ASSETS MICROFINANCE BANK LTD.

(A new dimension to wealth creation)

RC: 803151

..... Branch

ASSETS SPECIAL

"ASSA"

SAVING ACCOUNT OPENING FORM **ACCOUNT NO.....**

PART TO BE COMPLETED BY INDIVIDUALS JOINT & OTHERS

NAME:.....

SURNAME FIRST

DATE OF BIRTH .....STATE OF ORIGIN.....NATIONAL.....

RESIDENTIAL ADDRESS .....
.....

NAME AND ADDRESS OF OFFICE: .....
.....

MEANS OF ID(international passport, national I.D, Drivers licence e.t.c.) OCCUPATION: .....

EMAIL ADDRESS: .....

GSM/TELEPHONE NO(S):.....

NEXT OF KIN

SURNAME: ..... OTHER NAMES: .....

RELATIONSHIP: ..... TEL/GSM NO: .....

RESIDENTIAL ADDRESS : .....

PART II (FOR FIRMS, SOCIETIES &OTHERS)

NAME : .....

DATE OF ESTABLISHMENT OF BUSINESS/SOCIETY : .....

PROPRIETORS/PATRONS/TRUSTEES/.....

ELECTED MEMBERS

(1) ..... (4) .....
(2)..... (5).....
(3) ..... (6) .....

NAME IN FULL	SIGNATURE

FOR BANK USE ONLY		
A/C OFFICER'S NAME & SIGNATURE	C.R.O NAME & SIGNATURE	DATE ACCOUNT OPENED

CHECKLIST	CRO'S CONFIRMATION
1. Passport Photographs (2)	
2. Reference (2) to allow cheques lodgement	
3. Identification (passport or Driver's Licence	
BRANCH MANAGER'S/ OPERATION MANAGER'S SIGNATURE	