

ACCOUNT REACTIVATION FORM

Account Holder details

Names	
Account No.	
Phone No.	
ID/Passport No.	
Address	

Reason for Absence

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Signature _____ Date _____

BANK USE ONLY

Last movement date:		Balance on Acc:	
Chapter:		Charges recovered	Yes ☐ No ☐
Recommended by:		Signature and date	
Approved by:		Signature and date	