unity bank

Retail Internet Banking Application Form

Applicant's Details

Note: Valid e-mail address & mobile number are MANDATORY otherwise customer should update information, & log-on details shall be sent to the e-mail address provided.

Account Name:………

Type of Account: Retail ☐   Corporate (sole Signatory) ☐   Token Type: Hardware ☐   Software ☐

NUBAN Account Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]   Mobile Number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Email Address [ ]

User ID [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]   Alternative (1) [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]
                                                  User ID (2) [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Token Delivery: Pick Up ☐   Delivery to Address ☐

Deliverery Address:………………………………………………………………………………………………….........

> It is your responsibility to keep your Internet Banking details safe and under your control. Do not reveal your 'Log On' password; it is your signature. Unity Bank will not accept any liability for any fraud that may be committed as a result of your failure to protect your password & your security token.
> I hereby agree to the terms and conditions here above stated

Account Signatories

Name:……………………………………………………………………………………………………… …………………………..

Signature:…………………………………………………………………………………………Date [ ][ ][ ][ ][ ][ ]
                                                                                              Day   Month   Year

Name:……………………………………………………………………………………………………… …………………………..

Signature:…………………………………………………………………………………………Date [ ][ ][ ][ ][ ][ ]
                                                                                              Day   Month   Year

Name:……………………………………………………………………………………………………… …………………………..

Signature:…………………………………………………………………………………………Date [ ][ ][ ][ ][ ][ ]
                                                                                              Day   Month   Year

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Bank Use Only

Processing Branch: Name:……………………………………………………………………………… ……………Code: [ ][ ][ ]

Token Serial Number [ ][ ][ ][ ][ ][ ][ ][ ][ ]   Token Charges Paid₦…………………………………………………..

Token Delivered By:………………………………………………………………………………..Signature:………………...

Verified By CSO

Name:………………………………………………………………………………………………Signature:………………….

Staff Id [ ][ ][ ][ ][ ]   Stamp/Date [ ][ ][ ][ ][ ][ ]
                                                                    Day   Month   Year

Authorized By BSM

Name:………………………………………………………………………………………………Signature:………………….

Staff Id [ ][ ][ ][ ][ ]   Stamp/Date [ ][ ][ ][ ][ ][ ]
                                                                    Day   Month   Year