

DORMANT ACCOUNT REACTIVATION FORM



Guaranty Trust Bank (UK) Limited

Date:

d	d	m	m	y	y	y	y
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ACCOUNT INFORMATION

Sort Code

6	0
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8	3
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 -

0	3
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Cust No

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Reason (s) for dormancy: Proximity Out of town Dissatisfaction others _____

CUSTOMER INFORMATION

Account Name: _____

DOB:

d	d	m	m	y	y	y	y
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Residential Address: _____

Mobile No: _____ Home No: _____

My account(s) has been inactive for over 12 months. I wish to resume transactions on my account. Kindly take this as authorities to re-activate my account. I understand that I am required to process either a deposit or a withdrawal as part of the account re-activation process. I also confirm that the above information is correct.

Thank you

Authorised Signatory

Authorised Signatory

FOR OFFICIAL USE ONLY

Last Transaction Date

d	d	m	m	y	y	y	y
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Account Status Closed Dormant Deleted

Action Taken Account re-activated Docs required

Sign Off: _____

Head of Customer On-Boarding

Head of Operations