and material therein and agreement is owned by the bank.
20. The bank shall not be responsible for any electronic virus or viruses that you may encounter in the course of making use of this service.
21. The bank makes no warranty that:
 - (i) The e-banking service will meet your requirements;
 - (ii) The e-banking service will be uninterrupted, timely, secure, or error free;
 - (iii) The results that may be obtained from the use of the service will be accurate or reliable;
 - (iv) The quality of any products, services, information or other material purchased or obtained from the use of the service will be accurate or reliable;
 - (v) The quality of any products, services, information or other material purchased or obtained from the service will meet your expectations; and
 - (vi) Any errors in the technology will be corrected.
- (h) You undertake to inform us without undue delay and at least no later than 6 months after a payment is taken from your account, that a payment from your account was not authorised by you, we will carry out an investigation and, as soon as we are reasonably satisfied that you did not authorise the payment, we will refund the amount deducted and will return your account to the position it would have been in if the unauthorised payment had not taken place. We will not be liable to you for any losses you suffer or costs you incur because we do not act on an instruction for any reason specified in this TERMS AND CONDITIONS agreement; or the details contained in the instruction were not correct; or we cannot carry out our responsibilities under this agreement as a result of anything that we cannot reasonably control. This may include, among other things, any machine, electronic device, hardware or software failing to work or being down for a period, industrial disputes and complete or partial closure of any payment system.

TERMS AND CONDITIONS

However, you will be liable for:

- (a) All payments made from your account where you have acted fraudulently; and
- (b) All payments on your account(s) that take place before you inform us that a payment instrument has been lost or any of your security information has become known to someone else, if the payment was made because you deliberately, negligently or very carelessly failed to keep your payment instrument safe or your secret information secret.

RIGHTS OF THE BANK

1. The Bank may debit the account(s) with usual Banking charges, interest, commission, and fees as may be determined by the Bank from time to time.
2. The Bank shall not be liable for any loss or diminution of funds or damage to instruments deposited with the Bank due to any Government order, law, levy, tax, embargo, moratorium, exchange, restriction and/or all of other causes beyond the Bank's control.
3. The Bank is under no obligation to honour any cheques drawn on the account(s) unless there are sufficient and un-impaired funds in the account to cover the value of the said cheques. The Bank reserves the right to return such cheques to the Account Holder unpaid.
4. In the event that the Bank honours a cheque where the amount in the account is not sufficient to cover the value of the cheque, any amount drawn in excess of the value of the accounts shall be treated as an overdraft facility and the Account Holder agrees to repay the Bank the principal amount together with the interests and/or charges that the Bank may prescribe.
5. The Account Holder shall be bound by any notification of changes in conditions governing the account directed to his/her its last known address and any notice or letter sent to his/her/its known address shall be considered as duly delivered and received three business days after dispatch of same by ordinary pre-paid post or on the date endorsed on the proof of delivery if delivered by courier on the proof of delivery if delivered by courier services/hand delivery.
6. No notice which may be given to the Bank by the Account Holder shall be binding upon the Bank until it shall have been received by the Bank and sufficient time shall have elapsed thereafter to permit the Bank in due course and by such means the Bank may deem appropriate to notify the concerned/affected department offices, branches and correspondents.
7. Any disagreement with entries on the Bank's statements will be made in writing to the Bank by the Account Holder within 30 days of dispatch of the statement, failing which it will be concluded that the statement as rendered is correct and same shall no longer be disputable, except in case of manifest errors.
8. If or where any entry is made into the Account Holder's account(s) in error, the Bank is entitled to reverse such incorrect entry without prior consent of the Account Holder and any liability on the part of the Bank.
9. Where the Bank in its opinion believes the customer has not satisfactorily operate the account the Bank in its absolute discretion reserves the right to close the account with or without notice to the customer. If an account is closed where the customer has any outstanding obligation and accrued interest, the customer will be advised to clear all obligations. The customer shall take steps to collect any credit balance upon account closure and until collected, the Bank reserves the right to keep such amounts without any interest being payable thereon.
10. The Bank will retain information about you after the closure of your account for as long as permitted for legal, regulatory, fraud prevention and legitimate business purposes. The Bank may demand for Customer Information Update as required by regulatory act if customer in future desire to re-establish Banking relationship.
11. The Bank will not be liable whatsoever for funds handed by the Account Holder or his/her/its representatives or agents or employees to any of the Bank's employees without evidence of a duly stamped deposit slip.
12. In addition to any general lien or right to which the Bank as Bankers may be entitled by law, the Bank may at any time and without notice to the Account Holder combine or consolidate all or any of his/her/its accounts without liability to the Bank and set off or transfer any sum or sums standing to his/her/its credit in any one or more of such accounts or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets with the Bank or in any other respect whether such liabilities be actual or contingent, primary collateral, several or joint.
13. To affirm and undertake that all the documents used in opening the account(s) are genuine and we will indemnify the Bank if at any time it is shown otherwise and we will be further liable for any wrong that may be occasioned thereby. This indemnity to you shall be continuing and shall not be withdrawn by us so long as we maintain this account with the Bank.
The Account Holder and the Bank agree that the operation of the account(s) is subject to laws and regulations at any time existing in the Federal Republic of Nigeria, and to be bound by the terms and conditions herein. If a fraudulent activity is associated with the operation of your account, you agree that we have the right to apply restrictions to your account and report to appropriate law enforcement agencies.
14. We may share information with persons acting as our agents who have agreed to keep your personal information confidential.
15. We consider that an account is dormant if no activity (other than the interest and charges) has taken place on it for a continuous period of 6 (six) months for current Account. To reopen same you must submit fresh identification and Know-Your-Customer documents. When an account becomes dormant, we may write you to ascertain if the account is still required and to obtain written confirmation from you of your mailing address. If we receive no response from you, for security reasons, we may choose to close the account and hold the funds in a suspense account pending instructions from you.
16. I/we hereby irrevocably and unconditionally request and authorize the Bank to disclose my/our account details, transaction, and confidential information on my/our account to the United States Internal Revenue Service or European Union or any other entity or regulator whether international or local as may be requested from time to time without further recourse to me/us. I/we hereby irrevocably and unconditionally authorize the Bank to comply without further recourse to me/us with such instructions and directive as may be issued by the United States Revenue Service or European Union or any other regulator having authority over the country or jurisdiction where I/we reside or are nationalized. Such directives include without limitation deducting any sum on my/our account or withholding any payment on my/our account or made on my/our behalf and freezing my/our account without any need for any order of court. Consequently, I/we hereby irrevocably and unconditionally indemnify and hold the Bank, its officers, directors, employees and agents harmless against all claims, costs, liabilities, actions, against all demands, damages, losses or expenses which they may suffer as a result of compliance with any such regulation or law or requirements as stated above.

