

## Individual Account Form

**Type of Account:** Current  Savings  Fixed Deposit   
**Nature of Account:** Individual  Joint  Others   
**Account Currency:** Naira  USD  EUR  GBP  Others

## Customer Personal Information

Title:  Full Name:(Surname)   
 First Name  (Middle Name)   
 Date of Birth:         Place of Birth:  Gender: M  F   
 Nationality:  State of Origin:  LGA of Origin:   
 Education Level: Primary:  Secondary:  Post Secondary:  Others:  Religion:   
 Marital Status: Single:  Married:  Divorced:  Widowed:  Others:   
 Spouse's Name (if married):   
 Mother's Maiden Name:

### Residential Address

Flat/House Number:   
 House Number:   
 Street Name:   
 Town:   
 City/State:   
 Telephone:   
 Email:

### Office Address (If Available)

Nature of Employment: Salaried  Self Employed:   
 Employer's Name:   
 Designation:   
 Nature of Business:   
 Address:   
 Telephone:   
 Email:

Mailing/Correspondence: (if different from Residential)

### Type of Identification:

Passport:  Drivers License:  National I.D:   
 Others as approved by Management:   
 I.D Number:  Place of Issue:   
 Issue Date:         Expiry Date:          
 Annual Salary:  Tax ID Number:

### Previous and Existing Relationship with the Bank and other Banks:

Name & Address of Bank Branch	Account Name & Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

## Next of Kin

Title:  Surname:  Other Names   
 Gender: M  F  E-mail:  Telephone Number:   
 Nationality:  State of Origin:  LGA of Origin:   
 Relationship with Account Holder(s):

In the event of the death of the Account Holder (s), should the Bank release the sum outstanding to the credit of the Account Holder(s) to the persons(s) named as Next of Kin in this Form? Yes  No

SIGNATURE: \_\_\_\_\_ DATE:

'In the event that Bank is herein authorized to release the sum outstanding to the credit of the account holder to the person named as Next-of-kin in this form, the Bank will only be obligated to carry out the request of the next of kin named herein upon receipt of the notice of death of the account holder if a duly certified will or letter of administration is not submitted to the Bank before the execution by the bank of the next-of-kin's request'.

Where a duly certified will or letters of administration is submitted to the Bank after the execution by the Bank of the next-of-kin's request, the bank is hereby held harmless and shall not be liable in any way for having executed the request of the next-of-kin named herein.

## For Joint Account Holders Only (Second Applicant)

Title:  Full Name:(Surname)

First Name  Middle Name

Date of Birth:         Place of Birth:  Gender: M  F

Nationality:  State of Origin:  LGA of Origin:

Marital Status: Single:  Married:  Divorced:  Widowed:  Others:

Spouse's Name (if married):

Mother's Maiden Name:  Tax Identification Number:

### Residential Address

Flat/House Number:

House Number:

Street Name:

Town:

City/State:

Telephone:

Email:

### Office Address

Nature of Employment: Salaried  Self Employed:

Employer's Name:

Designation:

Nature of Business:

Address:

Telephone:

Email:

Annual Salary:

Drivers License:

Type of Identification: Passport:  National I.D.:

Others as approved by Management:

I.D Number:  Issue Date:         Expiry Date:         Place of Issue

SIGNATURE: \_\_\_\_\_ DATE:

Note: Unless varied by agreement of the parties with prior notice to the bank, the survivor is entitled to the amount outstanding in the account upon the death of one of the parties. This however does not apply to several and joint liabilities of the account holders in the case of liabilities arising from operation and maintenance of the account.

## For Non-Nigerians

Nationality  Date of Arrival         Date of Departure         VISA Number

Resident Permit Number  Start Date         End Date

Passport Number  Issue Date         Expiry Date

Work Permit Numbers  Issue Date         Expiry Date

## Products & Services

Keystone Bank Limited would like to offer you the following Products & Services to enable you enjoy an enhanced banking experience.

