

# PEACE MICRO FINANCE BANK LTD

## CUSTOMER'S VISITATION REPORT FORM

DATE OF VISIT -----

ACCOUNT RELATIONSHIP OFFICER -----

**ACCOUNT TYPE:**

SAVINGS ACCOUNT

CURRENT ACCOUNT/CORPORATE

CUSTOMER'S NAME -----

ADDRESS VISITED -----

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DESCRIPTION/NATURE OF THE ADDRESS VISITED -----

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REPORTS/COMMENTS ON THE VISIT -----

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NAME & SIGN. -----

RELATIONSHIP OFFICER

NAME & SIGN. -----

BC

PEACE MICRO FINANCE BANK LTD

KNOW YOUR CUSTOMER (KYC)

**CUSTOMER'S GENERAL INFORMATION**

TITLE & SURNAME-----MARITAL STATUS-----

OTHER NAMES-----

RESIDENTIAL ADDRESS-----

BVN-----RELIGION-----

E-MAIL-----PHONE NO-----

IS CUSTOMER POLITICALLY EXPOSED?-----

HOME TOWN-----

DATE OF BIRTH-----PLACE OF BIRTH-----

LOCAL GOVERNMENT OF ORIGIN-----

STATE OF ORIGIN-----NATIONALITY-----

MOTHER'S MAIDEN NAME-----

MEANS OF IDENTIFICATION-----ID NO-----

NICK NAME-----SPOUSE'S NAME (SURNAME FIRST-----

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**WORK INFORMATION**

OCCUPATION-----

EMPLOYER'S NAME-----

ADDRESS & PHONE NUMBER-----

-----EMPLOYER'S COUNTRY-----

**NEXT OF KIN INFORMATION**

NAME-----

RELATIONSHIP-----PHONE NUMBER-----

ADDRESS-----

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ACCOUNT OFFICER'S NAME & SIGNATURE

HOP'S NAME & SIGNATURE



RC 750063

**PEACE MFB****Peace Micro Finance Bank Ltd.****SAVINGS ACCOUNT****SPECIMEN SIGNATURE CARD**


<b>PASSPORT PHOTOGRAPH</b>
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Name Address Date of Birth 

<input type="text"/>	Telephone <input type="text"/>
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Name (In full)	Signature (s)

Next of Kin Address 

Mandate (If Applicant)	For Bank Use Only		
	A/O Initial	CSO Initial	Date A/C Opened
	Identity Card Number.....		

**DECLARATION**

I apply for the opening of a Savings Account with Peace Micro Finance Bank Ltd. I understand that the information given herein is the basis of opening such account (s) and therefore warrant that such information is correct. I agree to be bound by the terms and condition governing the operation of the account(s).

Signature..... Date:.....

Checklist		
	Recent passport photographs (2)	
	Properly completed account opening form	
	Other relevant documentation	