

# INDIVIDUAL ACCOUNT OPENING FORM

## FOR OFFICIAL USE ONLY

BVN NO.

ACCOUNT NO.

BRANCH

PASSPORT  
PHOTOGRAPH

## ACCOUNT TYPE

TYPE OF ACCOUNT > CURRENT  SAVINGS  JOINT

CURRENCY > NGN(₦)  USD(\$)  GBP(£)  EUR(€)

OTHER TYPES OF ACCOUNT >

PURPOSE OF ACCOUNT > SALARY  INVESTMENT  CHILDREN  OTHER  (Please Specify) >

## PERSONAL INFORMATION

TITLE

SURNAME

FIRST NAME

OTHER NAMES

DATE OF BIRTH

GENDER  M  F  
Male Female

MOTHER'S MAIDEN NAME

MARITAL STATUS > SINGLE  MARRIED  OTHER  (Please Specify) >

PLACE OF BIRTH

STATE OF ORIGIN

LOCAL GOVT. AREA

NATIONALITY

RELIGION

NO. OF CHILDREN

NO. OF DEPENDANTS

### For Non-Nigerians

RESIDENT PERMIT NUMBER

ISSUE DATE

EXPIRY DATE

EDUCATION > O' LEVEL  STUDENT  GRADUATE  POST-GRADUATE  OTHER  (Please specify) >

## CONTACT DETAILS

EMAIL ADDRESS

SOCIAL MEDIA >  FACEBOOK >  LINKEDIN >  TWITTER >  INSTAGRAM

### Residential Address (Please note that address will be verified by our agents)

HOUSE NUMBER  STREET NAME

NEAREST BUS-STOP/LANDMARK  CITY/TOWN

LOCAL GOVT. AREA  STATE

LENGTH OF STAY AT CURRENT ADDRESS  ACCOMMODATION TYPE > RENTED  OWNED

COUNTRY

MAILING ADDRESS (If different from above address)

MOBILE NUMBER

OTHER NUMBER

(Country Code)

(Country Code)

**IDENTIFICATION**

NATIONAL ID/NIN <input type="checkbox"/>		DRIVER'S LICENSE <input type="checkbox"/>		INT'L PASSPORT <input type="checkbox"/>		VOTER'S CARD <input type="checkbox"/> (Permanent)		OTHERS <input type="checkbox"/> (Please Specify)					
ID. NUMBER	<input type="text"/>	ISSUE DATE	<input type="text"/>	DD	MM	YY	YY	EXPIRY DATE	<input type="text"/>	DD	MM	YY	YY
TAX IDENTIFICATION NUMBER <input type="text"/>													
Are you a US Permanent Resident or citizen? YES <input type="checkbox"/> NO <input type="checkbox"/>							SOCIAL SECURITY NUMBER <input type="text"/> - <input type="text"/> - <input type="text"/>						
If yes, complete a W9 form for FATCA,													

**ACCOUNT SERVICES** (Please tick applicable option below)

INTERESTED IN JOINING THE ALPHER COMMUNITY? (Female Only) > *YES <input type="checkbox"/> NO <input type="checkbox"/>		*CARD TYPE > DEBIT <input checked="" type="checkbox"/>		UNION ACE <input type="checkbox"/> *USD only		OPT-OUT <input type="checkbox"/>							
*www.alpherwoman.com		* Fees Apply											
CHOOSE FREE BANKING PATH > DEPOSIT <input type="checkbox"/>				TURNOVER <input type="checkbox"/>				NOT INTERESTED <input type="checkbox"/>					
*E-BANKING > UNIONONLINE <input checked="" type="checkbox"/> Internet Banking		UNIONMOBILE <input checked="" type="checkbox"/>		QR CODE <input type="checkbox"/>		*PREFERRED USERNAME >							
*All checked E-Banking services are provided automatically when the account is opened.						*Special characters not allowed							
COMMUNICATION PREFERENCES > *please confirm that you have provided a valid email				EMAIL ALERT <input checked="" type="checkbox"/> (Free)		SMS ALERT <input checked="" type="checkbox"/> (Fees Apply)		*EMAIL INDEMNITY <input type="checkbox"/>					
DO YOU WANT A CHEQUE BOOK? >			YES <input type="checkbox"/> NO <input type="checkbox"/> (Fees Apply)		IF YES, NUMBER OF LEAVES >			25 <input type="checkbox"/>		50 <input type="checkbox"/>		100 <input type="checkbox"/>	
FOR A HIGHER PRE-CONFIRMATION LIMIT, PLEASE SPECIFY (i.e. above ₦150,000:00) >							<input type="text"/>		K				

