



ICMG SECURITIES LIMITED

MEMBER OF THE NIGERIAN STOCK EXCHANGE

(Invest today for tomorrow's security)

8B, Ademola Street, S.W. Ikoyi, P.O.Box 74365

Victoria Island, Lagos, Nigeria

Tel: 08022887783,

PLEASE ATTACH AT
LEAST 2 PASSPORTS OF
AUTHORISED
SIGNATORIES.

ACCOUNT OPENING FORM – K.Y.C. VERSION

I/We request the opening of-----account with ICMG SECURITIES LTD.

I/We understand that the information given hereunder is the basis for opening the account and I/We confirm and warrant that the said information is correct.

1. NAME (SURNAME)_____ (OTHER NAMES)_____
2. DATE OF BIRTH _____
3. CORRESPONDENCE ADDRESS _____
4. RESIDENTIAL ADDRESS _____ CITY _____
5. E-MAIL ADDRESS _____ TEL.NO _____
6. OCCUPATION/NATURE OF BUSINESS _____
7. EMPLOYER'S NAME _____ JOB TITLE _____
8. EMPLOYER'S ADDRESS _____
9. BANKER'S NAME _____ BVN _____ A/C NO _____
10. BANK SORT CODE _____ DATE ACCT. WAS OPENED _____
11. INITIAL DEPOSIT =N= _____ VALUE OF CERT.DEPOSITED=N= _____
12. NATIONALITY _____ STATE OF ORIGIN _____
13. LOCAL GOVT.AREA OF ORIGIN _____ COUNTRY OF RESIDENCE _____
14. NEXT-OF-KIN (NAME) _____ RELATIONSHIP _____
15. NEXT OF KIN PHONE NO. _____ NEXT OF KIN CHN _____
16. NEXT-OF-KIN (ADDRESS) _____
17. MOTHER'S MAIDEN NAME _____ IDENTIFICATION CARD TYPE _____
18. IDENTIFICATION CARD NO _____ DATE/PLACE OF ISSUE _____
19. UTILITY BILL TYPE _____ MONTH OF ISSUE _____ ADDRESS _____

Authorized Signatory _____ Date _____

***ENSURE TO SIGHT THE ORIGINAL & PHOTOCOPY A FORM OF IDENTIFICATION: DRIVER'S LICENCE, NAT.ID.CARD OR INT.PASSPORT*ENSURE THAT TWO PASSPORT PHOTOGRAPHS ARE ATTACHED TO THIS FORM *A PHOTOCOPY OF YOUR UTILITY BILL IS ATTACHED TO THE COMPLETED FORM**

PLEASE TURN OVERLEAF

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.....
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DATE.....

The Managing Director
ICMG SECURITIES LTD
8B, Ademola Street
S.W.lkoyi, Lagos

Dear Sir,

Re: AUTHORITY TO SET-OFF

I/We agree, having been explained to, that ICMG does not give loan of any type including that for the purpose of trading in shares.

Accordingly, I/We pledge not to overdraw my/our account or leave my/our account overdrawn at any time for any reason.

I/We hereby authorize you to dispose shares in my CSCS account sufficient to liquidate any debit balance in my/our naira account with you.

Yours faithfully,

AUTHORISED SIGNATURE