

**FIRSTONLINE ENROLLMENT FORM - CORPORATE CUSTOMERS**

Date 

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**COMPANY DETAILS**

Company Name **HORIZON CONSULTING ENGINEERING LTD**

Corporate Address **SUITE 424 MKK PLAZA JABI ABUJA**

City **ABUJA** State **FCT**

RC No. **1230249**

Account Number **2029451892** / **2029460342** / **2029474457** (usi  
Main Account No. With FirstBank

Telephone No. **+15136178946**

**PREFERRED CORPORATE ID**

(Alphanumeric applicable)

Please specify the Name or ID you would like to use to Login to FirstOnline in order of preference

1. **HORIZONCONSULT**

2. **HOCCEL**

3.

**USER DETAILS**

**User 1**

Full Name **BABATUNDE BOLADE**

Preferred User ID 1. **TUNDEBOLADE**

2.

Designation **CEO**

Email Address **tundeboade2002@yahoo.com**

Mobile Phone No. **+15136178946**

Mode of Identification ☐ Int'l Passport ☐ National ID ☐ Driver's License ☒ Voter's card

Please indicate a branch to pick up your token?

**User 2**

Full Name

Preferred User ID 1.

2.

Designation

Email Address

Mobile Phone No.

Mode of Identification ☐ Int'l Passport ☐ National ID ☐ Driver's License ☐ Voter's card

Please indicate a branch to pick up your token?

**User 3**

Full Name

Preferred User ID 1.

2.

Designation

Email Address

Mobile Phone No.

Mode of Identification ☐ Int'l Passport ☐ National ID ☐ Driver's License ☐ Voter's card

Please indicate a branch to pick up your token?

**User 4**

Full Name

Preferred User ID 1.

2.

Designation

Email Address

Mobile Phone No.

Mode of Identification ☐ Int'l Passport ☐ National ID ☐ Driver's License ☐ Voter's card

Please indicate a branch to pick up your token?

**AUTHORISATION**

For Funds Transfers Only  
Please fill the following mandate for your intended users

| User | First Preferred User ID | Designation | Transaction Posting Right   | Transaction Limit (N) | Approval Limit (N) |
|------|-------------------------|-------------|---|-----------------------|--------------------|
| 1    | TUNDE BOLADE            | CEO         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                       |                    |
| 2    |                         |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                       |                    |
| 3    |                         |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                       |                    |
| 4    |                         |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                       |                    |

Authorised Signatories

**FOR OFFICIAL USE ONLY**

Customer ID  Processing Branch

Verified By  Staff No  Signature

Authorised By  Staff No  Signature