



ACCOUNT OPENING FORM (Individual)

PERSONAL DETAILS

Title: Mr. Mrs. Miss. Others _____

Surname: _____ Other Names: _____

Sex: Male. Female.

Mother's Maiden Name: _____ Date of Birth: _____

Marital Status: Married Single Others _____
(Please Specify)

Occupations: _____ CHN _____

State of Origin: _____ Local Government of Origin: _____

Citizenship: _____ Country: _____

FUND SOURCE: (Please State Account Holder's Source of Funds.)

CONTACT DETAILS:

Resident Address _____

Postal Address: _____

Telephone Numbers: (i) _____

(ii) _____

E-mail _____

NEXT OF KIN

Name: _____

Relationship: _____

Address: _____

Country: _____ Nationality: _____

Telephone Numbers: (i) _____ (ii) _____

BANK ACCOUNT DETAILS:

Bank Name: _____ Branch: _____

Account Name: _____ Account Numbers: _____

Bank Sort Code: _____ A/C Opening Date _____

SIGNATURE OF CLIENT

A. Name: _____ SIGNATURE: _____	C. Name: _____ SIGNATURE: _____
B. Name: _____ SIGNATURE: _____	D. Name: _____ SIGNATURE: _____

Signing instruction (for Joint A/C Only): _____

CAVEAT EMPTOR

Investment in the Capital Market can be volatile and high risk and are best recommended as long term investment. FCSL Asset Management (and any of its legal representatives) shall not be libale for any direct, indirect, incidental, special or consequential damage that may occur as a result of any investment made therein. FSCL affirms that we shall offer our best services to our clients at all times. HOWEVER we shall bear no liability for any loss occasioned as a result of any investment made in capital market except where it can be proved that same was occasioned by negligence on the part of the COMPANY.

I HAVE READ AND UNDERSTOOD THE STATEMENT ABOVE AND WISH TO ENTER INTO A BUSINESS RELATIONSHIP WITH THE COMPANY:

CUSTOMER'S SIGNATURE

FOR OFFICE USE ONLY

Above Address Verified by: _____
(Name, Sign & Date)

DOCUMENTATION CHECK LIST

Individual:

- | | |
|-------------------------------------|--|
| 1. Completed Account Opening Form | 5. Proof of Address (e.g. Copy of recent utility bill) |
| 2. Means of Identification | 6. Birth Certificate (For minors only) |
| 3. Passport Photograph | 7. Bankers Information |
| 4. Resident Permit (For Foreigners) | |

The applicant(s) was/were interviewed by me via by telephone/in person (indicate as appropriate)

I recommend that a _____ Account be opened as requested.

Relationship Officer's Name: _____ Signature: _____ Date: _____

Head of Unit's Name: _____ Signature: _____ Date: _____

Executive Management Remarks:

