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Joint Account Opening Form

This form must be read with and forms part of the stock broking terms and conditions.

NEW CLIENT AMENDMENT

REFERENCE ID:

SECTION A: BASIC DETAILS

NAME OF ACCOUNT: _____/

CONTACT ADDRESS: _____/

POSTAL ADDRESS: _____/

COUNTRY OF RESIDENCE _____/

CONTACT PHONE NUMBER: _____/

CONTACT EMAIL: _____/

TYPE OF ACCOUNT: JOINT ESTATE NGO

SECTION B: SIGNATORIES' DETAILS

AUTHORIZED SIGNATORY (1)

SURNAME: _____

OTHER NAMES : _____

STATE OF ORIGIN/LGA _____

NATIONALITY: _____

DATE OF BIRTH: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

OCCUPATION: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

PERIOD WITH CURRENT EMPLOYER: _____

GROSS MONTHLY INCOME: 500K-1M 2M-5M 5M&ABOVE

IDENTIFICATION DOCUMENTS: INTERNATIONAL PASSPORT
 DRIVERS' LICENSE NATIONAL ID UTILITY BILL

SIGNATURE : _____

AUTHORIZED SIGNATORY (2)

SURNAME: _____

OTHER NAMES: _____

STATE OF ORIGIN/LGA _____

NATIONALITY: _____

DATE OF BIRTH: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

OCCUPATION: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

PERIOD WITH CURRENT EMPLOYER: _____

GROSS MONTHLY INCOME: 500K-1M 2M-5M 5M&ABOVE

IDENTIFICATION DOCUMENTS: INTERNATIONAL PASSPORT
 DRIVERS' LICENSE NATIONAL ID UTILITY BILL

SIGNATURE: _____

AUTHORIZED SIGNATORY (3)

SURNAME: _____

OTHER NAMES : _____

STATE OF ORIGIN/LGA _____

NATIONALITY: _____

DATE OF BIRTH: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

OCCUPATION: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

PERIOD WITH CURRENT EMPLOYER: _____

GROSS MONTHLY INCOME: 500K-1M 2M-5M 5M&ABOVEIDENTIFICATION DOCUMENTS: INTERNATIONAL PASSPORT DRIVERS' LICENSE NATIONAL ID UTILITY BILL

SIGNATURE : _____

AUTHORIZED SIGNATORY (4)

SURNAME: _____

OTHER NAMES: _____

STATE OF ORIGIN/LGA _____

NATIONALITY: _____

DATE OF BIRTH: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

OCCUPATION: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

PERIOD WITH CURRENT EMPLOYER: _____

GROSS MONTHLY INCOME: 500K-1M 2M-5M 5M&ABOVEIDENTIFICATION DOCUMENTS: INTERNATIONAL PASSPORT DRIVERS' LICENSE NATIONAL ID UTILITY BILL

SIGNATURE: _____

SECTION C: BANK DETAILS

NAME OF BANK: _____/ BRANCH: _____/

ACCOUNT NAME: _____/

ACCOUNT NO: _____/ BVN: _____/

DATE ACCOUNT OPENED: _____/ TELEPHONE NO: _____/

ACCOUNT OFFICER'S NAME: _____/

SECTION D: INVESTMENT**INVESTMENT OBJECTIVE** INCOME GROWTH CAPITAL PRESERVATION ALL**TIME HORIZON** IMMEDIATE ACCESS (LESS THAN OR EQUAL TO 1 YEAR) SHORT TERM (MORE THAN 1 YEAR - LESS THAN 5YRS) LONG TERM (MORE THAN 5 LESS - THAN 10YRS)

CERTIFICATION: I certify that the above particulars are true and correct

Specimen Signature/Thumb Print

Date

FOR OFFICIAL USE

Account Officer's Name:

Trustbanc Account No: CHN:

CSCS Account No:

Other Special Instruction:

Authorised Signatory: Authorised Signatory:

KYC Verified by: Sign/Date:

Signature Mandate Form

Account Name: _____/

Account Number: _____/ Type: _____/

Date Account Opened: _____/ Telephone: _____/

Address: _____/

	Name	Signature	Class	Photograph
1				AFFIX RECENT PASSPORT PHOTOGRAPH HERE
2				AFFIX RECENT PASSPORT PHOTOGRAPH HERE
3				AFFIX RECENT PASSPORT PHOTOGRAPH HERE

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: _____/

Telefax Agreement

INDEMNITY IN RESPECT OF ORDERS GIVEN BY E-MAIL/TELEFAX

Account Name: _____

Account No: _____

For reasons of speed and convenience in the operations of my/our account with TRUSTBANC GROUP (TRUSTBANC), I/we hereby give you our firm instructions to honour my/our e-mail/telefax concerning transactions on my/our with you from time to time. It may not always be possible for me/us to confirm my/our instructions in writing but I/we will use my/our best endeavours to do so. I/We hereby authorize you to accept and execute immediately all requests and instructions that you receive from/us by email/telefax which bear my/our signature but being aware of the risks that arise from your so acting, I/we confirm as follows:

- (a) I/We hereby undertake not to hold you liable and shall indemnify TRUSTBANC against all losses, costs, damages and expenses, which TRUSTBANC may incur or sustain in consequence of its acting as herein requested. TRUSTBANC is hereby absolved of any/all liabilities for any mistake arising from misunderstanding or misinterpretation thereof, errors in transmission or regarding the authorised signatory (ies) or abuse by unauthorised parties.
- (b) Where e-mail/telefax instructions are subsequently confirmed in writing and in the event that, there is conflict between TRUSTBANC's interpretation of the e-mail/telefax instructions and the written instructions later received, TRUSTBANC shall be entitled to rely on the e-mail/telefax instructions first received without any liability for any mistake or error.
- (c) That I/we hereby undertake to indemnify TRUSTBANC from all actions, proceedings, demands, losses, costs, damages and expenses which it may incur as a result of accepting an e-mail/telefax instruction which bears a signature of reasonable likeness to my/our own even if it is subsequently proved to be forged and /or otherwise irregular.
- (d) I/We agree to perform and ratify any contracts entered into by TRUSTBANC on our behalf and/or any action taken by it as a result of any such communications made or purporting to be made by my my/our authorized representatives and believed by TRUSTBANC to have been so made. This assumption of risk by TRUSTBANC shall extend to communications made or purported to be made by any attorneys now or hereafter appointed from time to time by me/us and honestly believed by TRUSTBANC to have been so made on my/our behalf. We hereby undertake to indemnify TRUSTBANC from all losses emanating there from.
- (e) I/We acknowledge that notwithstanding the foregoing, TRUSTBANC may at any time at its absolute discretion decline to execute any instruction or request given by me/us via e-mail/telefax notwithstanding that at the time of such instruction or request, TRUSTBANC's employee receiving such instruction or request may have formerly accepted to act on such instructions or request.
- (f) I/We confirm that I/We have referred this document to my/our solicitor who has satisfactorily explained the effects of the terms herein and I/We agree to abide by the terms.
- (g) This indemnity shall remain effective until duly cancelled by me/us by a notice in writing and delivered to TRUSTBANC at its registered address during office hours.
- (h) This indemnity shall cover all accounts now and in the future opened in my/our name.

This Indemnity shall be governed by the laws of the Federal Republic of Nigeria.

Dated this..... Day of..... 20

Signature

Signature account(s)