



APPLICATION FOR DORMANT ACCOUNT REACTIVATION

DATE:

I / we hereby apply for the reactivation of my/our Current/Savings Account with your Bank which has been dormant for some time.
The particulars are set as follows:

ACCOUNT

ACCOUNT NUMBER:

NATURE OF BUSINESS:

PHYSICAL ADDRESS:

TELEPHONE NUMBER:

REASON FOR ACCOUNT DORMANCY:

I / We intend to resume normal operation on the account forthwith in accordance with the terms and conditions obtained in the Account Opening Documents already submitted to your bank.

Kindly approve my / our application for reactivation.

Yours faithfully;

NAME	AUTHORISED SIGNATORY
1	
2	
3	

FOR BANK USE ONLY

BRANCH ACCOUNT IS DOMICILED:

ACCOUNT BALANCE:

VISITATION DONE BY:

OUTSTANDING DOCUMENTATION:

VERIFIED BY (CSO) _____

SIGNED : _____

APPROVED (BRANCH SUPERVISOR) _____

SIGNED: _____