FIRST ALLY
MICROFINANCE BANK
RC 208513

Confidential

Date D D M M Y Y Y Y

BVN

DATA UPDATE / REACTIVATION FORM

Account Name

Name of Signatory

Account Number

E-mail Address

Type of Update Account Reactivation ☐ Information Update ☐ Signature ☐ Name Change ☐ Passport Photograph ☐ Biometric Update ☐

State reason(s) for account dormancy .....

NAME CHANGE

Old Name ..... New Name .....

Reason for Name Change Marraige ☐ Others ☐ Please Specify .....

For customer information, signature and passport photograph update, please attach appropriate supporting documents.

IDENTIFICATION / ADDRESS PROOF

ID Type International Passport ☐ Driver's License ☐ National ID ☐ Others ☐ Please Specify .....

ID Number Place of Issuance

Date Issued

CUSTOMER INFORMATION UPDATE (PLEASE TICK REQUIRED SECTION AS APPROPRIATE)

Residential Address

State of Residence

LGA of Residential Address Nearby Landmark .....

Nationality Date of Birth D D M M Y Y Y Y

State of Origin LGA of Origin

Occupation Tax Identification Number

Employer's Name

Employer's Address

Phone Number Phone Number

Next of Kin Phone Number of Next of Kin

Relationship

PASSPORT AND SIGNATURE UPDATE (PLEASE TICK REQUIRED SECTION AS APPROPRIATE)

AFFIX PASSPORT PHOTOGRAPH HERE

Old Signature

New Signature

CERTIFICATION

I ..... certify that the information provided by me above are true and correct and hereby authorize the update

Customer Signature & Date .....

FOR OFFICIAL USE

Kindly tick the relevant check box based on the documentation provided by the customer

Utility Bill ☐ Marraige Certification ☐ Sworn Affidavit ☐ Identity Card ☐ Others (Please Specify) .....

Processed By

Approved By

..... Name / Signature / Date

..... Name / Signature / Date