Account Update/Reactivation Form - Business Account (Sole Proprietor Only)



Date: Day Month Year	
BVN:	
Type of Update: Account Re-activation	Customer Information Signature
Passport Photograph	
Account Name:	Account Number:
Company Registration No:	Registration Date: Day Month Year
Registered Address:	
E-mail Address:	
Nature of Business:	
Tax ID No:	Tel. Phone No:
Authorized Signatory	Authorized Signatory
Authorized Signatory	Authorized signatory
For Official Use	
Tot official ode	
Treated by:	Stamp & Date:
Approved by:	Stamp & Date: