

## BVN LINKAGE FORM

Date:

D	D	M	M	Y	Y	Y	Y

Kindly link my BVN to the account details provided below:

Account Name

Account Number 1

Account Number 2

Account Number 3

Bank Verification  
Number

Phone Number

Authorised Signatory

Date:

D	D	M	M	Y	Y	Y	Y

## OFFICIAL USE ONLY

Initiator

Staff No.

Date:

D	D	M	M	Y	Y	Y	Y

Signature

Authoriser

Staff No.

Date:

D	D	M	M	Y	Y	Y	Y

Signature