

ACCOUNT OPENING FORM – MAGNARTIS FIN. & INV. LTD

A. PERSONAL INFORMATION

Passport
Photograph

SURNAME: _____ OTHER NAMES: _____

MAIDEN NAME/ MOTHER'S MAIDEN NAME : _____

CONTACT ADDRESS: _____

SEX: _____ DATE OF BIRTH: _____ MARITAL STATUS: _____

EXISTING S/BROKING FIRM _____ CLEARING HOUSE NO (CHN) _____

NIN: _____ STATE OF ORIGIN _____ LGA _____ NATIONALITY: _____

OCCUPATION/PROFESSION: _____ HAVE YOU OCCUPIED ANY POLITICAL POSITION? (IF YES PLS STATE)

BANK NAME, BRANCH & ACCOUNT NO: _____ BVN _____

DATE A/C WAS OPEN (dd/mm/yy): _____ PHONE: _____

E-MAIL: _____ SIGNATURE/DATE: _____

B. NEXT OF KIN/CONTACT PERSON

NAME: _____

CONTACT ADDRESS: _____

RELATIONSHIP: _____ PHONE: _____ SIGNATURE: _____

C. REFEREES

1. NAME: _____

CONTACT ADDRESS: _____

RELATIONSHIP: _____ PHONE: _____ SIGNATURE: _____

HOW LONG HAVE YOU KNOWN THE ABOVE NAMED PERSON? _____

I HEREBY CONFIRM THAT THE ABOVE INFORMATION IS TRUE: _____

INVESTOR'S SIGNATURE

ACCOUNT OFFICER _____ SIGNATURE _____

REFERENCE FORM

MAGNARTIS FINANCE AND INVESTMENT LTD

“CAUTION”
IT IS DANGEROUS TO INTRODUCE A PERSON
WHO IS NOT KNOWN TO YOU

THE MANAGING DIRECTOR
MAGNARTIS FINANCE & INVESTMENT LTD

.....

Dear Sir,

RE:.....

Prospective Account Name

I/We understand that the above – named person(s) has/have applied to open a CSCS Stock Account with your organization.

I/We have known the above – named person(s) for(Period) and I/We comment on his/their means and reputation as follows:-

.....
.....

The above information is provided in confidence.

Yours faithfully,

REFEREE’S NAME:.....

REFEREE’S ADDRESS:.....

REFEREE’S OCCUPATION:.....

REFEREE’S GSM NUMBER:.....

.....

Signature/Date

FOR OFFICE’S USE ONLY

DOCUMENTS OBTAINED

Completed Signature Card Yes Deferred

Reference Forms (2) Yes Deferred

Identification Document Yes Deferred

A Passport Photograph Yes Deferred

Others Yes Deferred

Account Opened By:

Signature & Date:

Compliance Officer’s Comment:

Signature & Date:

Deferral/Waiver Authorized By:

Signature & Date:

Account Sourced By:

Signature & Date:

Account Authorized By:

Signature & Date:

ADDITIONAL REQUIREMENT

- ❖ Enclose valid means of Identification e.g Driver’s License, International Passport, Voters Card, National ID
- ❖ Enclose copy of utility bill e.g PHCN/ Water (within 3 months)

- ❖ 2 passport photograph

LETTER OF INDEMNITY

I hereby agree to indemnify Magnartis Finance and Investment Ltd in full against any action, claim, proceeding loss, expense or damages from this account or, representatives made by me in respect of this account or for whatsoever in connection with this account. I further confirm that all my dealings in respect of this account shall not be contrary to any subsisting law or regulation in force whether in Nigeria or any other Country.

In consideration of you, Magnartis Finance & Investment, agreeing to honor and act upon any instruction, communications and documents sent by facsimile (fax), telephone, e-mail , letters issued according to my/our mandate as I may from time to time advise you in writing via ema i l n a m e while the following shall be my e-mail address ...

It is not my intention that the instruction referred to above should be confirmed in writing or by telephone and I/we hereby ratify and confirm all that you shall do on my behalf by virtue of such instructions provided only that you acted in good faith.

Signature
Date