\* Note: Terms and conditions apply. Kindly visit www.unionbankng.com/terms-and-conditions for more information

**EMPLOYMENT/INCOME INFORMATION**

EMPLOYMENT STATUS >		EMPLOYED <input type="checkbox"/>		SELF EMPLOYED <input type="checkbox"/>		UNEMPLOYED <input type="checkbox"/>		RETIRED <input type="checkbox"/>		STUDENT <input type="checkbox"/>	
ANNUAL SALARY/INCOME >		LESS THAN ₦500,000 <input type="checkbox"/>		₦500,000 < ₦1.5M <input type="checkbox"/>		₦1.5M < ₦3M <input type="checkbox"/>		₦3M < ₦7M <input type="checkbox"/>			
		₦7M < ₦12M <input type="checkbox"/>		₦12M < ₦20M <input type="checkbox"/>		₦20M < ₦33M <input type="checkbox"/>		ABOVE ₦33M <input type="checkbox"/>			
BUSINESS/EMPLOYER'S NAME <input type="text"/>				JOB TITLE <input type="text"/>							
BUSINESS/EMPLOYER'S PHONE NUMBER <input type="text"/>		(Country Code) <input type="text"/>									
OFFICE/HOUSE NUMBER <input type="text"/>		STREET NAME <input type="text"/>									
NEAREST BUS-STOP/LANDMARK <input type="text"/>											
CITY/TOWN <input type="text"/>		LOCAL GOVT. AREA <input type="text"/>		STATE <input type="text"/>							

**For Employed**

NATURE OF EMPLOYMENT >		PERMANENT <input type="checkbox"/>		CONTRACT <input type="checkbox"/>		CONFIRMED <input type="checkbox"/>		UNCONFIRMED <input type="checkbox"/>			
JOB LEVEL >		ENTRY <input type="checkbox"/>		MIDDLE MANAGEMENT <input type="checkbox"/>		SENIOR MANAGEMENT <input type="checkbox"/>		EXECUTIVE MANAGEMENT <input type="checkbox"/>			
YEARS WITH CURRENT EMPLOYER >		LESS THAN 1 YEAR <input type="checkbox"/>		1 - 2 YEARS <input type="checkbox"/>		3 - 6 YEARS <input type="checkbox"/>		7 - 10 YEARS <input type="checkbox"/>		ABOVE 10 YEARS <input type="checkbox"/>	
TYPE OF BUSINESS >		TRADE <input type="checkbox"/>		PROFESSIONAL SERVICES <input type="checkbox"/>		RETAILER <input type="checkbox"/>		OTHERS (Please specify) >			

SOURCES OF FUNDS TO THE ACCOUNT	1.	<input type="text"/>
	2.	<input type="text"/>
EXPECTED ANNUAL INCOME FROM OTHER SOURCES <input type="text"/>		

SOURCES OF OTHER INCOME >	BUSINESS <input type="checkbox"/>	INVESTMENT <input type="checkbox"/>	OTHERS (Please specify) >
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**For Business**

NAME OF ASSOCIATED BUSINESS(ES)	1.	<input type="text"/>
	2.	<input type="text"/>
TYPE OF BUSINESS <input type="text"/>		

**NEXT OF KIN**

TITLE	<input type="text"/>	SURNAME	<input type="text"/>
FIRST NAME	<input type="text"/>	OTHER NAMES	<input type="text"/>
RELATIONSHIP	<input type="text"/>	DATE OF BIRTH	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y GENDER <input type="text"/> M <input type="text"/> F <small>Male Female</small>
MOBILE NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	OTHER NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
EMAIL ADDRESS	<input type="text"/>		
HOUSE NUMBER	<input type="text"/>	STREET NAME	<input type="text"/>
NEAREST BUS-STOP/LANDMARK	<input type="text"/>		
CITY/TOWN	<input type="text"/>	LOCAL GOVT. AREA	<input type="text"/>
STATE	<input type="text"/>	COUNTRY	<input type="text"/>

**Complete if different from Next of Kin above**

SPOUSE'S NAME  Surname First

SPOUSE'S DATE OF BIRTH  D  D  M  M  Y  Y  Y  Y

SPOUSE'S OCCUPATION

**ACCOUNT(S) HELD WITH OTHER BANK(S)**

S/NO	NAME AND ADDRESS OF BANK/BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	ACTIVE/DORMANT

**DATA PROTECTION NOTICE**

Union Bank of Nigeria Plc ("the Bank") will process the above data, along with any other data you subsequently give us, in terms of the Nigerian Data Protection Regulation 2019. The data will be used to give you statements and provide the Bank's products and services to you; for internal assessment and analysis; for the detection and prevention of fraud and other criminal activities which the Bank is under legal obligation to report; to develop and improve the Bank's services; for direct marketing, such as to inform you, by mail, telephone, e-mail or other electronic means, about other products and services provided by the Bank, the Bank's affiliate or merchant partners in order to improve your overall customer experience and for research purposes. For more information, please read our Privacy Notice on our website. Please note that your personal data may be disclosed to, exchanged with or processed by employees of the Bank. You have the right to be informed by the Bank, at your request, about the personal data held by the Bank about you that is processed and to request to correct such information where necessary. Should the data you provided to the Bank change, the Bank must be informed without undue delay.

