



# **APPLICATION FORM - BUSINESS**

PART ONE - SECTION A: PERSONAL INFORMATION	
Personal Account No.:	BVN:
Name:	Bank:
Date of Birth: Marital Status:	Gender:
	V
Installation Address:	
Length of stay at residence: Type of Reside	nce: Owned 🗌 Rented 🗌
ID Type: National ID 🗌 Permanent Voter's Card 🗌 National	I Driver's License
ID Expiry Date: ID No	
SECTION B: BUSINESS INFORMATION - Authorized Person only	
Business Name:	
Business Address:	
Business Registration Number:	
Annual Turnover: Avg.	Monthly Turnover
Date of Incorporation:	Business Ownership Sole 🗌 Partnership 🗌
Official Email:	_ Tax ID:
Nature of Business (Brief):	

## PART TWO - REQUEST DETAILS

SN	POWER SOLUTION DESCRIPTION	VENDOR	AMOUNT
VALUE ADDED TAX (VAT)7.5%			
TOTAL COST OF GOODS			







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### **PROMISE TO PURCHASE/LEASE**

I hereby covenant with The Alternative Bank, to purchase the renewable energy product(s) stated above on deferred payment terms (murabaha/ijarah) and complete the sale/lease under the murabaha/ijarah contract which shall be executed as per the murabaha/ijarah agreement upon delivery of these terms.

5 ,				
Signature:	Date:			
In accordance with the Terms and Conditions of the agreement, I				
Signature:	Date:			
SIGN OFF BY CUSTOMER				
Name of Signatory:				
Signature of Applicant:	Date			

Signature:	Date:
SIGN OFF BY CUSTOMER	
Name of Signatory:	
Signature of Applicant:	Date
Name of Signatory (Additional Signatory):	
Signature of Applicant:	Date

## DECLARATION

In

### You make the following declaration to us:

The deferred payment contract is governed by this application form and the terms and conditions attracted hereto. The acceptance of your application for deferred payment sales shall be at the discretion of the Bank and we shall not be obliged to furnish reasons to you should your application not be accepted. If we accept your application, we will let you know in writing.

I/we am/are at least 21 years of age.

I/we confirm that all the details given in this application are true and complete and I/we understand that these will be used to form the basis of any financina offered.

I/we authorize you to conduct any enquiry you consider necessary and appropriate for the purpose of evaluating this application from my/our employer, if any and from any other source to which you may apply including a credit search with one or more credit reference agencies, and confirm that I/we am/are not currently under administration, sequestration, debt review, or a restructuring order.

I/we accept that any facility offered to me/us is complete and The Alternative Bank may withdraw, revise or cancel such offer at anytime before, during or after acceptance of the offer.

I/we undertake to notify the Bank immediately in writing of any situation which materially changes the representation of this application, and I/we understand that the Bank may amend or withdraw any offer previously made.

I/we understand that The Alternative Bank will disclose my/our details to any Altbank insurers, auditors, professional advisers or any persons providing services to The Alternative Bank

relevant regulatory body as envisaged by this application form or with my/our written consent.

I/we acknowledge that Altbank may at anytime transfer The alternative Bank's stake in the facility, together with any security I/we give, to any other lender bank or institution without first seeking my/our permission and I/we authorize Altbank to disclose any information which Altbank holds/possesses about me/us to such entity.

I/we hereby authorize Altbank to disclose any and all information in respect of my/our account to the guarantors for as long as the guarantor's liability of the debt outstands.

I/we agree that by taking up all or part of any facility offered by The Alternative Bank on the basis of the information provided on this application form and by signing this form, I/we agree to accept all the conditions set out in Altbank's facility offer letter. I/we agree that if I/we receive more than one letter, the letter showing the latest date will be that which applies.

I/we understand that the Bank may set off any amounts due under the agreement against any sums owing by me/us to Altbank (whether jointly or severally) and otherwise combine and consolidate all or any of my/our accounts with Altbank at any branch of the Bank and whether current, deposit, loan or any other nature and whether accounts in my/our name or jointly with others and whether in any other currency. Any currency conversions required to be effected by Altbank in pursuant to this right shall be effected in accordance with the usual practice of the Bank.

I/we have personally completed this application form, or if completed by someone else, have read and checked every answer and I/we have appended my/our signature fully understanding the implication of the wordings and terms so contained.

I/we hereby confirm my/our application for the above facility and certify that all information provided by me/us above and attached thereto is correct and complete. The facility shall not be utilized for any act of terrorism or other illegal or prohibited acts.

I/we authorize you to make any enquiry you consider necessary and appropriate for the purpose of evaluating this application.

### FOR OFFICIAL USE ONLY

Name of Relationship Manager:

Signature of Relationship Manager: