



ACCOUNT ACTIVATION FORM

Date: (dd/mm/yyyy)

CUSTOMER DETAILS

Name: First name Middle name Surname

ID/ Passport number:

Kindly reactivate the following account(s) which has not been operated on for some time;

Account name	Account number	Reason for re-activating
1	<input type="text"/>	
2	<input type="text"/>	
3	<input type="text"/>	

Debit related charges accordingly.

I/we submit that the accounts will be conducted according to the prevailing terms and conditions which I/we have been sufficiently informed about and have had time to study and now accept. Please note that the account to remain active, you must transact on the date of activation.

Signed according to mandates maintained with the Bank.

Name:

Signature: Date:

Name:

Signature: Date:

Name:

Signature: Date:



FOR OFFICIAL USE ONLY

I confirm that the customer and account details have been sufficiently updated:

	Verified by	Authorized by	Transferred by
Name:			
Signature:			
Date:	(dd/mm/yyyy)	(dd/mm/yyyy)	(dd/mm/yyyy)