

ADDITIONAL SIGNATORY FORM

FOR OFFICIAL USE ONLY

BVN NO.

BRANCH

PERSONAL INFORMATION

TITLE SURNAME
 FIRST NAME OTHER NAMES
 DATE OF BIRTH GENDER 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

HOUSE NUMBER STREET NAME

NEAREST BUS-STOP/LANDMARK CITY/TOWN

LOCAL GOVT. AREA STATE

LENGTH OF STAY AT CURRENT ADDRESS Yr(s) Mth(s) ACCOMMODATION TYPE RENTED OWNED

COUNTRY

MAILING ADDRESS (If different from above address)

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

IDENTIFICATION

NATIONAL ID DRIVER'S LICENSE INT'L PASSPORT VOTER'S CARD OTHERS (Permanent) (Please Specify)

ID. NUMBER ISSUE DATE EXPIRY DATE

TAX IDENTIFICATION NUMBER

Are you a US Permanent Resident or citizen? YES NO SOCIAL SECURITY NUMBER - -
 If yes, complete a W8 form for FATCA.

EMPLOYMENT/INCOME INFORMATIONEMPLOYMENT STATUS > EMPLOYED SELF EMPLOYED UNEMPLOYED RETIRED STUDENT ANNUAL SALARY/INCOME > LESS THAN ₦500,000 ₦500,000 < ₦1.5M ₦1.5M < ₦3M ₦3M < ₦7M ₦7M < ₦12M ₦12M < ₦20M ₦20M < ₦33M ABOVE ₦33M BUSINESS/EMPLOYER'S NAME JOB TITLE BUSINESS/
EMPLOYER'S PHONE NUMBER
(Country Code)OFFICE/HOUSE NUMBER STREET NAME NEAREST BUS-STOP/LANDMARK CITY/TOWN LOCAL GOVT. AREA STATE **For Employed**NATURE OF EMPLOYMENT > PERMANENT CONTRACT CONFIRMED UNCONFIRMED JOB LEVEL > ENTRY MIDDLE MANAGEMENT SENIOR MANAGEMENT EXECUTIVE MANAGEMENT YEARS WITH CURRENT EMPLOYER > LESS THAN 1 YEAR 1 - 2 YEARS 3 - 6 YEARS 7 - 10 YEARS ABOVE 10 YEARS *For self employed*TYPE OF BUSINESS > TRADE PROFESSIONAL SERVICES RETAILER OTHERS *(Please specify)* >**NEXT OF KIN**TITLE SURNAME FIRST NAME OTHER NAMES RELATIONSHIP DATE OF BIRTH GENDER Male FemaleMOBILE NUMBER OTHER NUMBER
(Country Code) (Country Code)EMAIL ADDRESS HOUSE NUMBER STREET NAME NEAREST BUS-STOP/LANDMARK CITY/TOWN LOCAL GOVT. AREA STATE COUNTRY **Complete if different from Next of Kin above**SPOUSE'S NAME
*Surname First*SPOUSE'S DATE OF BIRTH SPOUSE'S OCCUPATION **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, 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

NAME OF ACCOUNT HOLDER _____ SIGNATURE _____

DATE