

AFFIX YOUR  
PASSPORT  
PHOTOGRAPH  
HERE

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**GOLDEN SECURITIES LIMITED**

**(MEMBER OF THE NIGERIAN STOCK EXCHANGE)**

ST. PETER'S HOUSE, 7<sup>TH</sup> FLOOR, 3, AJELE STREET, LAGOS.

Phone: 01-7406604, 01-7406608, 07098141924

E-mail: [info@goldencapplc.com](mailto:info@goldencapplc.com)

**INDIVIDUAL ACCOUNT OPENING/UPDATE**

**1.1 PERSONAL PROFILE**

Surname (Mr., Mrs., Miss, Dr., Prof.): \_\_\_\_\_

Other Names: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Occupation: \_\_\_\_\_ Mother's maiden name: \_\_\_\_\_

Telephone Numbers: Mobile \_\_\_\_\_ Office \_\_\_\_\_

State of Origin \_\_\_\_\_ Local Govt \_\_\_\_\_

**1.2 To be completed if Joint Account**

Surname (Mr., Mrs., Miss, Dr., Prof.): \_\_\_\_\_

Other Names: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Maiden name: \_\_\_\_\_

Telephone Numbers: Mobile: \_\_\_\_\_ Office: \_\_\_\_\_

**1.3 Addresses:**

Residential Address: \_\_\_\_\_

Mailing Address (In Nigeria): \_\_\_\_\_

Mailing Address (Overseas): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**1.4 Next of Kin**

(a) Name (Mr., Mrs., Miss, Dr., Prof.): \_\_\_\_\_

Address: \_\_\_\_\_

Tel No: \_\_\_\_\_ Relationship \_\_\_\_\_

(b) Surname (Mr., Mrs., Miss, Dr., Prof.): \_\_\_\_\_

Other Names: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No.: \_\_\_\_\_ Relationship \_\_\_\_\_

**1.5 Employer** \_\_\_\_\_

Employer's Address \_\_\_\_\_

\_\_\_\_\_ Tel \_\_\_\_\_

**2.0 CSCS DETAILS**

Do you have an existing CSCS Account? YES/NO

If YES CSCS Number \_\_\_\_\_ CLEARING HOUSE NUMBER \_\_\_\_\_

**3.0 ITEMS FOR IDENTIFICATION**

The following documents are submitted for my (our) Identification purpose.

- i. Recent passport photograph
- ii. Evidence of Identification: International Passport  Driver's License   
National Identity Card  Voters Card
- iii. Confirmation of Address (Current public utility Receipt): PHCN Bill  Water Bill  LAWMA BILL

**4.0 BANK ACCOUNT DETAILS** Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_

Current Account Number: \_\_\_\_\_ Date Opened \_\_\_\_\_

**5.0 SIGNATURE(S):**

1. \_\_\_\_\_ Date: \_\_\_\_\_

2. (To be signed if Joint Account) \_\_\_\_\_ Date: \_\_\_\_\_

**6.0 TYPE OF INVESTMENT REQUIRED:** SELF MANAGED  MANAGED PORTFOLIO

**6.1 MANDATES ON MANAGED PORTFOLIO:**

- i. **Broker's Discretion** I, (We) \_\_\_\_\_ hereby authorize Golden Securities Limited to constantly review and trade in the shares in my (our) portfolio using their best judgment.
- ii. **Non Discretionary** I, (We) \_\_\_\_\_ hereby authorize Golden Securities Limited to constantly review and advise me (us) and get my (our) consent/ instruction before trading in the shares in my (our) portfolio.
- iii. **No Review or Trading of Shares** I, (We) \_\_\_\_\_ do not want the shares in my (our) portfolio to be reviewed or traded on by Golden Securities Ltd.

**7.0 DECLARATION**

I, (We), 1. \_\_\_\_\_ 2. \_\_\_\_\_ confirm that I, (We) have read and understood the mechanism for operating my (our) account as stated above. Golden Securities Limited will not be held liable for any misjudgment.

**SIGNED:** 1. \_\_\_\_\_ 2. \_\_\_\_\_, Dated this \_\_\_\_\_ day of 20\_\_\_\_

FOR OFFICIAL USE ONLY	
Account Officer:	
Customer Care Officer:	
<b>Verified By:</b>	
Chief Compliance Officer	Date:
<b>Approved By (H.O.D):</b>	Date:
Golden Securities A/C No:	CSCS Account No:
Special Instructions:	Clearing House No:

