

Date: 31 05 2021

THIRD PARTY INTEGRATION REQUEST FORM
Please complete every section of this form in BLOCK letters
SECTION 1: COMPANY INFORMATION
Company Name I VERIFY NIGERIA BY RENTCHECK LTD
Type of Business:
Others (Please specify)
Office Address THE BRUNSKICK COURT 7/9 ADEBISI OYINOLA
STREET, IDADO ESTATE State LAGOS STATE
Primary Contact Primary Technical Contact
Name ZITA AGWUNDBI Name THANKGOD OKORO
Designation C E O Designation DEVELOPER
Phone Number 07067916338 Phone Number 08162680095
Email Address Zita @ iverify. ng Email Address
Skype IDSkype ID
SECTION 2: SERVICE REQUIREMENT
Kindly select the service/s you require below
✓ Virtual Payment Service
Others (Please Specify)
Kindly state the purpose for which the services will be used:
Average Volume of Transactions per Month: 20 - 150
SECTION 3: BANK ACCOUNT INFORMATION
Account Number
5400689132

the car Deck. 14