

Future Star Account Opening Form

Kindly complete this form to enable us serve you better.

Affix
Child's
Passport
Photo

CHILD'S PERSONAL DETAILS

First Name:

Middle Name:

Surname:

Gender: Male ☐ Female ☐ Date of Birth:

Nationality:

Residential Address:

(optional):

PARENTS/GUARDIAN DETAILS (SIGNATORY A)

Relationship with Child: Father ☐ Mother ☐ Guardian ☐ Sponsor ☐

Gender: Male ☐ Female ☐ Title: BVN:
Mandatory

Name of Parent/Guardian:
First Name Middle Name Surname

Marital Status: Single: ☐ Married: ☐ Widowed: ☐ Separated: ☐ Divorced: ☐

State of Origin: Date of Birth:

LGA: Nationality:

Resident Permit Issued Date: Expiration Date:

Number: for non-Nigerian

Dual Citizenship: Yes ☐ No ☐ If yes, please specify

Social Security Number
US Citizen/ Resident

Means of Identification: National Identification Number ☐ Int'l Passport ☐ Voter's Card ☐ Driver's Licence ☐

(NIN) ID No: Issued Date: Expiration Date:

Mandatory

Residential Address:

Landmark:

L.G.A: State:

Phone Number: Email Address:

Politically Exposed Person (PEP) Please tick Yes ☐ No ☐

EMPLOYMENT DETAILS (OPTIONAL)

Employment Status: Employed ☐ Self Employed ☐ Unemployed ☐ Retired ☐ Student ☐ NYSC ☐ Others (Specify)

Salary: Yes ☐ No ☐ Date of Employment (if employed)

(Expected) Monthly Income: (a) Less than N50,000 ☐ (b) N51,000-N250,000 ☐ (c) N251,000-N750,000 ☐ (d) Above N750,000 ☐

Business/Employer's Name:

Employer's/Employment Address:

House Number Street Name

Nearest Bus Stop/Landmark

City/Town LGA

State

Nature of Business/
Occupation

Office Phone Number Fax Number

Do you have a 9 Payment Service Bank Account: Yes ☐ No ☐ Account No:

Request for Standing Instruction to Future Star Account: Yes ☐ No ☐

Frequency of Debit: Weekly ☐ Monthly ☐ Quarterly ☐

Amount in Words:

Date of Commencement:

PARENTS/GUARDIAN DETAILS (SIGNATORY B)

Relationship with Child: Father ☐ Mother ☐ Guardian ☐ Sponsor ☐

Gender: Male ☐ Female ☐ Title: BVN:
Mandatory

Name of Parent/
Guardian:
First Name Middle Name Surname

Marital Status: Single: ☐ Married: ☐ Widowed: ☐ Separated: ☐ Divorced: ☐

State of Origin: Date of Birth:

LGA: Nationality:

Resident Permit Issued Date: Expiration Date:
Number: for non-Nigerian

Dual Citizenship: Yes ☐ No ☐ If yes, please specify

Social Security Number

US Citizen/ Resident

Means of Identification: National Identification Number ☐ Int'l Passport ☐ Voter's Card ☐ Driver's Licence ☐

(NIN) ID No: Issued Date: Expiration Date:

Residential Address: Landmark:

L.G.A: State:

Phone Number: Email Address:

Politically Exposed Person (PEP) *Please tick* Yes ☐ No ☐

EMPLOYMENT DETAILS (OPTIONAL)

Employment Status: Employed ☐ Self Employed ☐ Unemployed ☐ Retired ☐ Student ☐ NYSC ☐ Others (Specify)

Salary: Yes ☐ No ☐ Date of Employment (if employed)

(Expected) Monthly Income: (a) Less than N50,000 ☐ (b) N51,000-N250,000 ☐ (c) N251,000-N750,000 ☐ (d) Above N750,000 ☐

Business/Employer's Name:

Employer's/Employment Address:

House Number Street Name

Nearest Bus Stop/Landmark

City/Town LGA

State

Nature of Business/ Occupation

Office Phone Number Fax Number

Do you have a 9 Payment Service Bank Account: Yes ☐ No ☐ Account No:

Request for Standing Instruction to Future Star Account: Yes ☐ No ☐

Frequency of Debit: Weekly ☐ Monthly ☐ Quarterly ☐

Amount in Words:

Date of Commencement:

NEXT OF KIN

Name: Relationship:

Address:

SIGNATURE MANDATE

Name:

Signature:

Affix
Passport
Photo

Name:

Signature:

Affix
Passport
Photo

Name:

Signature:

