

Account Opening Package - Individual



Securities

(Member of The Nigerian Stock Exchange)



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Individual Account Opening Form

Set Off

I/We agree that BGL may, at any time without notice, notwithstanding any settlement of account of other matter whatsoever combine or consolidate all or any of my then existing account(s) opened in my name, relations, children, spouse or company(ies) names and set off, appropriate or transfer any sum(s) standing to the credit of any of such accounts towards satisfaction of any liabilities be it present or future, actual or contingent, primary or collateral and several or joint.

Declaration

I/We declare that the information given in the account opening forms is true and correct. We agree that any information found to be false may cause BGL to decline the application or close the account if it has been opened. Should any details change in the future, e.g. address, name of Company etc. I/We shall inform you promptly.

I/We note that BGL shall not bear any responsibility or liability whatsoever for funds handed to members of staff for any cash payment made to any account person for the purpose of account opening.

Funding accounts in debit

If for any reason BGL authorizes the execution of our validly executed mandate when at the material time the account does not have sufficient funds to accommodate the value of the transaction, (and the said account is thereby thrown into debit) we agree that an overdraft position is thereby created. Any sum or sums standing to the debit of our account as a result of this overdraft position shall automatically be liable to interest charges at a prevailing market rate. You are authorized to debit the account with your usual charges, commission and interests for such facilities.

Client's Name

Signature



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Individual Account Opening Form - Page 1

Personal Data

Date:

Title : Mr. Mrs. Ms. Other (Please tick as appropriate)

Please complete in block letters

Surname:

Other Name:

Residential Address (Street Number):

Attached
Passport
Photograph

ORIGINAL COPIES OF THE LAST THREE MONTHS UTILITY BILLS TO BE SIGHTED

Mailing Address:

Tel. Home: Bus: Fax:

Mobile: e-mail:

International Passport Number: (Original to be Sighted)

Driver's Licence Number: (Original to be Sighted)

Occupation and Nature of Business:

Initial Deposit: (Cash) (Certificate Value):

Source(s) of Funds:

Next of Kin:

Relationship with next of kin: Email:

Next of Kin Contact:

Tel:



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Individual Account Opening Form - Page 2

Country of Citizenship:

Country of Residence:

Date and Place of Birth:

Religion:

Mother Maiden Name:

Name and Address of Bankers:

S/N	Name of Bank	Address	Account Type

Section B: SERVICE REQUIRED

BGL Nominee Programme

BGL Guaranteed Consolidated Notes

BGL Consolidated Fund

BGL Equity Trading Service

BGL Build-Up Account

BGL Young Investors Account

Section C: CLIENT PROFILE

Stated Investors Profile

Income & Growth

Growth

KEY

Income & Growth

I want my investment to grow over time, but I would also like to generate some current income within the short to medium term. It is important the value of my investments keep pace with inflation

Growth

I have a need to build up Wealth and have my returns re-invested in my portfolio rather than current income over a long time horizon



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Individual Account Opening Form - Page 3

How much volatility are you willing to accept?

Key

Depending on what objective you select, the value of the assets can remain quite stable or rise and fall in response to market events. The degree to which an investment moves upwards or downwards is referred to as *Volatility*. Generally more volatile investments are more risky but grow faster than most investments.

Low

I do not want any erosion in my capital, even if it means my returns are relatively small and may not keep pace with inflation.

Moderate

I am willing to accept a slight volatility in my capital as long as my money is in sound, high quality investments that will grow over time and can match inflation.

High

I am willing to take volatility on my portfolio in pursuit of significant higher returns over time.

Other Accounts with BGL

Clients Signature & Date

Important Information

All transactions to be done by cheques/bank drafts crossed and payable to **BGL /Client's Name**

Head Office	20 Catholic Mission Street, Lagos Island, Lagos, Nigeria	T +234 1 280 5544	E info@bgl Ltd.com
		F +234 1 280 5554	W www.bglplc.com
Northern Regional Office	Plot 417, Tigris Crescent, Maitama, Abuja-FCT, Nigeria	T +234 9 781 7729	
		F +234 9 234 8539	
Southern Regional Office	59B King Perekule Street, G.R.A. Phase II, Port Harcourt, Rivers State, Nigeria	T +234 84 462 359	
		F +234 84 462 359	

For enquiries or information, call our customer care lines on +234 1 2805544, Fax +234 1 2805554 or send email to customer care@bgl Ltd.com



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Individual Account Opening Form - Page 4

Official Use Only

Client's Account Number

CSCS Number

Introduced By

Waiver(s) Request & Justification

Account Officer's Name:

Account Officer's Phone Number: Email:

Sign of Account Officer/Branch

New Account/Waiver Approved By

Head, Customer Care

Signature

Checklist

S/N	Details for Individual Accounts	Yes	No
1.	Duly completed Account Opening Form	<input type="checkbox"/>	<input type="checkbox"/>
2.	Copies of Utility Bills for the last 3 months (Original copies to be sighted)	<input type="checkbox"/>	<input type="checkbox"/>
3.	Copy of International passport & Driver's License, National ID Card (Originals to be sighted)	<input type="checkbox"/>	<input type="checkbox"/>
4.	Duly completed signature mandate with two passport photographs	<input type="checkbox"/>	<input type="checkbox"/>



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Individual Account Opening Form - Page 5

Client's Signature Mandate

please tick as appropriate signatory(ies) for transactions on account

Sole Signatory

All Signatories

Either Signatories

Any Two Signatories

Client's Names:

Signature (s):

Two Passports:

Attach
Passport
Photograph
Here

Attach
Passport
Photograph
Here

The Clearing House

The Clearing House

Particulars of Shareholders

Current Date: \ \20 Branch:

Member Code: **BGL**

Members Name: **BGL Securities Limited**

Shareholder's Type:

Clearing House Number (CHN):

Birth Date:

Shareholder's Name (Surname):

Other Name (s):

Mother's Maiden Name:

Contact (If Corporate):

Shareholder's Address:

City: Country: Postal Code:

Other name as its written in other Certificates (If different from above) :

Name:

Address:

Name:

Address:

Name:

Address:

 Phone:  Fax:

Reference No:

Country of Origin (For Statistical Purpose):

Waiver

I/We of

a National of am (are) a prospective shareholder(s) in companies listed on The Nigeria Stock Exchange and I (We) hereby FREELY state that being aware of my (our) right to be issued with a Share Certificate(s) under sections 146 and 147 of the Companies and Allied Matter Act 1990 and the Memoranda and Articles of Association of the listed Companies for my (our) sole benefit and private purpose do hereby waive the said right and also DECLARE that I (We) shall accept as sufficient certificate of my (our) shareholding, any Memorandum to that effect delivered to me (us) by the said listed company / companies or the CENTRAL SECURITIES CLEARING SYSTEM LIMITED acting on behalf of the same as satisfaction of my (our) said right Under the sections of Memoranda and Articles of Association aforementioned.

Dated this day of 20

Signed Sealed (Coy)