

INDIVIDUAL ACCOUNT OPENING FORM

Surname _____

Other Names _____

Title (Mr./Mrs./Dr./Chief/others) _____ Date Of Birth _____

Nationality _____

International Passport/Driving License _____

Date of Issue _____ Expiry Date _____

Residential Address _____

Occupation _____

Marital Status _____

Mailing Address _____

Telephone No(s) _____ Mobile No. _____

Fax Number(s) _____

Mother's Maiden Name _____

Name of Spouse (if Married) _____

Address _____

Date of Birth _____ Email ID _____

Telephone No. _____ Mobile No. _____

Next Of Kin _____

Date of Birth of Next of Kin _____ Relationship _____

Address of Next of Kin _____



BANK DETAILS

- 1. Name of the Bank _____
Account Name _____
Address _____
Date Opened _____

- 2. Name of the Bank _____
Account Name _____
Address _____
Date Opened _____

I wish to open an investment account and confirm that the above information is true

Customer Signature _____ Date _____

SIGNATURE MANDATE FORM

PERSONAL DATA

Name _____ Authorized Signatory _____ ('A')
Name _____ Authorized Signatory _____ ('A')
Name _____ Authorized Signatory _____ ('B')
Name _____ Authorized Signatory _____ ('B')

Confirm Signature

A- Signatory

B- Signatory

A- Signatory

B- Signatory

Mandate:

Only "A" should sign _____ YES _____ NO

Only "B" should sign _____ YES _____ NO



"A" and "B" should sign independently YES NO

"A" and "B" should sign together YES NO

Other Mandate Types _____