### E-Banking Bouquet

Debit Cards: Verve: Yes  No  Visa: Yes  No  SMS Alert: Yes  No  GSM Number:

Debit Card Name (Individual/Joint):

Electronic Statements: Yes  No

Frequency: Monthly  Quarterly

Please debit my account for the amount for the issuance of my Verve \_\_\_\_\_ and/or Visa cards \_\_\_\_\_

Mobile Banking: Yes  No  Internet Banking: Yes  No  Preferred User ID:

Main Account:  Linked Account:

I hereby apply for Internet and Mobile banking service. I declare that the information given on this form is correct, where discrepancies are found I agree to have this service terminated.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Cheque Confirmation

It is the policy of the Bank to confirm cheques of N200,000 and above before payment. Customers are therefore required to confirm in writing to Keystone Bank Limited , all cheques of N200,000 and above before such cheques are presented for payment over the counter and N500,000 and above via clearing.

If you are not in agreement with the bank's Confirmation policy, please indicate your preference \_\_\_\_\_

### Kindly Indicate preferred mode of confirmation:

Confirmation on reverse side of cheque leaf  Confirmation letter dully signed by authorized signatory(ies):  Others ( Please specify): \_\_\_\_\_

Would you like to be contacted by the Bank to discuss any of these products? Yes  No  Loans:  Remittance Services:  Term Deposits:  Other Products:

## E banking Terms & Conditions

### TERMS & CONDITIONS FOR KEYSTONE BANK LTD INTERSWITCH VERVE DEBIT CARD

"Service" means Instant Cash.

"PIN" means your Personal Identification Number.

"Account" means any account maintained with the Bank at any of the Bank's branches in Nigeria.

"Mailing address" means the customer mailing address in the Bank's records.

"Instruction" means the customer requests to the Bank for the Service.

#### 1. BENEFIT OF THE SERVICES PROVIDED SHALL BE SUBJECT TO THE TERMS & CONDITIONS

That I have been given a default PIN that I will change at the first usage of the ATM. I agree that my card shall be kept secure at all times and my PIN will not be disclosed to any other person. I will take reasonable care in maintaining confidentiality of the PIN by ensuring that it is known to me only. All transactions at the ATM made with my card and PIN will be treated as having been authorized by me. Withdrawals transacted by the card and PIN shall not exceed a maximum limit as may be specified by the Bank. The Card is the property of the Bank and may be withdrawn at any time without prior notice. I agree that the card shall expire on the expiry date indicated on the Card and may be at the discretion of the bank to renew upon expiry. The Bank reserves the right to levy fees/charges or commission, as it may deem appropriate for the use of this service.

If the Card becomes lost, missing or stolen, I shall make a written report at the nearest Business office. I will be charged N1,000.00 for cost of card and N50.00 monthly rental fee on Instant Cash effective when my card becomes active and the Bank reserve the right to review the fee either in amount or frequency of charging without prior notice.

I acknowledge and agree that this agreement is subject to change at any time without any prior notice to me. Cards uncollected by customers after 180 days of production will be destroyed at no cost to the bank. Customers account will be charged N2,000 for card delivery outside branch of request

#### 2. USE OF THE SERVICE

I shall ensure that the Service is used for any of the following purposes:

- To make withdrawals from my account via the ATM.
- To check my account balance.
- To pay my bills Funds Transfer (where such service is available) Any other service that the Bank might offer through the card.

#### 3. THE BANK SHALL BE EXCLUDED FROM LIABILITY IN THE FOLLOWING CIRCUMSTANCES:

- In the event that the Bank complies with any or all instructions given with my card where my PIN becomes known to a third party.
- The Bank shall not be liable for any instruction given by means of any fraudulent, duplicated or erroneous instruction emanating from the use of my PIN.
- The Bank shall not be liable to any failure to provide the service to comply with these terms and conditions arising from any cause that is beyond the Bank's reasonable control.
- Withdrawal of cash at the ATM shall be deemed to have concluded at the point the ATM dispenses cash. The Bank accepts no liability whatsoever for any subsequent event occurring after cash has been dispensed.
- The Bank will not be liable for any machine malfunction, strike any dispute or any circumstances affecting the use of the card where such matter are not within the direct control of the Bank.

