

TO: The Managing Director,
United Bank for Africa Plc
57, Marina,
Lagos.

INDEMNITY

WHEREAS:

1. I, am the holder of Account No. maintained with your Business Office (my Account).
2. At my request, United Bank for Africa Plc (UBA) issued an ATM Card linked to my Account to facilitate my accessing my Account electronically.
3. That for personal and logistic reasons, I am unable to visit the Bank to personally collect and activate the ATM Card linked to my Account and change my PIN on your Kimono application at the branch and I have requested that the ATM card be handed over to of (my Authorized Representative) and that he be allowed to change my PIN at the branch.
4. UBA has informed me of the risk associated with third party access to my ATM Card and PIN details but I have insisted that my request for the release and activation of my ATM Card by my Authorized Representative should be granted.
5. In view of my request, UBA has requested that I indemnify it for the risk of having my ATM card picked up and PIN changed by another person.

NOW, in consideration of you, **UNITED BANK FOR AFRICA PLC** agreeing to allow to collect my ATM Card and to change the PIN for my ATM Card on my behalf, I, of hereby:

1. Undertake to indemnify you and keep you indemnified against any damages, costs and expenses whatsoever including all legal and other costs, charges and other expenses you may incur by reason of your allowing my Authorized Representative to change the PIN on my behalf.
2. Agree that the Bank has informed me of the risk of compromise of the confidential details of my ATM Card and my Personal Identification Number (PIN) which should only be known to me.
3. Declare that the Bank will not be liable for any compromise of my ATM Card and PIN or any withdrawals, on-line purchases or transactions arising from the use of the ATM Card.
4. Agree that you may at any time without notice to me, set off or transfer any sum or sums standing to the credit of any one or more of my

accounts with you in or towards the satisfaction of my liabilities to you arising out of your allowing my Authorized Representative to change my PIN.

5. Agree that if I fail to pay on demand any sums payable hereunder, that interest shall accrue thereon from the date of such demand until judgment and full liquidation at your Prime Lending Rate.
6. Agree that no delay or omission or granting of any indulgence on your part in exercising any right power, privilege or remedy in respect of this indemnity shall be construed as a waiver thereof, nor shall any single or partial exercise of any other right, power, privilege or remedy preclude any further exercise of any right, power, privilege or remedy.
7. The rights, powers, privileges or remedies provided in this indemnity are cumulative and not exclusive of any rights, powers, privileges or remedies provided by the law.

Dated this day of 2015.

SIGNED, SEALED & DELIVERED

By the within named

.....

In the Presence of:

Name:

Occupation:.....

Address :.....

Signature: