

CUSTOMER WELCOME BACK FORM



A valid ID card is required to complete request

Proxy: Yes: No:

DATE:/...../.....

SURNAME:		FIRST NAME:	
MIDDLE NAME:		MOTHER'S MAIDEN NAME:	
ADDRESS:			
PHONE NUM:		ALTERNATIVE NUM:	
EMAIL:		OCCUPATION:	
YEAR OF ACTIVATION:		LAST RECHARGE AMOUNT & DATE:	
TARIFF PLAN:		AMOUNT..... DATE.....	
L.G.A OF RESIDENCE:		DATE OF BIRTH:	
STATE OF ORIGIN:		L.G. AREA:	
NATIONALITY:		GENDER:	
DATE:		SIGNATURE:	

PLEASE WRITE FOUR (4) NUMBERS YOU FREQUENTLY CALL

1: Proxy Name:

2: Proxy Address:

3: Proxy Phone No:

4:

Please select means of identification: Driver's License: Voters Card:

International Passport: National ID Card: Others:

OFFICIAL USE ONLY

- 1: Security Number Provided? [YES] [NO]
- 2: Registered Customer? [YES] [NO]
- 3: Biometrics available on KYC Manager/CLM? [YES] [NO]
- 4: SIM Kit or Welcome back pack provided? [YES] [NO]
- 5: ID card picture matches customer's face? [YES] [NO]

CUSTOMER CARE REP NAME & SIGN.....Date...../...../.....