

DIASPORA MIGRATION & UPDATE FORM (INDIVIDUAL)

Dear Valued Customer,

Kindly complete this form to enable us serve you better (all changes in current information must be supported by documented evidence): BLOCK LETTERS ONLY

BVN Linkage Account Reactivation Bank Verification Number (BVN)
 Account Number 1 Branch of Domiciliation
 Account Number 2 Branch of Domiciliation
 Account Number 3 Branch of Domiciliation
 Title Dr Mr Mrs Miss Others
 Surname
 First Name
 Middle Name
 Date of Birth

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 Marital Status Single Married Divorced Separated Widowed
 Email Address
 Foreign Mobile Number

Town/City State		Country					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 Preferred SMS Mobile Number (For Alert)

Zip Code	Town/City State		Country					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

 Alert Deactivation Old Mobile Number
 Old e-mail Address
 Foreign Residential Address
 City State Country
 Nationality
 Occupation Expected Annual Income

Nigerian Contact Details (Optional)

Title Dr Mr Mrs Miss Others
 Full Name
 Mobile Telephone Gender Male Female Relationship
 Residential Address

Customer Confirmation

Checklist for accompanying documents

- Notarized or verified Proof of Address, Valid proof of address of residency e.g Current Utility Bill not exceeding 3months country of residence.
- Notarized or verified Valid Proof of Identification - Nigerian Driver's License or Nigerian International Passport or Nigerian National or foreign passport with Nigeria stated as place of birth.

Note: Account(s) to be funded immediately after re-activation to avoid going back to dormancy.

I/We hereby authorise First Bank of Nigeria Ltd. to reactivate this account(s) which has been inactive. I/We confirm that the above information is correct and also agree that my/our account(s) shall be subject to the terms and conditions applicable by the bank to such account as may be amended from time to time.

Authorised Signature:

Date:

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

For Bank use only

Initiator

Signature

Date:

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Authoriser

Signature

Date:

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>