

# Account Update Form-Individual

Kindly complete this form to enable us serve you better.

	Surname	Middle Name	First Name
<b>Account Name</b>	<input type="text"/>		
	Surname	Middle Name	First Name
<b>Name of Signatory (if applicable)</b>	<input type="text"/>		
<b>Account Number</b>	<input type="text"/>		
<b>E-mail Address</b>	<input type="text"/>		
<b>Type of Update</b>	Information Update <input type="checkbox"/>	Signature <input type="checkbox"/>	Name Change <input type="checkbox"/>
	Biometric Update <input type="checkbox"/>	Passport Photograph <input type="checkbox"/>	

## NAME CHANGE

	Surname	Middle Name	First Name
<b>Old Name</b>	<input type="text"/>		
	Surname	Middle Name	First Name
<b>New Name</b>	<input type="text"/>		
<b>Reason for Name Change:</b>	Marriage <input type="checkbox"/>	Others <input type="checkbox"/>	Please specify <input type="text"/>

For customer information, signature and passport photograph update, please attach appropriate supporting documents.

## CONTACT ADDRESS UPDATE

<b>New Contact Address</b>	<input type="text"/>		
<b>Country of Residence</b>	<input type="text"/>		
<b>L.G.A of Residential Address</b>	<input type="text"/>	<b>Nearby Landmark</b>	<input type="text"/>
<b>Old Contact Address</b>	<input type="text"/>		
<b>Country of Residence</b>	<input type="text"/>		
<b>L.G.A of Residential Address</b>	<input type="text"/>	<b>Nearby Landmark</b>	<input type="text"/>

## PHONE NUMBER UPDATE

<b>New Phone Number</b>	<input type="text"/>	<b>Old Phone Number</b>	<input type="text"/>
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## DATE OF BIRTH UPDATE

<b>Updated Date of Birth</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<b>Old Date of Birth</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>State reason(s) for account update</b> <input type="text"/>									

**PASSPORT AND SIGNATURE UPDATE. (Please tick required section as appropriate)**

Affix  
Passport  
Here

Old Signature

New Signature

**DECLARATION**

I  certify that information provided by me above are true and correct and hereby authorize the update.

Customer Signature & Date:

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"/>

**DOCUMENTS REQUIRED**

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

Utility Bill ☐ Marriage Certificate ☐ Sworn Affidavit ☐ Identity Card ☐

Others (Specify)

**FOR OFFICIAL USE ONLY**

Onboarding Officer  
Name/ Date/ Signature

Head of Operations  
Name/ Date/ Signature