



ACCOUNT UPDATE FORM

NGX

Name Individual/Organization:-----

Place of Employment /Designation :-----

Postal Address:-----

Office Address:-----

Home Address:-----

Phone No:-----Mobile:-----E-mail:-----

Mother's Maiden Name:-----

Int'l Passport/Driver's License/National ID/RC No:-----Nationality:-----

Name Of Next Of Kin :-----Relationship:-----Phone:-----

State of Origin:-----Local Govt:-----Town/Village-----

Date of Birth/Incorporation/Registration:DD/MM/YYYY-----Tax Identification Number (TIN):-----

CSCS Account Number:-----CHN Number:-----

Bank Name:-----Account No:-----Account Name:-----

BVN:-----Date Account Opened:DD/MM/YYYY:-----

Purpose Of Account:-----

Source of Fund:-----

Authorized Signatories:

(1) Name:-----Signature:-----

(2) Name:-----Signature:-----

Attach the photocopy of following: Individuals - Driver's License or International Passport or National I.D. and Utility Bill.
Corporate: - Copies of Certificate of Incorporation, M EMART, Form C07, Form C02, Passport Photographs of two Directors, Board Re solution authorizing the opening of the account, Mandate list.

Undertaking:

I/We hereby authorize the company to manage a stockbroking account on my/our behalf.
I/We undertake to settle all outstanding dues as a result of my/our sell or buy mandate. Failing which the company is authorized to sell/hold such stocks/monies as may be adequate to offset any outstanding.

Name:-----Signature:-----Date:-----

Name:-----Signature:-----Date:-----

INFORMATION SUPPLIED WILL BE VERIFIED.

For Official Use Only

Relationship Officer-----Signature & Date:-----

Compliance Officer:-----Signature & Date:-----

Approved by:-----Signature & Date:-----