I HEREBY CONFIRM THAT I HAVE READ THE ABOVE TERMS AND CONDITIONS AND AFFIRM THAT I TRULY UNDERSTAND AND ACCEPT SAME AS BINDING ON ME IN RELATION TO THE ISSUANCE AND LEASE FACILITY.

Authorized Signatory & Date

Authorized Signatory & Date



FOR BANK USE ONLY

CHECK LIST (for both savings and Current/Domiciliary /Fixed Investment/Other types of Account)

Savings Account

S/N	Documents Required	Checked	Deferred	Waived
1	Duly completed account opening form			
2	Specimen signature card duly completed			
3	Recent passport photograph			
4	Proof of Identity: International Passport, Drivers License, National ID card, Valid Nigerian Voter's Card (Original must be sighted)			
5	Identity Verification Source and Date			
6	CER/PAC/Resident Permit (for non-Nigerians)			
7	Proof of Address: Utility bills etc (Certified true copy is acceptable if original is not held)			
8	Letter from Employer/School/NYSC (for salary account and/or student only)			
9	Bank Verification Number (BVN)			
10	National Identification Number (NIN)			
11	Tax Identification Number (TIN)			
12	SC UML Certification			

Current/Domiciliary/Fixed Investment/Other Types of Account

S/N	Documents Required	Checked	Deferred	Waived
1	Duly completed account opening form			
2	Specimen signature card duly completed			
3	Two (2) Recent passport photograph			
4	Two (2) independent and satisfactory references			
5	Proof of Identity: International Passport, Driver's License, National ID card, Valid Nigerian Voter's Card (Original must be sighted)			
6	Proof of Address: Utility bills etc (Certified true copy is acceptable if original is not held)			
7	Identity Verification Source and Date			
8	Letter from Employer/School/NYSC (for salary account and/or student only)			
9	CERPAC/Resident Permit (for non-Nigerians)			
10	Other documents provided			
11	Bank Verification Number (BVN)			
12	National Identification Number (NIN)			
13	Tax Identification Number (TIN)			
14	Special Control Unit against Money Laundering (SCUML) Certification			

TO BE FILLED BY RELATIONSHIP MANAGER

No.	Indicia of U.S. Status	Account status	Bank action required
1	Has/Have the account holder(s) provided any standing instructions to transfer funds to an account maintained in the U.S.?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If any question answered YES, request BSA to collect additional documentation from the customer.
2	Does the account have a U.S. Address (including P.O. Box or U.S. Phone number?)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3	(a) Has/Have the account holder(s) granted a Power of Attorney? (b) If answer to above question is "Yes," then does the Attorney have a U.S. Address?	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
4	Does this account have a hold mail" status or have "in care" address in the U.S. that is the sole address for this account?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If all questions answered NO, classify the account in Section C. No further action required.

