

BVN UPDATE FORM

Bank Verification Number (BVN)

Account Number

Surname

First Name

Middle Name

Mobile Phone number

 Special needs: Yes No If yes, explain

Select Request

 Linking

 Change of BVN Details

Correction details

Kindly complete table below for change in details

Change required (tick as applicable)

 Name

 Date of Birth

 Phone Number

 Gender

Current Detail	New Detail	Reason for Change

Agreement Clauses

- I agree to submit Biometric information to the bank as may be reacquired for account opening and operation purposes, to authenticate and enhance security of my account and transaction from time to time.
- I understand that a Biometric is a unique physiological data such as fingerprint, iris and hand scan or face and voice recognition, used to positively identify a particular person.
- I hereby attest the above information is true and complete and equally authorise UBA to update my details accordingly.

Disclaimer Clause

I understand that the bank may be obliged to disclose my information/details including my Biometric details to regulators, law enforcement agencies and such other bodies as may be entitled to request for same. While UBA will exercise due care to ensure that biometric information are kept secure, UBA shall not be liable for any disclosures made pursuant to law or other regulatory directives.

 Signature & Date

For Bank Only

 Finger print verification on ZF1 device
 Validation on NIBSS Portal
 Verification with details on Core Banking Application

We have checked and confirmed all processes ticked above to be complete and accurate in line with the policy provision of the Bank. We also take responsibility for any error(s) emanating from modifying unverified BVN linked to account.

Customer ID: _____

Verified by: _____

Name

 Signature & Date

Approved By (BOM): _____

 Name

 Signature & Date