



NIDA APPLICATION FORM

Select Account Type

PLS TICK AS APPROPRIATE

- Diaspora Partners Account
- Diaspora Current Account
- Diaspora Savings Account
- Diaspora non Interest Account

USD EURO

GBP NAIRA

PERSONAL DETAILS

Title----- Last Name-----First Name----- Middle Name -----
 Date of Birth: -----Place & Country of Birth: ----- Nationality:-----
 Sex (Pls. tick): Male Female Marital Status: Single Married Divorced Widowed

Passport Details:

Passport No: ----- Place of Issue----- Date of Issue----- Expiry Date-----

Home Country Address (Nigeria):

House#-----Street-----Town-----
 -----State----- Country-----

Overseas Residential Address:

House#-----Street-----Town-----
 State/Province-----Country----- Post/Zip Code-----

Mailing address (if different from above): -----

Telephone numbers: Home: -----Office: -----Mobile:-----

Fax number: -----E-mail address: -----

Occupation: -----Employer's Name and Address: -----

Nature of Business: -----

2nd Applicant Personal Details (For Joint Account Only)

Title: ----- Last Name:----- First Name----- Middle Name -----

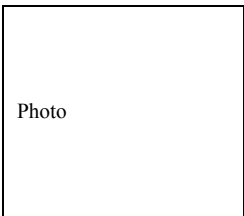
Date of Birth: ----- Place & Country of Birth: ----- Nationality:-----

Relationship with 1st Applicant:----- Email Address-----

Passport No:----- Place of Issue:-----Date of Issue:----- Expiry Date:-----

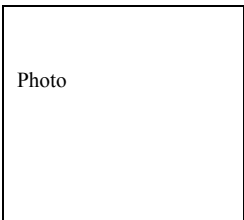
Home Address:-----

Mr/Mrs/Ms-----



Signature

Mr/Mrs/Ms-----



Signature

To Bank PHB

Notwithstanding anything to the contrary contained in any other document/agreement. I/We, the undersigned, hereby authorize you to act and rely on any instructions or communications for any purpose (including but not limited to the instruction/communications pertaining to the operation of all my/our accounts or to any other facilities or services that may be provided by you from time to time) which may from time to time be or purport to be given by telephone, facsimile, untested telexes and faxes, telegraph, cable or any other form of electronic communication by me /us (including such instructions/communication as may be purported to be given by those authorized to operate my/our account(s) with you) ("Instruction"). I/We understand and acknowledge that there inherent risks involved in sending the instructions to you via telephone , facsimile untested telexes and faxes, telegraph, cable or any other form of electronic communication and hereby agree and confirm that all risks shall be fully borne by me /us and I/We assume full responsibility for the same and BankPHB will not be liable for any losses or damages including legal fees arising upon your acting, or failure to act, wholly or in part in accordance with the instructions so received.

In consideration of you agreeing, subject to the terms and conditions hereunder, to act upon the instructions as aforesaid, I/We hereby irrevocably agree and undertake: That you shall be entitled to act or refuse to act as you see fit, without incurring any liability whatsoever to me or any other person. Upon any instruction for any purpose which may from time to time be or purport to be given by telephone, facsimile, untested telexes and telegraph, cable or any other form of electronic communication by me/us.

That Bank PHB shall be entitled (but not obliged) to keep records of our instructions given or made by afore mentioned in such form , physical or electronics, as you may in your sole discretion deem fit, as your record shall be conclusive and binding on me/us.

That this undertaking cum indemnity document shall be governed and construed in accordance with the laws of Nigerian I/We hereby irrevocably submit to the non-exclusive jurisdiction of the courts in Nigeria.

Signature of 1st Applicant

Signature of 2nd Applicant

DECLARATION

I, the applicant hereby request and authorize the Bank to open/continue any or all of the account(s) indicated in my name in accordance with the information provided in this application.

I request and authorize the Bank to act on any instruction(s) relating to the account in consequence of such payment(s) or instruction(s) and to act on instructions with regard to the purchase, sale, delivery or disposal of securities or transact foreign exchange, provided such instruction(s) is/are given through my secured bank mail generated by the bank unless otherwise instructed.

All authorities shall remain in force until written notice to the contrary is received by the Bank, signed in accordance with the mandate.

By signing below you are agreeing to be bound by the mandates as stated in this form, the Bank's General Terms and Conditions and any product specific terms and conditions, in force from time to time. You also agree and authorize that the Bank may make any enquiry it deems necessary in order to verify the information contained in this application.

I declare that all the information given for the purpose of opening the account(s) are true and accurate and certify that the particulars contained are correct and agree that they and the information given therein form the basis of the banking relationship with Bank PHB Plc.

Name-----

Signature-----Date-----

Signing Instructions / Mandate-----

DOCUMENTS REQUIRED

- Two (2) recent passport photograph
- Form of identification as applicable (e.g. a notarized copy of International passport).
- Form of address verification (e.g. a notarized copy of Utility bill or Drivers License)

Please note that copies of the above documents should be submitted to the bank or our authorized [agents](#)