

MANDATORY ACCOUNT INFORMATION FORM

(a.) Less than N50 million ☐ N50 million - Less than N500 million ☐ N500 million - Less than N5 billion ☐ Above N5 billion ☐

(b.) Source of funds (Source of economic activities that generates income)

Card Preferences	VerveCard	<input type="checkbox"/>			
Electronic Banking Preferences	Internet Banking	<input type="checkbox"/>	Mobile Banking	<input type="checkbox"/>	POS <input type="checkbox"/> Others (Specify)
Transaction Notification	SMS Alert (Fee applies)	<input type="checkbox"/>	E-mail Alert (Free)	<input type="checkbox"/>	
Statement Delivery Preferences	E-mail (Free)	<input type="checkbox"/>	Post	<input type="checkbox"/>	Branch <input type="checkbox"/>
Statement Frequency	Monthly	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>	Semi-annually <input type="checkbox"/> Annually <input type="checkbox"/>
Cheque Book Requisition	Opened cheque	<input type="checkbox"/>	Crossed cheque	<input type="checkbox"/>	50 leaves <input type="checkbox"/> 100 leaves <input type="checkbox"/>

First Ally Trust Microfinance Bank
No 32, Ikorodu Road
Jibowu, Lagos

Dear Sir,

I/We hereby authorize you to debit my/our account with the sum of \$_____ being the legal cost of search conducted on our account by the Corporate Affairs Commission.

Yours faithfully,

Authorised Signatory

Authorised Signatory

MANDATE

		Signature	Photograph
Title (Mr. Mrs etc)			
Name			
Designation			
Signatory Type			
Title (Mr. Mrs etc)			
Name			
Designation			
Signatory Type			
Title (Mr. Mrs etc)			
Name			
Designation			
Signatory Type			
Title (Mr. Mrs etc)			
Name			
Designation			
Signatory Type			
Mandate Authorisation/ Combination Rule		Company Seal/Stamp Required (Specify Company Seal/Stamp if required) Yes <input type="checkbox"/> No <input type="checkbox"/>	