



POS AGENCY REGISTRATION

For customer service point (agents)

BVN: [REDACTED]

TIN: [REDACTED]

Bank Account Number: [REDACTED]

Account Name: [REDACTED]

Agent/business: [REDACTED]

Physical address building/house No: [REDACTED]

Nearest bus-stop/landmark: [REDACTED]

Street [REDACTED]

Country [REDACTED]

Mobile phone: [REDACTED]

Email address: [REDACTED]

Agent type: [REDACTED]

Business Address: [REDACTED]

One Hour Twelve Hours

Settlement Cycle Three Hours

24 Hours

Six Hours

Type of Business:

Sole proprietorship

Partnership

Store front

Limited liability company

Government

Non-profit organization/NGO

Home

Public liability company

Religious organization

Office

Other (specify) [REDACTED]

Date of incorporation:

Date of commencement of business:

RC Number:

Number of outlets:

Any prior relationship with any agent banking service provider? Yes

No

Contact information

Name of Agent Admin: [REDACTED]

Gender F M

Email address: [REDACTED]

Designation: [REDACTED]

Mobile Number: [REDACTED]

Name of customer attendant: [REDACTED]

Gender F M

Business Name: [REDACTED]

Designation: [REDACTED]

Mobile Number: [REDACTED]

Email address: [REDACTED]

Declaration: I declare that information provided on this form is true and accurate.

[REDACTED]

[REDACTED]

Authorized Signatory

Date

For bank use

Check the following documents are valid in the customer file. Please attach a copy.

Only

(This is to confirm
that the proposed agent
has met requirements)

Documents Required

Checked

Waived

Documents Required

Checked

Waived

Proof of Address (Utility Bill)

Tin

Valid Means of Identification

Certificate of incorporation
Memorandum and Article of
Association

Passport Photograph



POS COMMITMENT FORM

CONFIDENTIAL

Date:

Branch:

AGENT AND POS DETAILS

POS Serial No: _____

Agent Account Number: _____

DECLARATION

I here agree to the following:

1. As a condition for Summit Bank Limited providing POS terminal to me, I shall fulfil the obligation to meet a minimum daily target of 50 transactions or as may be specified from time to time by Summit Bank Limited.
2. Where I fail to meet the set transaction target for seven (7) consecutive days and/or any other period Summit Bank Limited may determine, Summit Bank Limited reserves the right and shall be entitled to immediately withdraw its POS terminals from me.
3. Where I am unable/refuse to return the POS device as demanded by the Bank, the Bank reserves the right to deduct the sum of N165,000 (One Hundred and Sixty Five Thousand Naira) from any of my accounts linked to my BVN.
4. The return of my POS to the Bank will include its accessories (batteries and charger). Where the accessories are not present, the Bank reserves the right to deduct the sum of N30,000 (Thirty Thousand Naira from any of my accounts linked to my BVN).
5. From the date of this Agreement and throughout the duration, I agree to have in place a POS insurance which would automatically renew annually.
6. Willful damage of the POS terminal will automatically attract a debit of N165,000 (One and Sixty Five Hundred Thousand Naira) from any of my accounts linked to my BVN.
7. If I carry out unauthorized repairs of the POS terminal outside the Bank's approved options, the Bank reserves the right to deduct the sum of N165,000 (One Hundred and Sixty Five Thousand Naira) from any of my accounts linked to my BVN.
8. This agreement forms a continuous part of the Agent Banking Agreement.

Summit Agent Name: _____

Signature: _____ Date: _____

FOR BANK USE ONLY

Account Officer: _____

Relationship Officer: _____

Signature & Date: _____

Signature & Date: _____