



# INTERSTATE SECURITIES LTD

(MEMBER OF THE NIGERIAN STOCK EXCHANGE)

## STOCKBROKING ACCOUNT OPENING FORM (ESTATE)

Estate Name		Affix Current Passport Photograph
Estate Contact Address		
<b>Administrator's Details (1)</b>		
Title	First Name	Affix Current Passport Photograph
Middle Name	Last Name	
Religion	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth	Place/Country of Birth	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Others (specify)		
State of Origin (Nigerians Only)		
Mother's Maiden Name	Phone	
Residential/Permanent Address		
Nationality		
Level of Qualification		
Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Others (specify)		
Occupation/Employment Segment	Appointment Date	
Company Name		
Company/Office Address		
Official Telephone Number	Official Email Address	
<b>Administrator's Details (2)</b>		
Title	First Name	Affix Current Passport Photograph
Middle Name	Last Name	
Religion	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth	Place/Country of Birth	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Others (specify)		
State of Origin (Nigerians Only)		
Mother's Maiden Name	Phone	
Residential/Permanent Address		
Nationality		
Level of Qualification		
Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Others (specify)		
Occupation/Employment Segment	Appointment Date	
Company Name		
Company/Office Address		
Official Telephone Number	Official Email Address	

**Administrator's Details (3)**

Title	First Name	<b>Affix Current Passport Photograph</b>
Middle Name	Last Name	
Religion	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth	Place/Country of Birth	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Others (specify)	<b>Affix Current Passport Photograph</b>	
State of Origin (Nigerians Only)		
Mother's Maiden Name	Phone	
Residential/Permanent Address		
Nationality		
Level of Qualification		
Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Others (specify)		
Occupation/Employment Segment	Appointment Date	
Company Name		
Company/Office Address		
Official Telephone Number	Official Email Address	

**Administrator's Details (4)**

Title	First Name	<b>Affix Current Passport Photograph</b>
Middle Name	Last Name	
Religion	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth	Place/Country of Birth	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Others (specify)	<b>Affix Current Passport Photograph</b>	
State of Origin (Nigerians Only)		
Mother's Maiden Name	Phone	
Residential/Permanent Address		
Nationality		
Level of Qualification		
Employment Status <input type="checkbox"/> Employed <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Others (specify)		
Occupation/Employment Segment	Appointment Date	
Company Name		
Company/Office Address		
Official Telephone Number	Official Email Address	

**Estate Bank Account Details (Your Bank Account Name Details Should Correspond with CSCS Account Name)**

Bank Name	Branch/Address		
Account Name	Account Number		
Account Type	Sort Code	BVN	Date of Opening Bank Account

## Names & Signatures of Administrators

1. \_\_\_\_\_

3. \_\_\_\_\_

2. \_\_\_\_\_

4. \_\_\_\_\_

## Declaration and Rights to Set Off

I wish to open an estate account and confirm that the above information is true, I agree to be bound by the terms and conditions governing the operation of the account in particular. I hereby unreservedly confirm that if my account should become overdrawn and I fail to make good the overdrawn account within one week of a willing demand to do so, Interstate Securities may set the amount off against any other of my accounts or dispose off my shares to liquidate the outstanding balance. I hereby certify that the funds and sources of such funds and/or asset are legitimate and not directly or indirectly of any unlawful activity.

Signature and Date

Signature and Date

Signature and Date

Signature and Date

## Compliant Management Policy

We value our clients and endeavor to execute all instructions and mandates to the letter. We recognize however, that we are not infallible and operate in a market comprising of other operators, whose input is often required to give satisfactory effect to our clients' requests.

Our Policy provides that any complaint should be sent to our mailbox [info@interstatesecurities.com](mailto:info@interstatesecurities.com) or be letter delivered to our Head Office at, 14B Keffi Street, South-West Ikoyi, Lagos or Ibadan Branch, Ile - Itesiwaju, Oba Adebimpe Road, Ibadan.

Complaints sent by E-mail will be acknowledged within 2 (Two) working days and letters, within 5 (five) working days. Complaints will be resolved within 10 (Ten) working days.

However, where complaints remain unsolved and clients are not satisfied with our efforts or that of another Capital Market Operator, including Registrars and others, the matter can be escalated by the Client or us to the relevant competent authority, together with supporting documentation.

## Mode of Identification of Signatories

INTERNATIONAL PASSPORT

DRIVERS LICENSE

NATIONAL IDENTITY CARD

### For Official Use

I hereby confirm that the above client \_\_\_\_\_ of \_\_\_\_\_ Completed the application or signed in my presence and I have sighted the original supporting documents.

ACCOUNT OFFICER \_\_\_\_\_

APPLICATION VERIFIED BY ME: \_\_\_\_\_

COMPLIANCE OFFICER

### ORIGINALS AND PHOTOCOPIES OF THESE DOCUMENTS SHOULD BE PRESENTED (ORIGINALS FOR SIGHTING ONLY)

(1) Letter of Administration/Pr obate (2) Death Certificate and Newspaper Publication (3) Banker's Confirmation letter on Administrator's Signatures Address to ISL (4) Valid Means of Identification (5) Utility Bills of Administrators Address (6) Request Letter to open an Estate Account jointly signed by the Administrators.