Affix
Passport
Photo

Signature Mandate: Joint ☐ Either ☐ Sole Signatory ☐

The Responsibilities of the Account Holder

- Send account opening documentation and required documentation to amend existing mandates and other related instructions on the account as may be prescribed by the Bank from time to time.
- Ensure proper completion of signature cards.
- Provide 9 Payment Service Bank with specimen signatures of its authorised signatories.
- Inform 9 Payment Service Bank immediately of any change(s) to the list of authorised signatories.
- Shall assume full responsibility for the genuineness or and validity of all cheques, orders, bills, notes, negotiable instruments, receipts and/or other documents including endorsements appearing on the same, deposited in or drawn on in respect of his/her/its account(s) with the Bank.
- Shall ensure that he/she/it collects duly stamped deposit slip for any sum deposit into the account.
- Shall be responsible for the repayment of any overdraft with interest and to comply and be bound by the Bank's rules for conduct of savings, current, domiciliary and other account(s) as may be determined by the Bank from time to time.
- Shall indemnify the Bank against any loss, damage, expense or claim the Bank may suffer by reason of opening the said accounts) or by reason of the falsehood or inaccuracy of any information or misrepresentation made to the Bank by the Account Holder except those losses, damages, expenses or claims directly resulting from the acts, defaults or gross negligence of the Bank.
- Shall hold the Bank harmless and free of any liability whatsoever for any loss, damages, fraud or claims that the Account Holder may incur from the fraudulent use of any telephone number, fax number or email address supplied in this form or subsequently by the Account Holder whether for the purpose of issuing instructions, receiving/sending account information or indeed any transaction related to this account.

Rights of the Bank

- The Bank may debit the account(s) with usual Banking charges, interest, commission, and fees as may be determined by the Bank from time to time.
- The Bank shall not be liable for any loss or diminution of funds or damage to instruments deposited with the Bank due to any Government order, law, levy, tax, embargo, moratorium, exchange, restriction and/or all of other causes beyond the Bank's control.
- The Account Holder shall be bound by any notification of changes in conditions governing the account directed to his/her /its last known address and any notice or letter sent to his/her/fits known address shall be considered as duly delivered and received three business days after dispatch of same by ordinary prepaid post or on the date endorsed on the proof of delivery if delivered by courier services/hand delivery.
- No notice which may be given to the Bank by the Account Holder shall be binding upon the Bank until it shall have been received by the Bank and sufficient time shall have elapsed thereafter to permit the Bank in due course and by such means the Bank may deem appropriate to notify the concerned/affected department offices, branches and correspondents.
- Any disagreement with entries on the Bank's statements will be made in writing to the Bank by the Account Holder within 30 days of dispatch of the statement, falling which it will be concluded that the statement as rendered is correct and same shall no longer be disputable, except in case of manifest errors.
- If or where any entry is made into the Account Holder's account(s) in error, the Bank is entitled to dishonour it led to reverse such incorrect entry without prior consent of the Account Holder and any liability on the part of the Bank.
- The Bank may at any time and in absolute judgement close the accounts) and discharge all liabilities with respect to the accounts) by hand delivery or by mailing to the Account Holder by courier services a Bank draft in the currency of the account without recourse to the Bank as a drawer, payable to the order of the Account Holder in the amount of the then credit balance in the accounts) less fees, charges or commission to which you may be entitled by law or by any agreement between us and the Bank together with such documents, if any, as may be necessary in your sole discretion, to transfer to us.
- The Bank will not be liable whatsoever for funds handed by the Account Holder or his/her/its representatives or agents or employees to any of the Bank's employees without evidence of a duly stamped deposit slip
- In addition to any general lien or right to which the Bank as Bankers may be entitled by law, the Bank may at any time and without notice to the Account Holder combine or consolidate all or any of his/her/its accounts without liability to the Bank and set off or transfer any sum or sums standing to his/her/its credit in any one or more of such accounts or any other credit, be it cash, cheques, valuables, deposits, securities, negotiable instruments or other assets with the Bank or in any other respect whether such liabilities be actual or contingent, primary collateral, several or joint.
- To affirm and undertake that all the documents used in opening the account(s) are genuine and we will indemnify the Bank if at any time it is shown otherwise and we will be further liable for any wrong that may be occasioned thereby. This indemnity to you shall be continuing and shall not be withdrawn by us so long as we maintain this account with the Bank.
- The Account Holder and the Bank agree that the operation of the accounts) is subject to laws and regulations at any time existing in the Federal Republic of Nigeria, and to be bound by the terms and conditions herein.

Full Name:

Signature:

Date:

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Kindly send the form to **Retail.Business@9psb.com.ng**