

TOKEN REQUEST FORM



RC: 1259460

DATE:
Day Month Year

ACCOUNT NUMBER

ACCOUNT NAME _____

EMAIL ADDRESS _____
As registered with the Bank

MOBILE NUMBER _____

ORIGINATING BRANCH _____
Branch where request is submitted for processing (e.g. Allen, Lekki...)

Tick as appropriate

Hardware token
(Cost:N1500/token)

Verification by SMS
(Cost:N4perSMS)

Verification by Email
(EmailIndemnityisrequired)

ACCOUNT TO DEBIT

I/WE authorize the bank to debit my account with the cost of token / verification as ticked above.

AUTHORISED SIGNATURE

AUTHORISED SIGNATURE

For official use only

INITIATED BY _____
(CSE, NAME/SIGN)

AUTHORISED BY _____
(SM, NAME/SIGN)

eBank Services Affected

Tick as appropriate

Retail Internet Banking

Corporate Internet Banking

Others _____

ACTIVATED BY _____
(NAME/SIGN)

AUTHORISED BY _____
(NAME/SIGN)