BANK'S ASSESSMENT OF CUSTOMER'S FATCA CLASSIFICATION: Customer is US Non-US

PremiumTrust Bank Relationship Officer/Manager's Name	Signature:								
Date: <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>D D</td> <td>M M</td> <td>Y Y</td> <td>Y Y</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	D D	M M	Y Y	Y Y	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
D D	M M	Y Y	Y Y						
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						

FOR BANK USE ONLY

A. Account introduced By

Name								
Signature:				Date:	DD	MM	YY	YY

B. Account Opened By

Name								
Signature:				Date:	DD	MM	YY	YY

C. Address Verification Carried Out By

Name								
Signature:				Date:	DD	MM	YY	YY

COMMENT(S): (Address description and result finding). _____

D. Account Opening Authorised/Approved By

Name								
Signature:				Date:	DD	MM	YY	YY
Name								
Signature:				Date:	DD	MM	YY	YY

CUSTOMER DUE DILIGENCE (CDD) CHECKLIST

Individual/Joint Account

Tick the appropriate boxes

The information must be obtained and retained for all new customers and existing customers for new liability/investment products, including any signatory authorized by power of Attorney or Third-Party Mandate

Mandatory checks applicable to ALL parties to the account including authorized signatories

1	Status Verification	Completed name and identity search using prescribed "Special Reference Listing", e.g. Sanctions lists/PEP list, Blacklists etc?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2	Anticipated Volume and Type of Activity	Obtain information on the customer's anticipated volume and type of activity to be conducted across the account.		
		Transaction Types	Anticipated No. of Transactions per Month	Anticipated Amount per Month
		Cash Deposits		
		Cheque Deposits		
		Total Deposits (Including inward remittances)		
		Total Withdrawals (Including outward remittances)		

To be completed by Relationship Officer

Name	Designation																
Comments	Standard Due Diligence <input type="checkbox"/> Enhanced Due Diligence <input type="checkbox"/>																
Name (Relationship Officer)	Date: <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	D	D	M	M	Y	Y	Y	Y	<input type="checkbox"/>							
D	D	M	M	Y	Y	Y	Y										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										

Reviewed by Branch Manager/Designated Officer

Name	Designation																
Comments																	
Initial (Officer)	Date: <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	D	D	M	M	Y	Y	Y	Y	<input type="checkbox"/>							
D	D	M	M	Y	Y	Y	Y										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										

Account opening for High Risk Business requires the approval of the Business Executive

EDD Approval by Business Executive/Group Head

Name	Designation																
Signature	Date: <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	D	D	M	M	Y	Y	Y	Y	<input type="checkbox"/>							
D	D	M	M	Y	Y	Y	Y										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										

Reviewed by Cluster Compliance Officer

Name	Designation																
Signature	Date: <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	D	D	M	M	Y	Y	Y	Y	<input type="checkbox"/>							
D	D	M	M	Y	Y	Y	Y										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										

Individual Account Risk Classification Template

S/N	Question	Answer	Tick Here	Next Step
1	Is the customer a PEP, family, close associate of a PEP or other high-risk customers (see the footnote at the bottom of the page for list of high risk customers?)	Yes	<input type="checkbox"/>	Performed EDD and rate as High Risk, Go to final statement directly
		No	<input type="checkbox"/>	Go to Question 2
2	What is the product type?	Personal Loans	<input type="checkbox"/>	Go to Question
		Mortgage	<input type="checkbox"/>	
		Auto Loan	<input type="checkbox"/>	
		Salary Advance	<input type="checkbox"/>	
		Any other personal installment loan product	<input type="checkbox"/>	



Individual Account Risk Classification Template

S/N	Question	Answer	Tick Here	Next Step
2	What is the product type?	Current Account		Go to Question 3
		Savings Account		
		Classic Savings Account		
		Term Deposit Account		
		Classic Current Account		
		Others (specify)		
3	Customer Type: Is the customer opening the account as	A resident/non-resident national of "High-Risk Country.		Perform EDD and rate as High-Risk Go to final statement directly. For residents, go to question 4
		A resident/non-resident national of another country.		
		A non-resident Nigerian		
		A resident Nigerian		
4	What is the amount with which the account is being opened?	Below N1,000,000		Perform CDD and rate as Low Risk Go to final statement directly
		N1,000,000 & above		Perform EDD and rate as High Risk Go to final statement directly

Classification

AML Risk Level	High <input type="checkbox"/>	Low <input type="checkbox"/>	Examples of High Risk customers include Non-resident customers, Private Banking customers, Legal persons, or legal arrangements such as trusts that are personal assets holding vehicles, Companies that have nominee-shareholders or shares in bearer form, Politically-exposed Persons (PEP), Cross-border banking and business relationships etc.
Probable balance fluctuation Level	High <input type="checkbox"/>	Low <input type="checkbox"/>	
Quarterly monitoring required	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Justification/Comments for Classification	
<p>Relationship Manager's Name</p> <p>Signature: <input type="text"/> CEMP Date: <input type="text"/> DD <input type="text"/> MM <input type="text"/> YY <input type="text"/> YY <input type="text"/></p> <p>Business Manager's Name</p> <p>Signature: <input type="text"/> CEMP Date: <input type="text"/> DD <input type="text"/> MM <input type="text"/> YY <input type="text"/> YY <input type="text"/></p>	

The background of the image is a solid red color. Overlaid on this red background are several white, thick-lined arrows pointing towards the right. There are approximately five or six arrows of varying sizes, all pointing in the same direction. This visual metaphor suggests progress, growth, or moving forward.

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