



ZENITH GENERAL INSURANCE COMPANY LIMITED

(A Subsidiary of ZENITH BANK PLC.)

Plot 280A, Ajose Adeogun Street, P. O. Box 75315, Victoria Island, Lagos .

Tel: +234 - 1 - 2701004-5.4613704, Fax: 4613705

CORPORATE CLIENT

Corporate Information

Company's Name:.....

Operating Business Address:.....

State:..... City:..... Incorporation Number:.....

Type of Business:..... Postal Code:.....

Operating Business Phone: Fax

Registered Business Address:.....

City:..... State:..... Country:.....

E-Mail:.....

Incorporation State:..... Country:.....

Financial Year End: Date:..... Month: Year:.....

Last Audited/Unaudited Account: Date:..... Month: Year:.....

Authorised Capital ('000):.....

Paid-Up Capital ('000):.....

Banker:.....

Personal Details of Directors

(This is similar to the detail to be supplied by individual clients)

Title:

Surname:.....

First Name:..... Middle Name:

Gender: Male:..... Female:..... Date of Birth (DD-MM-YYYY).....

Mother's Maiden Name:.....

Contact Address:.....

City:..... State:..... Country:..... Tel. No.:..... E-mail.....

Identification: Driver's License..... National ID:..... International Passport:.....
(Copy of Identification document to be submitted)

Identification Number:..... State of Origin:.....

Occupation:.....

Employer Name:.....

Employer Telephone Number:..... Employer Address:.....

City:..... State:..... Country:.....

For Official use only

Underwriter's signature/Date.....

Compliance Officer Signature/Date:.....

HOD's Signature/Date:.....