



CONFIDENTIAL

BVN DEMOGRAPHIC UPDATE FORM

Please provide the necessary information

Personal/Contact Details				
*Surname:				
*Middle Name:				
*First Name:				
*Account Number:				
Bank Verification Number (BVN) *Gender:				
Male Female				
*Titles: Mr. Mrs. Miss. Ms. Dr. Prof. Others				
Mr. Mrs. Ms. Dr. Prof. Others				
*Marital Status *Date of Birth:				
Single Married Widow D D M Y Y Y				
Widower Divorced Separated				
*Residential Address:				
*Phone Number 1: Phone Number 2:				
E-mail Address:				

Agreement Clause

• I give permission for the bank to securely store and transmit this Biometric and Personal/Contact data for the purposes of operating my bank account.

• I understand that "Personal/Contact details" refers to the information I have provided above.

Disclaimer Clause

• The Bank shall not be liable for breaches/disclosures that may occur where it is compelled by law or regulatory authority to disclose any biometric data and or Personal/Contact details to third parties.

I hereby attest that the above information is true and complete.				
		Signature and date		
Bank Official Only				
Initiated By:				
Verified By:				