

MAGNARTIS FINANCE AND INVESTMENT LTD

CORPORATE ACCOUNT OPENING FORM

FULL NAME OF COMPANY-----

DATE OF INCORPORATION ----- PLACE OF INCORPORATION-----

RC NUMBER----- COMMENCEMENT DATE -----

COMPANY ADDRESS-----

MAILING ADDRESS-----

----- TAX ID NUMBER _____

CORPORATE EMAIL ADDRESS-----

TELEPHONE-----WEBSITE ADDRESS-----

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

BANK DETAILS

BANK NAME-----BRANCH-----

ACCOUNT NAME-----ACCOUNT NUMBER-----

BANK VERIFICATION NUMBER (BVN) -----DATE OF CREATION-----

PRINCIPAL CONTACT PERSON

NAME-----

PHONE NUMBER-----EMAIL ADDRESS-----

SIGNATURE & DATE-----

AUTHORIZED SIGNATORY

NAME-----

DATE OF BIRTH-----GENDER-----NATIONALITY-----

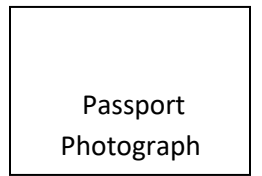
RESIDENTIAL ADDRESS-----

PHONE NUMBER-----EMAIL ADDRESS-----

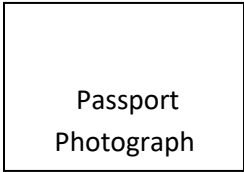
DESIGNATION----- CLASS A B

ID TYPE INTL PASSPORT DRIVER'S LICENSE NATIONAL ID CARD

ID NUMBER -----ISSUE DATE----- EXPIRY DATE-----



AUTHORIZED SIGNATORY (2)



NAME-----

DATE OF BIRTH-----GENDER-----NATIONALITY-----

RESIDENTIAL ADDRESS-----

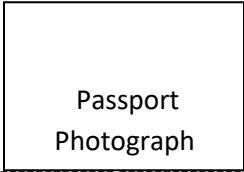
PHONE NUMBER-----EMAIL ADDRESS-----

DESIGNATION----- CLASS A B

ID TYPE INTL PASSPORT DRIVER'S LICENSE NATIONAL ID CARD

ID NUMBER -----ISSUE DATE----- EXPIRY DATE-----

BVN: _____



AUTHORIZED SIGNATORY (3)

NAME-----

DATE OF BIRTH-----GENDER-----NATIONALITY-----

RESIDENTIAL ADDRESS-----

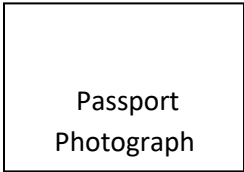
PHONE NUMBER-----EMAIL ADDRESS-----

DESIGNATION----- CLASS A B

ID TYPE INTL PASSPORT DRIVER'S LICENSE NATIONAL ID CARD

ID NUMBER -----ISSUE DATE----- EXPIRY DATE-----

BVN: _____



AUTHORIZED SIGNATORY (4)

NAME-----

DATE OF BIRTH-----GENDER-----NATIONALITY-----

RESIDENTIAL ADDRESS-----

PHONE NUMBER-----EMAIL ADDRESS-----

DESIGNATION----- CLASS A B

ID TYPE INTL PASSPORT DRIVER'S LICENSE NATIONAL ID CARD

ID NUMBER -----ISSUE DATE----- EXPIRY DATE-----

BVN: _____

MANDATE /SIGNING INSTRUCTION-----

We attest that the information provided therein is accurate and would notify you to update our records where changes occur

DIRECTOR'S NAME, SIGNATURE & DATE

DIRECTOR'S NAME, SIGNATURE & DATE

FOR OFFICE'S USE ONLY	
DOCUMENTS OBTAINED	
Completed Signature Card -----	A Passport Photograph of signatory ----- Utility Bill-----
CAC form C02----- CAC Form C07-----	Certificate of Incorporation-----Identification Document-----
Account Opened By: -----	Signature & Date:
Compliance Officer's Comment:	Signature & Date: -----
Deferral/Waiver Authorized By:	Signature & Date:
Account Sourced By: -----	Signature & Date:

Requirements for opening corporate account

- Board Resolution
- Copy of Certificate of Registration
- Copy of Identification card of Signatories (ID card)
- One Passport Photograph of each Signatories
- Copy of Form C02
- Copy of Form C07
- Signature Mandate
- Utility Bill

❖ SEARCH FEE

Kindly make provision for search fee either by deposit or account debit (see last page)

• **AUTHORIZATION TO DEBIT ACCOUNT FOR SEARCH FEE**

We hereby authorize you to debit our account with the applicable charges for the legal search conducted on our account at the Corporate Affairs Commission/Probate Registry or relevant agency/ authority.

Thank you.

Yours faithfully

Authorized Signatory/Representative

Authorized Signatory/Representative

Date

Date

LETTER OF INDEMNITY

We 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/us in respect of this account or for whatsoever in connection with this account. We 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 We may from time to time advise you in writing via em a i l n a m ewhile the following shall be my/our e-mail address

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

Authorized Signatory/Representative

Authorized Signatory/Representative

Date

Date