



DIASPORA ACCOUNT REACTIVATION FORM.

Please activate my account. I have not been able to operate it for more than _____ months/years.

Reason _____

DIASPORA CUSTOMER DETAILS

ACCOUNT NAME	
ACCOUNT NUMBER	
ID/PP NUMBER	
TELEPHONE NUMBER	
E-MAIL ADDRESS	

VERIFICATION DETAILS FOR THE LAST 3 TRANSACTIONS

	DATE	TRANSACTION DETAILS	AMOUNT
1			
2			
3			

Other Information

Next of KIN: _____ Relationship _____ Contacts _____

Physical /Postal Address _____

Postal Code _____ Country _____

Applicants Signature _____ Date _____

NB: Kindly attach a scanned image of Identification document or Passport used at account opening.

For Official Use Only

Call Back: Tel. Number _____ Date _____ Signed _____

Received By _____ Verified By _____

Authorized _____ Declined (Reason) _____