



New KOSOL Cooperative Society LTD.

Head Quarter: No 5 ASACS Road beside First Bank, Bwari FCT Abuja,
Tel: 08140604882, 07080328155, 09095958232, 08079460311, 08028713122, 07085201697

CHANGE OF INFORMATION FORM

DATE: _____

New KOSOL Account Number: _____ Name: _____

Request Type. Please tick the type of change you require.

a) **Change of Name (Kindly attach required documentation)**

Previous Name: _____

New Name: _____

b) **Change of Next of Kin**

Previous NOK Name and Address: _____

New NOK Name _____ Phone Number: _____

Address: _____

c) **Change of Telephone Number**

Previous Telephone Number: _____ New Telephone number: _____

d) **Change of Bank Details**

Previous Bank Name: _____ New Bank Name: _____

Account Name: _____ New Account Name: _____

Account number: _____ New Account Number: _____

e) **Change of Signature**

Previous Signature:

New Signature:

Authorize Signature

Authorize Signature

----- Office Use Only -----

Processing officer: _____ Signature: _____

Approved by: _____ Signature: _____