

**ACCOUNT OPENING FORM**

NAME: \_\_\_\_\_  
SURNAME FIRST NAME MIDDLE NAME  TITLE

RESIDENTIAL ADDRESS  
 (NOT P.O.BOX) \_\_\_\_\_

MAILING ADDRESS  
 (INCLUDE e-mail PLS.) \_\_\_\_\_

TELEPHONE: OFFICE \_\_\_\_\_ MOBILE \_\_\_\_\_ HOME \_\_\_\_\_

DATE OF BIRTH:        
DAY MONTH YEAR

NATIONALITY \_\_\_\_\_ STATE \_\_\_\_\_ L.G.A. \_\_\_\_\_

BUSINESS/OCCUPATION ADDRESS: \_\_\_\_\_

EMPLOYER'S NAME: \_\_\_\_\_

TYPE OF ACCOUNT (PLEASE MARK THE TYPE OF ACCOUNT(S) YOU WANT TO OPEN)

CURRENT  SAVINGS  FIXED DEPOSIT  SUSU SUPER SAVINGS  PROGRESS SAVING & LOAN

**NEXT OF KIN INFORMATION**

NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

CONTACT ADDRESS: \_\_\_\_\_

PLEASE SIGN IN BLACK INK WITHIN THE BOX BELOW

USUAL SIGNATURE

PASSPORT  
PHOTOGRAPH

**DECLARATION**

I hereby apply for the opening of account(s) with Susu Microfinance Bank Ltd. I understand that the information given herein and the documentation supplied are the basis for the opening such account(s) and therefore warrant that such is correct.

I have read the terms and conditions governing the operations of the account(s) which are presented overleaf and agree to be bound by them.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DD / MM / YYYY

**FOR OFFICIAL USE ONLY**

RSM FULL NAME: \_\_\_\_\_  
SURNAME FIRST NAME MIDDLE NAME

RSM ID NO: \_\_\_\_\_

MEETING POINT: \_\_\_\_\_

PASSPORT IX	
MEANS OF IDENTIFICATION	
ZONE	
MI/MO	
RECEIVED BY	
APPROVED BY (HOPS)	