



# CUSTOMER INFORMATION UPDATE FORM (INDIVIDUAL)

Dear customer,  
Kindly complete this form to enable us serve you better.

BVN NUMBER:

ACCOUNT NAME:

ACCOUNT NUMBER:

1. TITLE:

2. SURNAME:

3. FIRST NAME:

4. OTHER NAMES:

5. MOBILE NUMBER:

6. E-MAIL ADDRESS:

7. DATE OF BIRTH:  SEX: MALE  FEMALE

8. MARITAL STATUS: SINGLE  MARRIED  DIVORCED  SEPARATED  WIDOWED

9. MOTHER'S MAIDEN NAME:

10. EMPLOYER'S NAME

11. OFFICE ADDRESS:

12. OFFICE TELEPHONE:

13. NATIONALITY  14. STATE OF ORIGIN

15. OCCUPATION:

16. RESIDENTIAL ADDRESS:

17. CITY:  18. STATE

20. ID TYPE: PASSPORT  DRIVING LICENCE  VOTER'S CARD  NATIONAL ID  OTHERS (SPECIFY)

21. ID NUMBER:

22. ID ISSUED DATE:  23. ID EXPIRY DATE:

24. NAME OF SPOUSE:

25. SPOUSE BIRTHDAY:  26. WEDDING ANNIVERSARY:

27. NEXT OF KIN DETAILS:  
NAME:   
RELATIONSHIP:   
CONTACT ADDRESS:   
MOBILE NUMBER:

28. OTHER DETAILS (FOREIGNERS):  
RESIDENT PERMIT NO.:  ISSUE DATE:   
TAX ID NO.:  EXPIRY DATE:

29. HOBBIES: \_\_\_\_\_

30. CUSTOMER'S SIGNATURE \_\_\_\_\_ 31. DATE: