## **Online Re-Activation Form**



| Customer's Name:   |
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| Account Name:  |
| Account Number:  |
| Email:   |
| Telephone Number:  |
| Mobile Money Number:   |
| Mobile Network:  |
| Date of Birth:   |
| TIN (Tax Identification Number)  |
| Test Questions   |
| 1. Balance in Account:   |
| 2. Last three withdrawals:   |
| 3. Address used when account was opened:   |
| 4. When & where was the Account opened:  |
| 5. Reason for non-operation of account(s)  |
| Signature:   |
| Please tick here to agree to link your Mobile Money Wallet to your account. This will allow you to fund the account without visiting a branch. Funding your account is a mandatory part of the reactivation process. |