

Signature:

Individual Account Form
This form should be completed in CAPITAL LETTERS
Type of Account: Current Savings Fixed Deposit
Nature of Account Individual Joint Others Others
SMS ALERT (Fee applies)  Yes  No  Account statement By E-mail  Pick-up  Post
Bank Verification Number
Customer Personal Information
Title Surname
First Name Middle Name
Date of Birth: D D M M Y Y Y Y Place of Birth: Gender: M F
Nationality: State of Origin: LG of Origin:
Education Level: Primary: Secondary: Post Secondary: Others: Religion: (Optional)
Marital Status: Single: Married: Divorced: Widowed: Others:
Spouse's Name (If married):
Mother's Maiden Name:
Residential Address Office Address(If Available)
Flat/Block Number: Nature of Employment: Salaries Self Employed:
House Number: Employer's Name:
Street Name: Designation:
Town: Nature of Business:
City/State: Address:
Telephone: Telephone:
Email: Email:
Mailing/Correspondence: (if different from Residential)
Type of Identification:
International Passport: Drivers License: National I.D: Others as approved by Management:
ID Holder's Name:
Issuing Authority: Issue Date: D D M M Y Y Y
Place of Issue: Expry Date: D D M M Y Y Y Y
Flace of issue.
Next of Kin
Title: Surname: Other Names
Sender: M F E-mail: Telephone Number: Telephone Number:
Relationship with Account Holder(s):
n 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 person(s) named as Next of Kin in this Form? Yes No
DATE: DD MM MYYYYY
n 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 equest 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 or having executed the request of the next-of-kin named herein.
Products & Services
leadway Microfinance Bank Limited would like to offer you the following Products & Services to enable you enjoy an enhanced banking experience.
-banking Bouquet
ebit Cards: Verve: Yes No Visa: Yes No SMS Alert: Yes No Email Alert: Yes No
ebit Cards Name (Individual/Joint): Electronic Statements: Yes No
Frequency: Monthly Quarterly
lease debit my account for the amount for the issuance of my Verve and/or Visa cards
No Internet Banking: Yes No Internet Banking: Yes No Preferred User ID:

Date:



# **E Banking Terms & Conditions**

TERMS & CONDITIONS FOR HEADWAY MICROFINANCE 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 confidentially 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. Lagree 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 repot at the nearest Business office. I will be charge 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 anytime 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:

- a. To make withdrawals from my account via the ATM
- b. To check my account balance.
- c. 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:

- a. In the event that the bank complies with any or all instructions given with my card where my PIN become known to a third party
- b. 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
- c. 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. d. 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. e. 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

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 or 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/ or liabilities to you or any other account or in any other respect whether such liabilities by 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
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 by your declaration that 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

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

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 your instruction or for failure only/our part to provide true and

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.

## 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 Customer's 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 services and execute a Special Cash Lodgment Service agreement contain ing 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:	Date:



## Account mandate

Signatory Information					
Signatory	Full Name	(Surname First)		Title: Mr. Mrs. Ms. Chief Others	
	Designation_		Category		
	Signature		Date		
Signatory	Full Name	(Surname First)		Title: Mr. Mrs. Ms. Chief Others	
	Designation_		Category		
	Signature		Date		
Signatory	Full Name	(Surname First)		Title: Mr. Mrs. Ms. Chief Others	
	Designation_		Category		
	Signature		Date		
Signatory	Full Name	(Surname First)		Title: Mr. Mrs. Ms. Chief Others	
	Designation_		Category		
	Signature		Date		
Signatory	Full Name	(Surname First)		Title: Mr. Mrs. Ms. Chief Others	
	Designation_		Category		
	Signature		Date		
Mandate Instruction:					
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 Headway Microfinance Bank Limited all cheques of N200,00 and above before such cheque 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 prefence					
Kindly Indicate preferred mode	of confirmation:	:			
Confirmation on reverse side of c	heque leaf	Confirmation letter dully signed by authorized signatory(ies) Others (	Please specify)		
Would you like to be contacted by	y the Bank to discu	uss any of these products? Yes No Loans: Loans:	Remittance S	Services: Term Deposits: Other Products:	



Amount in words:\_

Site Visitation (For Bank Use ONLY)			
Visited Customer:			Date: D D M M Y Y Y Y
Address Visited:	Nearest Landmark: —		
	-		
Customer Classification:  HNI Salaried FEP PEP  Comment/Observations:		Affix	Picture of site visitation
I confirm that all information provided by the customer is satisfactory.  Account/Relationship Officer:  DAO Code:			
Name: Signature:			Date: D D M M Y Y Y Y
CBM/RBM:			
Name: Signature:			Date: DDMMYYYY
	onship Manager's Site Visitation ent Permit (Non - Nigerian Only)		
CUSTOMER 1 CUSTOMER 2		OMER 3	
1. Short Name         1. Short Name           2. Mnemonic         2. Mnemonic	1. Short	ort Name	
3. Customer ID 3. Customer ID		stomer ID	
Please Nate:  All Individual Accounts come with the under listed Packages:  I. Verve Debit Card  ii. 50 Leaves Cheque Booklet			
Account Details (For Bank Use ONLY)			
Request ID			
Account Number			
DBANCH D			
Initial Deposit N			