## **African Banking Corporation Ltd**



## ACCOUNT REACTIVATION REQUEST FORM

Branch			Date			
	•					
	` '	unt (s) which is/are inactive/				
due to						
When reactivated,	I / We shall ensure that the	e same is operated as per th	e Bank's requirements.			
2. CONTACTS UI	PDATE	· ·	<u>.</u>			
		COMPANY/ENTITY I	INFORMATION			
Company/Entity Name	:		KRA/PIN Number			
			TIN (Foreigners)			
Preferred Mobile No (SMS Alerts):Preferred Email Address:			Alternative Mobile No:			
			P.O. Box:	Postal code:		
Nature of Business:			Town/City:	Country:		
Tatale of Basilessi			•	country:		
FIRST APPLICANT		INDIVIDUAL/SIGNATO	KY INFORMATION			
			ID No. / Passport No/ Alien Certificate No/			
Mobile No:			KRA/PIN Number			
Email Address:			TIN (Foreigners)			
Occupation:			Nationality Country			
Postal Address:Town/City			Update New Signature			
Residential Address:						
SECOND APPLICANT			ID No. / Passport No/			
Name:			Alien Certificate No/			
Mobile No:			KRA/PIN Number			
Email Address:			TIN (Foreigners)			
Occupation:			Nationality Country			
Postal Address:	Town/0	City	Update New Signature			
Residential Address:						
Data Protection Priv	vacy Notice	atui atlu fou ou u ou u u o in line with	the Data Duetostian Ast No. 24	4 of 2040, our Driver Delievend	the Drive ou Netice and very	
consent to the application	n of the Data Protection Act No. 2	strictly for our own use in line with 4 of 2019 and the Bank's Privacy Pol can be found on our website or witl	icv and the Privacy Notice to a	Ill information provided to the B	ank. This Privacy Notice may	
De updated from time to to Data Protection Officer or	r kindly contact us at ABC Bank Ho	can de found on our website or witi ouse, Woodvale Grove, Westlands, P	n our customer care represent P. O. Box 38610 – 00800, Nairo	bi addressed 'for the attention o	of the DPO'.	
3. AUTHORIZATION	ON: To be signed accord	ling to account mandate	held with the Bank			
	Authorized Cieroture			Authorinod Ciarostura		
FOR OFFICIAL R	Authorized Signature			Authorized Signature		
FOR OFFICIAL B						
	identified by; Name: _	<b>T</b>		Signature		
Prepared by:		Designation:	Signature:		Date:	
Authorized by:		Designation:	Signature:		Date:	
СВО:	Nature of Activity	Executed by	Signature	Verified by	Signature	
Date	Data Capture					
Date	Image scanning					