



**NIGERIAN INTERNATIONAL
SECURITIES LIMITED**

CORPORATE ACCOUNT OPENING FORM

Full Name of Company	
Company Short Name	Date of Incorporation/Registration
Place of Incorporation	RC Number
Business Sector	Tax Number
Company Type <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Partnership <input type="checkbox"/> Others (specify)	
Company Address	
Postal Address	
Telephone	Email
Fax	Website Address
Average Annual Turnover (NGN) <input type="checkbox"/> Less than 10m <input type="checkbox"/> 10m – 50m <input type="checkbox"/> Above 50m	Purpose of Investment
	Source of Investment Fund

Bank Account Details (Your Bank Account Name and Details Should Correspond with CSCS Account Name)	
Bank Name	Branch
Account Name	Account Number

Principal Contact Person	
Name	
Email	
Signature & Date	

Authorized Signatory (1)	
Name	
Designation	
Class <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
Specimen Signature and Date	

Affix Current Passport Photograph
--

Authorized Signatory (2)	
Name	
Designation	
Class <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
Specimen Signature and Date	

Affix Current Passport Photograph
--

Authorized Signatory (3)	
Name	
Designation	
Class <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
Specimen Signature and Date	

Affix Current Passport Photograph
--

Mandate/Signing Instruction

--

Questionnaire

Please state if any of your Directors, Signatories or Major Shareholders have held any Political Position

1. Name:	Date: From	To
2. Name:	Date: From	To
3. Name:	Date: From	To
4. Name:	Date: From	To

Attestation

We attest that all the information provided herein is accurate and would notify you to update our records where any change occurs

Director's Signature and Date	Director's Signature and Date
-------------------------------	-------------------------------

For Official Purpose Only

Delivered By <input type="checkbox"/> Email <input type="checkbox"/> Company Representative <input type="checkbox"/> Others (specify)
Document Received By (Officer's Name)
Location/Branch
Initial Amount Deposited

Documentation Checklist

1. Completed Account Opening Form	<input type="checkbox"/>	8. Board Resolution/Management Approval. The Board Resolution/Management Approval should state	<input type="checkbox"/>
2. Passport Photograph	<input type="checkbox"/>	a. Approval to open a Stock broking account with NISL	<input type="checkbox"/>
3. Photocopy of Identification Documents for all Directors and Signatories (International Passport/Valid Driver's License/National Identity Card)	<input type="checkbox"/>	b. The List of Authorized signatories	<input type="checkbox"/>
4. Proof of Address for all Directors and Signatories (Copy of recent Utility Bill)	<input type="checkbox"/>	9. *Latest Financial Statements	<input type="checkbox"/>
5. Email Indemnity	<input type="checkbox"/>	10. *Particulars of Shareholders with minimum of 5% Shareholdings	<input type="checkbox"/>
6. Standard Terms and Conditions	<input type="checkbox"/>	11. *Particulars of Directors Form CAC 7 (LTDs only)	<input type="checkbox"/>
7. Copy of Certificate of Incorporation/Evidence of Business Registration	<input type="checkbox"/>	12. *Return on Allotment of Shares Form CAC 2 (LTDs only)	<input type="checkbox"/>
14. Other Documents		13. *Memorandum & Article of Association <input type="checkbox"/> Constitution <input type="checkbox"/> Partnership Deed	<input type="checkbox"/>
(a) _____			
(b) _____			
(c) _____			
Please note that all items (*) should be certified as True Copies By the Corporate Affairs Commission and sealed using Company Seal/Stamp			
Documentation Status	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete	
Risk Rating	<input type="checkbox"/> Low	<input type="checkbox"/> High	
Account Opening Authorized By			
Date			
CSCS Number	CHN	Folio Account Number	