#### 4. TERMINATION

The Bank may for a valid reason alter, suspend or terminate the service without giving notice, and in the event that the Bank decides to give notice, should be sent to the mailing address contained in my records with the Bank.

SIGNATURE: \_\_\_\_\_

DATE: 

D	D	M	M	Y	Y	Y	Y
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## Letter of Set-Off, Indemnity and Declaration

I /We, the undersigned, hereby request you to open a \_\_\_\_\_ banking account in the name of \_\_\_\_\_

I / We understand that any sum standing to the credit of this \_\_\_\_\_ account shall bear interest as may be fixed by the bank. I / We further understand that any sum standing to the debit of the \_\_\_\_\_ account shall be liable to interest charges at the rate fixed by the Bank from time to time. You are authorized to debit from the account your usual banking charges, interests, commissions etc.

I / WE agree that in addition to any general lien or similar right to which you as bankers may be entitled by law, you may at any time and without notice to me/us combine or consolidate all or any of my / our account with liabilities to you, and set off or transfer any sum or sums standing to the credit of anyone or more of such accounts or any credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets belonging to me / us with you in or towards satisfaction of any of my / our liabilities to you or any other account or in any other respect whether such liabilities be actual or contingent, primary or secondary, and several or joint.

Furthermore, in consideration of your agreeing to open a \_\_\_\_\_ banking account for me/us and to honor any eligible instruction communicated by me/us in line with the mandate given to you by me/us and in furtherance of banking services / products e.g. electronic banking, internet banking, special cheque confirmation etc accepted and requested by me/us, I/We \_\_\_\_\_ declare that all information provided by me/us are true and accurate. I/We also declare that I /We shall abide by all the relevant laws, bank policies and rules of account opening and operation as shall from time to time be applicable to me/us or the account in question.

I/We hereby further confirm, agree and undertake to keep you indemnified, saved and harmless from all claims, losses, demands paid, incurred or sustained by you as a result of your carrying out me/our instruction or request under reference or as a result of failure or refusal on my/our part to provide true and accurate information or to abide by relevant laws, policies and rules applicable to me/us or the account in question. It is hereby irrevocably agreed that I/We shall effect payment under this Indemnity immediately upon receipt of your first demand in writing from you accompanied by your declaration that your Bank has been made or is likely to be made to suffer any claims, losses or demands as a result of carrying out or having carried out y/our instruction or for failure only / our part to provide true and accurate information, or to abide by applicable banking policies, rules and regulations.

The Bank shall, without recourse to me/us, debit any of my/our Accounts with any sums equivalent to any liability, loss, claim or distress which the Bank may suffer. The Bank shall also retain as security for its exposure under these presents all shares, stock, title documents to landed properties and other security documents deposited with the Bank by me/us in relation to this indemnity or any other transaction whatsoever until the full and complete discharge of any liability, loss, claim or distress which the Bank may suffer hereunder. All rights accruable to and enforceable by the Bank under these presents shall be exercised by the Bank without a Court Order or Judicial Pronouncement to that effect. And in the event that I /we have any dispute to the exercise of such right by the Bank, the dispute shall firstly be resolved amicably between me/us and the Bank, failing which the dispute may be referred to arbitration in accordance with the Arbitration & Conciliation Act. The costs of the Arbitration shall be fully borne by us. My /our liability under this Indemnity shall be a continuing security in your favor until it is duly discharged. This Indemnity shall be governed by the laws of the Federal republic of Nigeria.

