



APPLICATION TO OPEN AN INDIVIDUAL ACCOUNT



BRANCH

ACCOUNT No. (for official use only)

CUSTOMER ID (for official use only)

BIOMETRIC ID No.

Account Category: ☐ Individual Account ☐ Joint Account

Account Type: ☐ Current

☐ Saving

☐ Domiciliary

\$ € ¥ £

Others please specify

☐ Estate

☐ FirstSaving Plus

☐ FirstCurrent Plus

☐ Others.....

This form should be completed in CAPITAL LETTERS using BLACK INK. Characters and marks should be similar in style to the following (A B C)

(Please specify)

PERSONAL DETAILS (Please complete in BLOCKED LETTERS and tick where necessary)



Title Surname

First Name

Other Name(s)

Mother's Maiden Name Gender: ☐ F ☐ M

Marital Status (Please tick) ☐ Single ☐ Married Other (please specify) Date of Birth

Place of Birth

Nationality Dual Citizenship ☐ Yes ☐ No Please State.....

State of Origin LGA

Tax Identification Number (TIN) (If available) Resident Permit No.

Resident Permit Issue Date Resident Permit Expiry Date

Purpose of Account

CONTACT DETAILS



House Number Street Name

Nearest Bus Stop/Landmark

City/Town

Local Govt. Area State

Phone Number 1 Phone Number 2

Email Address (Optional)

ACCOUNT SERVICE(S) REQUIRED (Please tick option below)



Services

☐ Interactive Voice Recording (IVR)

☐ Mobile Banking (First Monie)

☐ Internet Banking

Kindly request for a token as it is requires to complete a FirstOnline transaction and write your preferred Username below

Card

☐ Verve

☐ Naira MasterCard

☐ Visa

Cheque Book (fees apply)

☐ 25 Leaves (Only for Dom A/C)

☐ 50 Leaves

☐ 100 Leaves

Type

☐ Closed

☐ Open

Alert

☐ SMS (Fees apply) ☐ Credit Only ☐ Debit Only ☐ Both

☐ Email (free)

Statement Frequency (Email Only)

☐ Monthly ☐ Quarterly ☐ Semi Annually

Preferred Username