

Account Reactivation Form



Access Bank Plc RC 125384

| | |
|---------|-------------|
| Branch | Date |
| Name | Account No. |
| Address | |
| Email | Telephone |

Why was the account dormant (Tick as applicable)

Service not Satisfactory
 Relocation
 Litigation
 Customer Deceased

Others (Specify) _____

Reason(s) for Reactivation

New Deposit (Tick as appropriate)

Cheque
 Cash
 Fund Transfer

Amount: _____

If 'Cheque', specify bank's name: _____

_____ Customer's Signature & Date

For Access Bank's Use Only

A

Fill in the following information below

| | |
|--------------------------|--------------|
| Date | Account Name |
| Date of Last Transaction | Account No. |
| Balance on Account No. | |

B

Are all account documents complete? Yes No

Tick new documents collected

Passport Photograph
 International Passport
 New Mandate Card
 Driver's Licence
 Referees

Email: _____ Tel./Mobile: _____

C

Approval

Relationship Manager's Signature & Date: _____

Operations Head's Signature & Date: _____