

(A member of the Nigerian Stock Exchange)

Account Opening Form

photograph

NB Please complete the form in full

APPLICATION TYPE

INDIVIDUAL:

JOINT:

(2 applicants max)

PERSONAL DETAILS – ACCOUNT APPLICANT

TITLE: (Mr./Mrs./Ms/Dr/Others): _____

SURNAME: _____

FIRST NAME: _____

MIDDLE NAME: _____

DATE OF BIRTH: (DD/MM/YY): _____

STATE / LOCAL GOVERNMENT: _____

COUNTRY: _____

CITIZENSHIP: _____

NIGERIAN RESIDENT: Yes

No

MARITAL STATUS: Single

Married

Other:

MOTHER'S MAIDEN NAME: _____

RESIDENTIAL ADDRESS: _____

MAILING ADDRESS: _____

DO YOU OPT FOR DIRECT CREDIT INTO YOUR ACCOUNT AFTER SALES?

Yes

No

GUARDIAN / NEXT OF KIN: _____ RELATIONSHIP: _____

NEXT OF KIN'S CONTACT DETAILS: _____

NEXT OF KIN'S TELEPHONE NUMBER: _____

EMPLOYMENT DETAILS

NAME OF EMPLOYER (Or if self – employed): _____

EMPLOYER 'S ADDRESS: _____

OCCUPATION: _____

CONTACT DETAILS

We may contact you by telephone to verify your details or discuss your trade instruction which may be time and price sensitive. For this reason, please provide us with your mobile number and one alternative contact number.

It is very important that we have your email address as we will use this to send you information such as:

- Trade confirmations
- CSCS statements
- Any other important notifications.

Please note that failure to provide an email address may limit our ability to provide you with the above.

MOBILE TELEPHONE NUMBER: _____

ALTERNATIVE TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

PERSONAL DETAILS – JOINT APPLICANT (IF ANY)

TITLE: (Mr./Mrs./Ms/Dr/Others): _____

SURNAME: _____

FIRST NAME: _____

MIDDLE NAME: _____

DATE OF BIRTH (DD/MM/YY): _____

STATE / LOCAL GOVERNMENT: _____

COUNTRY / NATIONALITY: _____

CITIZENSHIP: _____

NIGERIAN RESIDENT: Yes No

MARITAL STATUS: Single Married Other

MOTHER'S MAIDEN NAME: _____

RESIDENTIAL ADDRESS: _____

MAILING ADDRESS: _____

DO YOU OPT FOR DIRECT CREDIT INTO YOUR ACCOUNT AFTER SALES? Yes No

GUARDIAN / NEXT OF KIN: _____

NEXT OF KIN'S TELEPHONE NUMBER: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMPLOYMENT DETAILS

NAME OF EMPLOYER (or if self – employed): _____

EMPLOYER'S ADDRESS: _____

OCCUPATION: _____

CONTACT DETAILS

We may contact you by telephone to verify your details or discuss your trade instruction which may be time and price sensitive. For this reason, please provide us with your mobile number and one alternative contact number.

It is very important that we have your email address as we will use this to send you information such as:

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MOBILE TELEPHONE NUMBER: _____

ALTERNATIVE TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

INVESTMENT AMOUNT (please indicate the amount you would like to invest): _____

FUNDS (Please tick below the source (s) of this income:

Type	Expected Annual Amount	Type	Expected Annual Amount
Salaries		Sale of Property	
Business Income		Others*	

BANK ACCOUNT DETAILS

BANK ACCOUNT NAME: _____

BANK INSTITUTION: _____

BANK BRANCH: _____

ACCOUNT NUMBER: _____ **BVN:** _____

DATE OF BANK ACCOUNT CREATION: _____

BANK SORT CODE: _____

CHARACTER REFERENCE: (Kindly include telephone number, address and other contact details of 1 referee)

_____ A _____

Signature & Date

OFFICIAL STAMP

KYC ("KNOW YOUR CUSTOMER")

Standard Union Securities Limited is required by law to establish the identity and confirm the address of every prospective client.

Proof of Identification – Please provide any one of the following. Please select the relevant box		Address Confirmation – Please provide any one of the following. Please select the relevant box.	
Current International Passport:		Bank Statement:	
Current Driver's license:		Record of Home Visit	
Residence Permit (For Foreigners):		Current Driving License	
Inland Revenue Tax Certificate:		Tenancy Agreement	
Birth Certificate / sworn Declaration of Age:		Solicitor's Letter	
		Search report	

CLIENT ATTESTATION

*I / We hereby confirm that I / We have received, read, understood and agreed too be bound by and comply with:

- a. The TERMS and CONDITIONS (as may be varied or supplemented from time to time) of STANDARD UNION SECURITIES LIMITED (SUSL) and understand the provisions contained therein shall govern my / our relationship, trading accounts and other services provided by SUSL.
- b. Disclaimer
- i. All my/our particulars and the information provided is true and accurate, in form and in substance and any changes will be notified to Standard Union Securities Ltd promptly and I / We have not withheld any material facts.
- ii. I / We am / are over 18 years of age, not insolvent or under any liability and have not been convicted of a serious offence.
- iii. I / We am / are making the application herein for myself / ourselves and not on behalf of any other person or party; And I / We are the legal and beneficial owner of the account applied for.

(For Joint Account Holders)

- i. We request that SUSL open a joint account in our joint names to be operated by [_____] / either one / both of us*. For the avoidance of doubt, any instructions (including trading and settlement instructions), authorization, request, act, admission, agreement or settlement of whatever nature in respect of the operation of the joint account or any transaction hereunder given by [_____] / either one / both of us* shall be binding on the joint account holder and SUSL may act the same.

SIGNATURE OF ACCOUNT APPLICANT AND DATE

SIGNATURE OF JOINT APPLICATION, IF ANY

FOR OFFICIAL USE ONLY	
Date Received:	Approve By: _____ Signature: _____
Name of Client Relationship Officer:	Date of Account Opening: _____
Verification By: _____ Signature: _____	