Signed, Sealed & Delivered by: \_\_\_\_\_

## Indemnity For Deposit Made Over The Counter

All cash deposits must be made at the banking hall of any of the Bank's branches. Customers or their authorized agents must hand over their cash to the Bank's tellers and ensure that a deposit slip or receipt duly stamped and endorsed by the Bank's teller is collected. The Bank will not be liable for any misappropriation or loss of funds resulting from Customers' deviation from this procedure. Customers requiring to make cash lodgments into their accounts from any location outside the bank's branches must make a formal written request to the Bank for this service and execute a Special Cash Lodgment Service Agreement containing terms and conditions by which parties would be bound.

The acceptance of the bank to carry out this service shall also be subject to appropriate rules and regulations of the CBN or other relevant regulators.

I confirm that I have read the above caveat and that I am bound by its terms.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

## Mandate Card

### 1st Signatory

#### Signatory Information

Full Name

Title: Mr.  Mrs.  Ms.  Chief  Others

Signature \_\_\_\_\_ Designation \_\_\_\_\_ Category \_\_\_\_\_

### 2nd Signatory

#### Signatory Information

Full Name

Title: Mr.  Mrs.  Ms.  Chief  Others

Signature \_\_\_\_\_ Designation \_\_\_\_\_ Category \_\_\_\_\_

### 3rd Signatory

#### Signatory Information

Full Name

Title: Mr.  Mrs.  Ms.  Chief  Others

Signature \_\_\_\_\_ Designation \_\_\_\_\_ Category \_\_\_\_\_

### Signatory Instruction:

## Site Visitation (For Bank Use ONLY)

Visited Customer:

Nearest Landmark:

Date:

### Classification of Customer:

Retail  HNI  Salaried  FEP  PEP

Comment/Observations: \_\_\_\_\_

Affix Picture of site visitation

I confirm that all information provided by the customer is satisfactory.

Name of Account/Relationship Officer: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE:

## Operations Checklist (For Bank Use ONLY)

Duly Filled AOF  Recent Photo I.D (for all signatories)  Relationship Manager's Site Visitation Report   
 Recent Passport Photographs  Duly Filled Reference Form (If Current)  Resident Permit (Non -Nigerian Only):   
 Proof of Residence: Utility Bills  Tax Identification Number:

### CUSTOMER 1

1. Short Name   
 2. Mnemonic   
 3. Customer ID

### CUSTOMER 2

1. Short Name   
 2. Mnemonic   
 3. Customer ID

### CUSTOMER 3

1. Short Name   
 2. Mnemonic   
 3. Customer ID

### Please Note:

All Individual Accounts come with the under listed Packages:

- i. Verve Debit Card
- ii. 50 Leaves Cheque Booklet

## Reference Forms

Registered Name:

Bank:

Bank Account Number:

Name of applicant: \_\_\_\_\_

**CAUTION:**

It is dangerous to introduce any person(s) who is or are not well known to you.

I hereby confirm that the applicant is well known to me for \_\_\_\_\_ years (not less than 2 years)

Referee's Signatures \_\_\_\_\_

**TO BE COMPLETED BY REFEREE'S BANK**

To: Keystone Bank Limited

We hereby confirm our client's signature(s) hereon

Signed and Stamped by Authorised Signatory

Signed and Stamped by Authorised Signatory

Suitable

Not Suitable

## Reference Forms

Registered Name:

Bank:

Bank Account Number:

Name of applicant: \_\_\_\_\_

**CAUTION:**

It is dangerous to introduce any person(s) who is or are not well known to you.

I hereby confirm that the applicant is well known to me for \_\_\_\_\_ years (not less than 2 years)

Referee's Signatures \_\_\_\_\_

**TO BE COMPLETED BY REFEREE'S BANK**

To: Keystone Bank Limited

We hereby confirm our client's signature(s) hereon

Signed and Stamped by Authorised Signatory

Signed and Stamped by Authorised Signatory

Suitable

Not Suitable