



Core Securities Limited

Member of The Nigerian Stock Exchange

INDIVIDUAL ACCOUNT OPENING FORM

Category of Account (tick as appropriate): Individual Joint

Title	First Name			
Middle Name	Last Name			
Religion	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			
Date of Birth (dd/mm/yyyy)	Place/Country of Birth			
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single	Others _____			
State of Origin (Nigerians Only)	LGA			
Mother's Maiden Name				
Residential Address				
Mailing Address				
Period of stay in Present Residence				
Country of residence	Nationality			
Resident Indicator <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident				
Do you carry other country's passport other than Nigeria? Yes <input type="checkbox"/> No <input type="checkbox"/>				
If yes, state the country _____				
Mobile Phone (1)	Mobile Phone (2)			
Landline Phone				
Personal Email Address				
ID Type <input type="checkbox"/> International Passport <input type="checkbox"/> Driver's License <input type="checkbox"/> National ID Card <input type="checkbox"/> INEC Voters Card <input type="checkbox"/> Others				
ID Number	Issue Date	Expiry Date	Place of Issue	Tax Identification Number

Joint Account Holder

Name of Account				
Relationship with Joint Account				
Holder Name of Joint Account Holder				
Date of Birth (dd/mm/yyyy)	Place/Country of Birth			
Residential Address				
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			
Country of Residence	Nationality			
Mobile Phone (1)	Mobile Phone (2)			
Landline Phone				
Personal Email Address				
ID Type <input type="checkbox"/> International Passport <input type="checkbox"/> Driver's License <input type="checkbox"/> National ID Card <input type="checkbox"/> INEC Voters Card <input type="checkbox"/> Others				
ID Number	Issue Date	Expiry Date	Place of Issue	Tax Identification Number

Employment Details.

Level of Qualification	
Employment Status <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Retired <input type="checkbox"/> Self Employed	Others
Occupation/Employment Segment	Appointment Date
Company Name	
Company/Office Address	

Official Telephone Number	Fax Number		
Official Email Address	Official Website Address		
Annual Average Income	<input type="checkbox"/> Less than N10m	<input type="checkbox"/> N10 - 50m	<input type="checkbox"/> N50m and Above
Source of Investment Fund	<input type="checkbox"/> Employment	<input type="checkbox"/> Business	Others
Purpose of Investment			

Bank Account Details (Your Bank Account Name Details Should Correspond With CSCS Account Name).

Bank Name	Branch
Account Name	Account Number
Bank Verification Number	Account Type

Next Of Kin Details

Title	First Name		
Middle Name	Last Name		
Date of Birth	Nationality	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Relationship	<input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Spouse	Others	
Email	Telephone Contact		
Contact Address of Next of Kin			

For Minor Only.

Name of Minor		
Date of Birth	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female

Questionnaire

Have you occupied any Political Position? Yes No If yes, please state the most recent political position occupied
 _____ Date: From _____ To _____

Have any of your close relatives/associates occupied a Political Position? If Yes No
 yes, please state the names and your relationship with such persons below

1. Name _____ Relationship _____
 Position Held _____ Date: From _____ To _____

2. Name _____ Relationship _____
 Position Held _____ Date: From _____ To _____

Attestation.

I/We attest that all information provided herein is accurate and would notify you to update my/our records where any change occurs

 Name, Signature and Date

 Name, Signature and Date

For Official Purpose Only

Documentation Checklist			
1. Completed account opening form	<input type="checkbox"/>	5. Resident permit (for Non-Nigerians)	<input type="checkbox"/>
2. Passport photograph	<input type="checkbox"/>	6. *Birth certificate (for minors only)	<input type="checkbox"/>
3. *Means of identification	<input type="checkbox"/>		
* Originals must be sighted			
4. *Proof of address (e.g. copy of recent utility bill)	<input type="checkbox"/>		
Document Status	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete	
Risk Rating	<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> High
Account Opening Authorized By			
Date			
CSCS Number		Account Number	