## PERSONAL ACCOUNT OPENING FORM



This form must be filled in CAPITAL LETTERS by hand-written after downloading and printout and then scanned and submitted via our email INFO@HEDGEMFB.COM as attached file.

Branch Name	(For official use only) Account No.
Account Type: Tier 1 Tier 2 Product Type:	Product Code:
1. PERSONAL DETAILS	
Title: Mr. Mrs Miss Other Gender: Male Female Marital St	tatus: Single Married Other (specify)
Surname: First Name:	Other Name:
Date of Birth: D D / M M / Y Y Y Y State of Origin	L.G.A.
Nationality Mother's Maiden Name TIN S	tate your Personal TIN Religion
Bank Verification Number (BVN) ===>	
2. CONTACT DETAILS	
House Number: Street Name:	
Nearest Bus stop/Landmark:	
Community/Town L.G.A.	State
Mailing Address (if different from above)	
Email Address	Phone
Social Media Handle: FaceBook: Instagram	LinkedIn
3. MEANS OF IDENTIFICATION (Please tick as appropriate below and attach a copy)	
Driver licence International passport Voter's card NIN Other (specify)	
ID Number   Issue Date   D D / M M / YYY	Y Expiry Date DD/MM/YYYY
4. ACCOUNT SERVICES REQUIRED (Please tick applicable option below)	
Card Preference (Naira Debit Card)  Verve card  Visa card  Master card	Other (specify)
	OS Other (specify)
Transaction Alert Preference: Email alert (free) SMS Alerts (Fees apply)	
5. LIST OF DOCUMENTS FOR ACCOUNT OPENING (These documents must be attach	ned with the filled account opening form)
<ul> <li>Completed account opening form (This is Mandatory)</li> <li>Means of Identity (any one of either NIN, voter's card, international passport or driver's licence)</li> </ul>	
National Identity Number (NIN) slip (This is Mandatory)	
<ul> <li>Two (2) References OR a letter of reference from a current account holder with HMFB (This is man</li> <li>Utility Bill (any of electricity or DSTV receipt, or tenancy agreement, etc) or utility bill of HMFB current</li> </ul>	
The provision of utility bill is mandatory only for the opening of a current account.	ent account notice who has issued a reference letter.
<ul> <li>Two (2) Passport Photos of each signatory to the account. This is for joint account.</li> <li>EMPLOYMENT DETAILS (Optional)</li> </ul>	
	tudent Employment Date DD/MM/YYYY
Business Employer's Name:	Nature of Business:
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7. DETAILS	OF NEXT (	OF KIN								
Surname			First Name			Other	Name(s)			
Gender: Male	2:	Female:			Relationship:					
House Number: Street Name:										
Nearest Bus stop/L	Landmark:									
Community/Town				L.G.A.			State			
Email Address						F	Phone			
a) Inte b) This c) If fr rest d) For plea	ernational fu s is strictly a raudulent ac trictions to y more inforn	nd transfer is not personal account tivity is associated rour account and renation on maximulyour account office	allowed and you will be with the operate eport to the app m single deposit	required to prov tions of your acc propriate law ent	ride more documentation ount, you agree that the forcement agencies. ative balance, daily withdo	when tra Hedge Mi	crofinanc	e Bank Lt	d has the right to app	
		PATE								
a) Account Nam     b) Account Num						Mandate Authorization: Sole signatory				
c) Signatory: Su	urname:			First Name:		Other N	Name(s):			
d) Signature:					Date:				Affix Passport Photograph of Account Signatory	
read the terms and cond	the information ditions governin	g the account and thos	e relating to various	products and service	d is for the basis of opening of po es that I have requested for as s in the information provided to ti Date:	stated in the	Bank's webs	site, and I A	GREE to be bound by them	
<b>URAT – To be adopte</b> agree to abide by the te	erms and acknow		truly and audibly rea	d and explained to me	e by an interpreter.		t Holder's nbprint		Commissioner for Oaths	
Address of Interprete	r:									
anguage of Interpret	ICE USE			Number:			ate:			
		been duly reviewe	_	d that it is adequewed by: Head of	ately completed with all a f Operations			_	ments attached here	
Name:			Name:	Syrricua O	po. 60.0110	Name		,. Dranet		
Signature:			Signature:			Signat	ure:			
Date:			Date:			Date:				
Introducer Code:			Referral Code	2:		Accoun	nt manage	r's Code:		