I/We hereby consent to the processing of my/our Personal Data (within or outside Nigeria), including transfer of my/our Personal Data to any third party for reasons associated with the purpose for which the data is being processed as stated above.

**\*Please Note:** Union Bank will never call you to ask for your personal information; BVN, Date of Birth, PIN, Passwords or ATM card details (the numbers in front and at the back of your card).

**Disclaimer:** If a breach is associated with the operation of your account/wallets, you agree that we have the right to apply restrictions to your account/wallet and report to appropriate law enforcement agencies in line with extant laws.

**DECLARATION**

I hereby apply for the opening of an account with Union Bank of Nigeria Plc. I have read the terms and conditions governing the account and those relating to various products and services that I have requested for, as stated on the Bank's website [www.unionbankng.com/terms-and-conditions](http://www.unionbankng.com/terms-and-conditions), and I agree to be bound by them. I also indemnify the Bank fully for acting on all email instructions issued from the email address provided.

NAME OF ACCOUNT HOLDER \_\_\_\_\_ SIGNATURE \_\_\_\_\_

DATE  D  D  M  M  Y  Y  Y  Y

NAME OF ACCOUNT HOLDER \_\_\_\_\_ SIGNATURE \_\_\_\_\_

DATE  D  D  M  M  Y  Y  Y  Y

**JURAT** (This should be adopted where the applicant is not literate or is blind and the form is read to him or her by a third party)

NAME OF INTERPRETER

ADDRESS OF INTERPRETER

MOBILE NUMBER  (Country Code)  OTHER NUMBER  (Country Code)

LANGUAGE OF INTERPRETATION

I agree to abide by the content of this agreement and acknowledge that it has been truly and audibly read over and explained to me by an interpreter.

MARK OF CUSTOMER/THUMBPRINT

MAGISTRATE/ COMMISSIONER FOR OATHS

DATE

SIGNATURE \_\_\_\_\_

**OFFICIAL USE ONLY**

**AUTHENTICATION FOR POLITICALLY EXPOSED PERSONS**

IS THE APPLICANT A POLITICALLY EXPOSED PERSON? > \*YES  NO

\*If "Yes", please provide details \_\_\_\_\_

IDENTIFY THE CUSTOMERS RISK CATEGORY > LOW  MEDIUM  HIGH

**ACCOUNT CODES**

BRANCH CODE

SEGMENT CODE

EMPLOYER CODE

INTRODUCER CODE

REFERRAL CODE

RM CODE

ANCHOR CODE

SUPPLIERS CODE

DISTRIBUTORS CODE

DEBIT CARD TYPE >

VERVE  MASTERCARD

SALARY PAYMENT DATE (DAY OF THE MONTH):

**REQUIREMENT CHECKLIST**

TYPE OF ACCOUNT > CURRENT  SAVINGS  JOINT

S/N	DOCUMENT REQUIRED	CHECKED	DEFERRED	WAIVED
1.	DULY COMPLETED ACCOUNT OPENING FORM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	SPECIMEN SIGNATURE CARD DULY COMPLETED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	TWO (2) RECENT PASSPORT PHOTOGRAPHS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	TWO (2) INDEPENDENT SATISFACTORY REFERENCES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	PROOF OF ID: INT'L PASSPORT, DRIVER'S LICENSE, NATIONAL ID CARD, VALID VOTERS CARD, NATIONAL IDENTIFICATION NUMBER, ETC. (Original must be sighted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	PROOF OF ADDRESS: UTILITY BILLS, ETC (Certified true copy is acceptable if original is not held)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	RESIDENT PERMIT (For non Nigerians)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	LETTER FROM EMPLOYER (FOR SALARY ACCOUNT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	TAX IDENTIFICATION / SOCIAL SECURITY NUMBER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	LOAN AGREEMENT FORM (Optional)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACCOUNT OPENED BY

NAME \_\_\_\_\_

DATE  SIGNATURE \_\_\_\_\_

ACCOUNT AUTHORIZED BY

NAME \_\_\_\_\_

DATE  SIGNATURE \_\_\_\_\_