



INDIVIDUAL ACCOUNT

Checklist (Bank use only)

		Checked Deferred Waived N/A			Checked Deferred Waived N/A
1.	Duly completed Account Opening Form		5.	Resident Permit (For non-Nigerians)	
2.	Specimen signature card duly completed		6.	Two (2) independent and satisfactory references (For current account)	
3.	Two (2) recent passport-sized photographs		7.	Proof of address (utility bills etc)	
4.	Proof of identity (Original must be sighted)		8.	Letter from employer/school/NYC (For solary account)	



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Marital Status please tick as appropriate)	Sing	le		Marrie	d		Ot	her (S	pecify)								Gen	der				Male					F
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Resident Permit No. for Non-Nigerians)								T												1							
Permit Issue Date for Non-Nigerians)	D D	ММ	Y	Y	/ AY											P	ermi	t Exp	oiring	g Dat	e	D D	M	1 M	Y	Y	Y
Purpose of Account								ì				Sour	ce of Weal	Fund	d	(,	1	T-TVISC	110113)						T		
Residential Address:												/	wear	tn	H												
House Number						Street	Nam			H					H							1			T		
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3.	ACCOUNT S	ERVICE(S) REQUIRED (PLEASE TICK APPLICABLE OPTION(S) BELOW)	
	Card Preferences: Debit Card Online Banking Transaction Notification		
	Statement Preference E-Statement Frequence Cheque Book Requisit	y: Monthly	
	Kindly note that your	account will be debited with a fee as cost for your card(s) once the account is opened	
4.	EMPLOYME	NT DETAILS	
	Employment Status	Paid Employment Self Employed Unemployed Retired Student Others If Others (Please Specify)	
	Employer's Name		
	Date of Employment (if Employed) Address	D D M M Y Y Y Y Expected Annual Income	
	Nature of Business / Occupation		
5.	NEXT OF KI	DETAILS	
	Title:	Name Name	
	Date Of Birth	D D M M Y Y Y Marital Status Married Single Others (specify) Gender Male Fem	ale
	Relationship Residential Address		
	Mobile No.	E-mail	
6.	AUTHENTICAT	ION FOR POLITICALLY/FINANCIALLY EXPOSED PERSON / BENEFICIAL OWNERS	Ì
	Is the applicant a Poli	cally Exposed Person (PEP)? Yes No	
	111	ncially Exposed Person (FEP)? Yes No	
	Name(s) of Beneficial Owner(s) (if any)		
7.	FATCA/CRS		
	Please fill the following	g field if you hold any other citizenship aside Nigerian nationality	
	Country of Tax Residence	Foreign Tax ID	
	Foreign Citizenship (Country name)	International Phone No	
	Foreign Address (including mailing		



8. DECLARATION

General Terms and Conditions: INDIVIDUAL/JOINT ACCOUNTS

- 1. I/We hereby authorize the bank to open an account in my/our name(s).
- 2. Honour my/our all cheques or other orders which may be drawn on the said account until the Bank receives a written notice to the contrary, provided such cheques or orders are signed by the me/us as stated in my/our Mandate Card and to debit such cheques or orders to the said account and in consideration, I/We hereby irrevocably and unconditionally agreed and undertake as follows:
- a. To assume full responsibility for the validity, genuineness and correctness of all endorsements appearing on all Cheques/Orders/Instruments deposited in my/our account.
- b. To be fully responsible for the repayment of any overdraft with Interest and to comply with the Bank's rules and new rates which may be advised by the Bank from time to time.
- c. I/We agree that in the absence of any directive to the contrary, any account(s) subsequently opened shall be operated and dealt with upon these terms in so far as the same may be applicable.
- d. If a fraudulent activity is associated with the operation of my/our account, I/we agree that you have the right to apply restrictions to my/our account and report same to appropriate law enforcement agencies.
- e. I/We hereby agree that the Bank is entitled at any time without notice to me/us, to combine and/or consolidate all or any of my/our account(s) or a related account(s) and set off any sum therein for the purpose of satisfaction of any of my/our liabilities to the Bank.
- 3. I/We shall keep the Bank indemnified at all times and hold the Bank harmless from all actions, proceedings, claims damages, losses, Interest and expenses (including legal costs) which may be brought against, suffered or incurred by the Bank by reason of any falsehood or inaccuracy of any statement of information of misrepresentation made to the Bank or in resolving any dispute on my/our account(s) or in enforcing the Bank's rights which may have arisen from the Bank performing its obligations.

By signing this document, you have agreed to the general electronic banking and general data protection regulation (GDPR), common reporting standard (CRS) and terms and conditions for account opening contained on our website www.titantrustbank.com

reporting standard (CR	5) and terms and conditions for account op	ening contained on our website v	vww.titantrustbank .com
	Name of Customer		Signature & Date
	Name of Customer		Signature & Date
MANDATE CA	ARD		
Name			
Account Number	///: {{{ {{{{}}}	Mobile Phone No	## H
	Signature Mandate		Affix passport photograph here
Please Specify Mandate Authorization and Combination Rule			
FOR BANK USE	ONLY		
Introduced By:	Name:	Signature/Date	
Opened By:	Name:	Signature/Date	
Approved By:	Name:	Signature/Date	
Risk Profile:	High	Risk Justification	
Name:	0.	Sign & Date	