

Virtual Channel Enrollment Form Ver. 001

Account Type: Individual Current Corporate

Request Date:

First Name:

Surname:

Address:

Account Number 1: Account Number 2:

Account Number 3:

Preferred User ID 1: Preferred User ID 2:

This would be your log-in name. it should not be more than 10 characters. Please specify the alphanumeric users ID you would like to use to log-in to www.ubadirect.com in other of preference. You may be assigned a different User ID where your preferences are not available.

Telephone Number:

E-mail Address:

Account Signatory: (Corporate Account only) YES NO

(In case you forget your log-in access. Please enter your Test Questions and Answer to be supplied by you)

Test Question:

Answer:

CHANNEL REQUEST

*U-Direct Signature: _____ U-Mobile Signature: _____

E-Mail Alert Signature: _____ E-statement (Monthly) Signature: _____

Telephone Banking Signature: _____ SMS Alert Signature: _____

Alert me for Transaction greater than: N All Debit Transactions All Credit Transactions Both

Charges: Enrolment to this service is FREE.
*Access charges of N100 will be deducted monthly from your account. Other charges may be levied for funds transfer and specific transactions. Please refer to the website (<https://www.ubadirect.com>) for further information.

DISCLAIMER

- User acknowledges that the alert and other information sent to him or accessed by him contain confidential information and should such information be sent to a third party through no fault of UBA Plc, UBA shall not be held liable.
- UBA will not be liable for non delivery or delayed delivery of alerts, emails, errors or losses or distortion in transmission of alerts and emails to the USER. UBA shall not be liable for lack of receipt of alerts due to technical defects on customer's phone or computer or any damage or loss incurred by the USER as a result of causes not directly attributable to UBA.
- UBA shall not be liable to the user, or to any third party for any drawing, transfer, remittance, disclosure, or any activity, or incidence on the user's account, whether authorized by the user or not, PROVIDED that such drawing, transfer, remittance, disclosure, or any activity, or incidence was user authorized or made possible by the fact of the knowledge and/ or use, or manipulation of the user's password, or otherwise by the user's negligence. User acknowledges that his password shall be known only to him and kept secret at all times.
- In the event of loss or theft of the phone or compromise of the security of the provided email account, the user shall call CIC hotline or email CIC@ubagroup.com and immediately notify the Bank in writing within 24 hours of the loss/theft of phone or computer and email/password compromise.
- UBA in its absolute discretion and without prior notice can temporary suspend this, any or all of the service or terminate them completely.

I hereby confirm that I have read and understood the above terms and conditions of the Virtual Banking Service and I agree to be bound by same.

Authorised Signatory _____

For Bank Use Only: Kindly ask the Customer:

- Has She/He previously signed up on this application? YES NO
 - If YES, Ask the Customer to indicate His/Her user ID
 - If NO, process Form 001
- *If customer can not remember User ID, then access Finacle to retrieve ID: Treat as PIN reset.*

Signature Verified by

Name _____
Signature _____