

GOLDEN SECURITIES LIMITED

(MEMBER OF THE NIGERIAN STOCK EXCHANGE)

ST. PETER'S HOUSE, 7TH FLOOR, 3, AJELE STREET, LAGOS.

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ESTATE ACCOUNT/UPDATE

A

1.0 PROFILE OF CLIENT:

1.2 Name, Address & Other Information

Name: _____

Home Address : _____

_____ P.O. Box No.: _____

1.3 Telephone Number:

Mobile Phone No.: _____ Office: _____

E-mail: _____

B

2.0 ITEMS FOR IDENTIFICATION/CONFIRMATION

The originals of the following items must be sighted and photocopies retained in Estate files for record purposes.

- i. Recent Passport Photographs of Admors
- ii. Evidence of Identification: International Passport Driver's License National Identity Card
- iii. Confirmation of Address: NEPA Bills Water Bills Tel. Bills LAWMA
- iv. Death Certificate
- v. Admors' Bankers Confirmation
- vi. Obituary if any
- vii. Probate of Will/Letter of Administrator

C

3.0 BANK ACCOUNT DETAILS

Bank Name: _____ Branch: _____

Current Account Number: _____

D

4.0 **Names and Signature of Administrators:**

- i. Surname (Mr., Mrs., Miss, Dr., Prof.): _____
Other Names: _____ Signature: _____
- ii. Surname (Mr., Mrs., Miss, Dr., Prof.): _____
Other Names: _____ Signature: _____
- iii. Surname (Mr., Mrs., Miss, Dr., Prof.): _____
Other Names: _____ Signature: _____
- iv. Surname (Mr., Mrs., Miss, Dr., Prof.): _____
Other Names: _____ Signature: _____

5.0 **TYPE OF INVESTMENT REQUIRED:**

- SELF OPERATED MANAGED PORTFOLIO

E

6.0 **MANDATE ON PORTFOLIO:**

6.1 **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.

6.2 **Joint Decision (Non Discretionary)**

I, (We) _____ hereby authorize Golden Securities Limited to constantly review, advise and get my (our) instruction before trading in the shares in my (our) portfolio.

6.3 **No Review or Trading of Shares**

I, (We) _____ do not want the shares in my (our) portfolio to be reviewed or traded on.

7.0 **DECLARATION**

We, confirm to have read and understood the mechanisms for operating our account as stated above. Golden Securities Limited will not be held liable for any misjudgement.

7.1 **Executors/Administrators' Signatures**

Date

- I. _____
- II. _____
- III. _____
- IV. _____
- V. _____

F

FOR OFFICIAL USE ONLY

Account Officer: _____

Verified By:

Customer Care Officer.: _____ Date: _____

Approved By (H.O.D): _____ Date: _____

Compliance:

Chief Compliance Officer: _____ Date: _____

Golden Securities A/C No _____ CSCS Account No: _____

Special Instructions: _____ Clearing House No: _____