



AKALABO
MICROFINANCE BANK LIMITED

SAVINGS ACCOUNT OPENING DOCUMENTATION

"...Powering the Economy of the Nation"

**ACCOUNT OPENING REQUIREMENTS FOR
SAVINGS ACCOUNT**

1. Account Opening Form Dully Completed.
2. Specimen Signature Card Duly Completed By Each Signatory To The Account.
3. Two (2) Independent And Satisfactory References For Executive/Personal Savings Account Holders Only. Referees Must have been Account Holders of Akalabo Micro-Finance Bank For A Minimum Of Six (6) Months.
4. Two (2) Recent Clear Passport Size Photographs Of Signatories To The Account, With Name And Signature On The Reverse Side.
5. Residence Permit (where Applicable).
6. Proof Of Identity Of Signatories: International Passport, Driver's Licence, National ID Card Or National Voter's Card (Original To Be Sighted).
7. Initial Deposit
8. Proof Of Address: Public Utility Receipt - Tax Clearance Certificate (TCC), PHCN Bills, Water Bills Or Telephone Bills (Original To Be Sighted) Which Must Bear The Current Address Of Customer(s).
9. Letter From Employer/School/NYSC - For Salary Account Holders Or Students Only.
10. Other Documents Provided (Please Specify)

FOR BANK USE ONLY

ACCOUNT NAME/TITLE _____

ACCOUNT NUMBER

BANK VERIFICATION
NUMBER (BVN)

ANSSID NUMBER

Affix
Passport
Photograph
here

CATEGORY OF ACCOUNT

(Please tick as appropriate)

SAVINGS ACCOUNT

FIXED INVESTMENT ACCOUNT

JOINT SAVINGS ACCOUNT

TARGET SAVINGS ACCOUNT

FIXED DEPOSIT SAVINGS ACCOUNT

EXECUTIVE/PERSONAL
SAVINGS ACCOUNT

TYPE OF ACCOUNT

(Please tick as appropriate)

SAVINGS

CLASSIC SAVINGS ACCOUNT

THIRD PARTY ACCOUNT

SALARY SAVINGS ACCOUNT

TARGET SAVINGS ACCOUNT (NAIRA)

TARGET SAVINGS ACCOUNT (USD)

PREMIUM SAVINGS ACCOUNT

NAIRAWISE ACCOUNT

CHILDREN'S SAVINGS ACCOUNT

EXECUTIVE/PERSONAL SAVINGS ACCOUNT

FIXED DEPOSITS

TENURED

CALL DEPOSITS

MONEY MARKET DEPOSITS

TENURED DEPOSITS - STELLAS

DOMICILIARY

DOMICILIARY SAVING ACCOUNT

This form should be completed in CAPITAL LETTERS.
 Characters and marks should be similar in style to the following: **A B C D**

1. PERSONAL INFORMATION

Title _____ Surname _____
 First Name _____ Other Names _____
 Date of Birth

D	D	M	M	Y	Y	Y	Y

 Place of Birth _____
 Mother's Maiden Name _____ Gender: Female Male
 State of Origin _____ Home Town _____
 Local Govt. Area _____
 Nationality _____ Permit Issue Date

D	D	M	M	Y	Y	Y	Y

 (For Non Nigerians) _____ Permit Expiry Date

D	D	M	M	Y	Y	Y	Y

 Residence Permit No. _____ Tax ID No. _____ Religion _____
 Purpose of Account _____
Residential Address: _____

 Nearest Bus Stop / Landmark _____
 City Town _____ L.G.A _____
 State _____ Mailing Address _____
 Phone Number (1)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Phone Number (2)

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 E-mail Address _____
 Marital Status: Single Married **Spouse Names and Phone Numbers (If Married)**
 Surname _____ First Name _____ Other Names _____
 Phone Number (1)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Phone Number (2)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 E-mail Address _____
 Marital Status: Single Married **Spouse Names and Phone Numbers (If Married)**
 Surname _____ First Name _____ Other Names _____
 Phone Number (1)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Phone Number (2)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

1.2 CHILD'S DETAILS

Surname _____ First Name _____
 Other Names _____ Date of Birth

D	D	M	M	Y	Y	Y	Y

 Gender: Male Female

2. VALID MEANS OF IDENTIFICATION

National ID Driver's License International Passport Voter's Card
 Other (Please specify) ID Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 ID Issue Date

D	D	M	M	Y	Y	Y	Y

 ID Expiry Date

D	D	M	M	Y	Y	Y	Y

 (People in peculiar circumstances – Artisans, Petty Trader, Student who may not have the prescribed IDs)

3. EMPLOYMENT DETAILS

Employment Status: Employed Self Employed Unemployed Retired Student
 Others (Please Specify) _____ Date of Employment (if employed)

D	D	M	M	Y	Y	Y	Y

Annual Salary / Expected Annual Income: (a) Below N50,000 (b) N50,000 - N250,000 (c) N250,001-N500,000 (d) N500,001-Below N1M
 (e) N1M-Below N5M (f) N5M - Below N10M (g) N10M-Below N20M (d) N20M and Above

Employer's Name _____

Employer's / Employment Address: _____

Office Phone Number (1) Office Phone Number (2)

4. ACCOUNT SERVICE(S) REQUIRED (Please tick applicable option below)

Card preference: Verve Card Master Card Visa card Other (Specify)
 Electronic Banking preference: Internet Banking Mobile Banking ATM POS Other e-Channels (fees may apply) Specify
 Transaction Alert Preferences: E-mail Alert (free) SMS Alerts Charge Apply as mandated by CBN
 Statement Preferences: Email Post Collection at Branch Statement Frequency: Monthly Quarterly Semi-Annually Annually
 Cheque Book Requisition: (Fees applies) Opened Cheque Crossed Cheque 25 Leaves 50 Leaves 100 Leaves
 Cheque Confirmation: Will you like to pre-confirm your cheque? YES NO
 Cheque Confirmation Threshold: If the answer to the above is Yes, please specify the threshold

5. CHEQUE CONFIRMATION THERESHOLD FOR EXECUTIVE/PERSONAL SAVINGS ONLY

Would you like to pre-confirm your cheque? Yes No
 If yes, please note that the minimum cheque confirmation amount allowed by the bank is N500,000.00 in writing and before Cheque issue.
 Please specify minimum amount to be confirmed: N : 00

6. DETAILS OF NEXT OF KIN

Surname _____ First Name _____
 Other Name(s) _____ Relationship _____
 Title (Specify) _____ Date of Birth Gender F M
 e-mail Address _____ Phone Number (1)
 Phone Number (2)
 Contact Details: _____
 Address: _____ City Town _____
 Nearest Bus Stop / Landmark _____
 State: _____ Local Govt. Area _____

7. ACCOUNT HELD WITH OTHER BANKS:

S/N	NAME AND ADDRESS OF BANK / BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	STATUS: ACTIVE / DORMANT.
1.				
2.				
3.				
4.				