

ESTATE ACCOUNT

NAME:

DATE OPENED



ESTATE ACCOUNT OPENING REQUIREMENTS

- (1) Account opening package duly executed by all Administrators
- (2) A Photocopy of letter of Administration
- (3) Two (2) passport photograph of each of the Administrator (2)
- (4) A photocopy of the means of identification of each of the Administrator (Driver's licence, National I.D, International passport or Voter card)
- (6) A photocopy of Newspaper Publication/Gazete
- (7) A photocopy of the Utility Bill of each of the Administrators (Should bear name of current address otherwise backed by a tenancy agreement

N.B
All the original document shall be presented for sighting



ESTATE ACCOUNT FORM

CONTACT NAME		
CONTACT ADDRESS		-25000
CONTACT E-MAIL ADDRESS		
CONTACT PHONE No		
BANK DETAILS		
BANK/BRANCH	A/C No	
DATE OPENED (DD/MM/YYY)	The second	1500000
	21012	
DETAILS OF NEXT OF KIN		
SURNAME		
OTHER NAMES		
RELATIONSHIP	- MOBILE PHONE	
E-MAIL ADDRESS		
CONTACT DETAILS		
STREET NAME		
CITY/TOWN		
NEAREST BUS STOP		72
E-MAIL ADDRESS		
E-MAIL ADDRESS		

Passport Photograph



ESTATE ACCOUNT FORM (ADMINISTRATOR1)

	MISS.		THERS NAME			MIDDLE NAME
SURNAME			FIRST NAME]	VIDDEL IVANIL
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SIGNATURE





ESTATE ACCOUNT FORM (ADMINISTRATOR2)

R. MRS. MISS. MS.	OTHERS	
URNAME	FIRST NAME	MIDDLE NAME
MAILING ADDRESS:	OFFICE	Property Company of the Company of t
OME:	*	
		MOTHER'S MAIDEN NAME
ELEPHONE: OFFICE	Waller Town	HOME MOBILE
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DATE OF BIRTH		RELIGION PROFESSION STATE OF ORIGIN
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BANK DETAILS BANK/BRANCH DATE OF ACCOUNT OPENED (DD/MM/YY) EMPLOYMENT DETAILS	D UNEMPLOYED	OTHER ID A/C NO.

SIGNATURE

Passport Photograph



ESTATE ACCOUNT FORM (ADMINISTRATOR3)

MR. MRS. MISS. MS.	OTHERS	Children and the second
SURNAME	FIRST NAME	MIDDLE NAME
MAILING ADDRESS:	OFFICE	THE STATE OF THE S
HOME:		
	SKSA41 SA	MOTHER'S MAIDEN NAME
TELEPHONE: OFFICE		HOME MOBILE
E-MAIL		
DATE OF BIRTH	229654	RELIGION PROFESSION
NATIONALITY		STATE OF ORIGIN
LGA		GEO - POLITICAL ZONE
MEANS OF IDENTIFICATION		10 90200
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	UNEMPLOYED	RETIRED STUDENT OTHERS (PLEASE SPECIFY)
DATE OF EMPLOYMENT		
EMPLOYER'S NAME		
EMPLOYER'S/EMPLOYMENT ADDR	RESS	Salation Renting
CITY/TOWN	y ·	
NATURE OF BUSINESS	35 4	
OCCUPATION	ž	The second secon
OFFICE PHONE NUMBER		The second secon
		ALLEGATION OF THE STREET

SIGNATURE







Important Notice

To help the Federal Government of Nigeria fight the funding of terrorism and money laundering activities, the money laundering (Prohibition) Act 2011 and subsequent amendments thereto requires all financial and non-financial institutions to obtain, verify and record information that identifies each person who opens an account. In this regard when you open an account with us at Reward Investments and Services Ltd, we will ask for your name, address, means of identification, occupation and other information that will enable us to identify you and verify your identity on an ongoing basis.

Further more, in compliance with the money laundering (Prohibition) Act 2011 and subsequent amendments thereto, any single transaction, lodgement or transfer of funds in excess of N5,000,000 or it's equivalent in the case of an individual or N10,000,000 or it's equivalent in the case of a body corporate shall be reported in writing within 7days to the Nigerian financial Intelligence Unit (NFIU) and the Securities and Exchange Commission (as applicable).