WEMA BANK
RC 575

ACCOUNT CONVERSION FORM

New Account Type

- ☐ EasyLife
- ☐ Moment
- ☐ Savings
- ☐ WTA
- ☐ Current
- ☐ Prestige
- ☐ Prestige+
- ☐ Others (please specify) _____

*NEW ACCOUNT NO. (FOR OFFICIAL USE ONLY) ☐☐☐☐☐☐☐☐☐☐

*WHERE A NEW ACCOUNT NUMBER IS GENERATED

THIS FORM SHOULD BE COMPLETED IN CAPITAL LETTERS BY A CUSTOMER WHO WANTS TO CHANGE HIS EXISTING ACCOUNT TO ANOTHER ACCOUNT TYPE

EXISTING ACCOUNT NO. ☐☐☐☐☐☐☐☐☐☐

Title ☐☐☐☐☐☐☐☐☐ Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

First Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Other Name ☐☐☐☐☐☐☐☐☐☐☐☐☐

Personal Information

Marital Status: (Please tick as applicable) Single ☐ Married ☐ Others (please specify) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Nationality ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ State of Origin ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Mother's Maiden Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Residential Address ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Phone No. 1 ☐☐☐☐☐☐☐☐☐☐☐☐☐ Phone No. 2 ☐☐☐☐☐☐☐☐☐☐☐☐☐

E-mail Address (Optional) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Valid Means of Identification

National ID Card ☐ National Driver's Licence ☐ International Passport ☐ INEC Voter's Card ☐

*Others (Please specify) ☐☐☐☐☐☐☐☐☐☐☐☐☐ ID No. ☐☐☐☐☐☐☐☐☐☐☐☐☐

ID Issue Date D D / M M / Y Y Y Y ID Expiry Date D D / M M / Y Y Y Y

* Students and others who may not have the prescribed IDs.

Employment Details

Employment Status Employed ☐ Self-Employed ☐ Unemployed ☐ Retired ☐ Student ☐

Date of Employment (if employed) D D / M M / Y Y Y Y

Business/Employer's Name _____

Business/Employer's Address _____

Nature of Business/Occupation _____

Next of Kin Details

Title ☐☐☐☐☐☐☐☐☐ Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

First Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Other Name ☐☐☐☐☐☐☐☐☐☐☐☐☐

Date of Birth D D / M M / Y Y Y Y Gender: F ☐ M ☐ Relationship ☐☐☐☐☐☐☐☐☐☐☐☐☐

Phone No. 1 ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Phone No. 2 ☐☐☐☐☐☐☐☐☐☐☐☐☐

E-mail ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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ACCOUNT CONVERSION FORM

ACCOUNT SERVICE(S) REQUIRED (PLEASE TICK AS APPLICABLE BELOW)

Debit Card: Verve Card ☐ MasterCard ☐ Visa Card ☐

Transaction Alert Preferences: E-mail (Free) ☑ SMS (Charges apply) ☐

Statement Frequency: Monthly ☑ Quarterly ☐ Semi-annually ☐ Annually ☐
*Checked banking services are provided automatically once account is opened.

Statement Preference: E-mail ☑ Post ☐ Collection at Branch ☐

Cheque Book Requisition: (Fees apply) Open Cheque ☐ 50 Leaves ☐ 100 Leaves ☐

Cheque Confirmation: Would you like to pre-confirm your cheques? Yes ☐ No ☐

Cheque Confirmation Threshold If the answer to the above is yes, please specify the threshold ☐☐☐☐☐☐☐☐☐☐☐☐
Minimum confirmation threshold is currently N150,000.00

DECLARATION

I/We hereby request for the conversion of my/our existing account with Wema Bank Plc. I/We understand that the information given herein and the documents supplied are the basis for operating such account(s) and I/we therefore warrant that such information is correct. I/We understand that this request may require the Bank to close my/our existing account and open a new account on my/our behalf. I/We further undertake to indemnify the Bank for any loss suffered as a result of any false information or error in the information provided to the Bank. I/we also agree to abide by the terms and conditions specified for the new account type.

1. Name _____

Signature _____

Date D D / M M / Y Y Y Y

2. Name _____

Signature _____

Date D D / M M / Y Y Y Y

FOR OFFICIAL USE ONLY

REQUIREMENT CHECKLIST

S/N	Document Required	Existing	Updated	Deferred
1	Duly completed Account Opening Form	☐	☐	☐
2	Specimen signature card duly completed	☐	☐	☐
3	One (1) recent Passport Photograph	☐	☐	☐
4	Proof of Identity: Int'l passport, Driver's Licence, National ID Card, Valid Nigerian Voter's Card (Original must be sighted)	☐	☐	☐
5	Proof of Address: Utility Bills, etc. (Certified true copy is acceptable if original is not held)	☐	☐	☐
6	Letter from Employer/School/NYSC (for salary account or student account)	☐	☐	☐
7	One (1) Independent and Satisfactory Reference (for Wema Treasure Account Only)	☐	☐	☐
8	Two (2) Independent and Satisfactory References (all variants of current account)	☐	☐	☐
9	Other documents provided			

DEFERRAL BY: _____
(Name)
_____
Signature & Date

REVIEWED BY: _____
(Name)
_____
Signature & Date

APPROVED BY: _____
(Name)
_____
Signature & Date

RCO'S CONCURRENCE: _____
(Name)
_____
Signature & Date