

REACTIVATION OF DORMANT ACCOUNT FORM
Joint account / Institution



Date Branch _____

Customer's Details:

Customer's Full Name
.....

Residential address
.....

Postal Address
.....

Mobile/Telephone Number..... Mobile Network operator.....

Account Number..... ID Type & Number.....

For the improvement of our services and customer experience, please give us reasons of not operating your account for the past 5 months.

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.....

Added Services
Link Account with mobile banking. If you didn't have the service

- Customer is responsible providing current and correct cell phone number to Access Bank Tanzania
- The bank shall not be held responsible or accountable for any losses that may occur as a result of the customer's negligent while using of this facility.
- All transactions made through mobile banking shall be considered made by the respective customer.
- The bank has no control over who may access customer's information through mobile phone and will not be held accountable for such unauthorized use.
- Customer must inform the bank immediately if phone is stolen, disconnected, suspended or changed.
- Customer is required to notify Access Bank Tanzania within 24 hours of knowledge of any irregularities, failure to that shall deem to have authorized the transaction and will be liable for the transaction. Will be responsible to prove that customer was not negligent in notifying Access Bank Tanzania.

DECLARATION BY THE APPLICANT 1 : (for Mobile Banking Registration only)

I..... Hereby wish to apply for the Access Bank Tanzania Mobile banking service from Access Bank Tanzania Limited. I accept and agree to be bound by the terms and conditions of use mentioned. I accept Access Bank Tanzania may at any time vary the terms and condition. I hereby waiver any right of contesting in respect there and agree to be bound by the same. I warrant that the information given above is true and complete. I agree that I am liable for all charges incurred using this Access Bank Tanzania Mobile Banking service. I hereby indemnify Access Bank Tanzania against all losses that may incur as result of my use of Access Bank Tanzania Mobile Banking service. I understand that Access Bank Tanzania reserves the right to decline the application without giving reasons.

Customer's Signature..... Date

DECLARATION BY THE APPLICANT 2 : (for Mobile Banking Registration only)

I..... Hereby wish to apply for the Access Bank Tanzania Mobile banking service from Access Bank Tanzania Limited. I accept and agree to be bound by the terms and conditions of use mentioned. I accept Access Bank Tanzania may at any time vary the terms and condition. I hereby waiver any right of contesting in respect there and agree to be bound by the same. I warrant that the information given above is true and complete. I agree that I am liable for all charges incurred using this Access Bank Tanzania Mobile Banking service. I hereby indemnify Access Bank Tanzania against all losses that may incur as result of my use of Access Bank Tanzania Mobile Banking service. I understand that Access Bank Tanzania reserves the right to decline the application without giving reasons.

Customer's Signature..... Date

DECLARATION BY THE APPLICANT 3 : (for Mobile Banking Registration only)

I..... Hereby wish to apply for the Access Bank Tanzania Mobile banking service from Access Bank Tanzania Limited. I accept and agree to be bound by the terms and conditions of use mentioned. I accept Access Bank Tanzania may at any time vary the terms and condition. I hereby waiver any right of contesting in respect there and agree to be bound by the same. I warrant that the information given above is true and complete. I agree that I am liable for all charges incurred using this Access Bank Tanzania Mobile Banking service. I hereby indemnify Access Bank Tanzania against all losses that may incur as result of my use of Access Bank Tanzania Mobile Banking service. I understand that Access Bank Tanzania reserves the right to decline the application without giving reasons.

Customer's Signature..... Date

Request verified and approved by:

Team leader/Branch Manager: Name..... Signature.....

Account Reactivated by:

Back-Office Admin: Name..... Signature.....