

Update/Reactivation Form - Individual



Guaranty Trust Bank Ltd

Date:
Day Month Year

Please tick required as appropriate Information Update Account Re-activation

Title: _____

Account No.:
BVN:

Customer Information

Date of Birth:
Day Month Year Phone: _____

Email: _____ Mother's Maiden Name: _____

Nationality: _____ Country of Residence: _____

Residential Address: _____

ID Type: International Passport Driver's license National ID Others (Please specify) _____

ID No.: _____ Residence/Work Permit No. (for foreigners): _____

Occupation/Nature of Business: _____ Job Title: _____

Business/Employer's Name: _____

Business/Employer's Address: _____

Mandate Update

Old Signature

New Signature

Passport
Photograph

Account Service(s) Required (Please tick applicable option below)

Online Banking E-mail Statement Naira Debit Card Dollar Debit Card
(Dollar Card form to be filled)

Email Alert Token Cheque Book SMS Alert
(Charges apply) (Charges apply) (Charges apply)

The pre-checked boxes above are compulsory services as directed by the CBN. If you wish to opt out of these services, kindly request for an indemnity form.

Authorized Signatory

Authorized Signatory

For Official Use

Kindly tick the relevant check box based on the documentation provided by the customer

Utility Bill Marriage Certificate Sworn Affidavit Identity Card Others (specify) _____

CIS: _____
Name/Signature/Date

OPS Head: _____
Name/Signature/Date
