

CORPORATE ACCOUNT OPENING FORM

Details of Company

Full Name of Company:

Company Short Name:

Date of Incorporation/Registration:

Place of Incorporation:

RC Number:

Business Sector:

Tax Identification Number:

 Company Type: Limited Liability Partnership Others (*specify*)

Company Address:

Postal Address:

Country where Company is located (if not Nigeria):

Phone Number:

Email Address:

Fax Number:

Website:

Purpose of Investment:

Source of Investment:

 Annual Average Turnover: less than 10m 50m Above 50m

Bank Account Details (Bank account Name & Details should correspond with the CSCS Account Name)

Bank Name:

Account Name:

Account Number:

 Account Type: Savings Current

Sort Code:

Account Opening Date:

Principal Contact Person (1)

Principal Contact Person (2)

Name:

Name:

Email Address:

Email Address:

Phone Number:

Phone Number:

Signature & Date:

Signature & Date:

Authorized Signatory (1)

Full Name:

 Date of Birth (*dd/mm/yyyy*):

 Gender: Male Female

Place of Birth:

Nationality:

Residential Address:

Phone Number:

Email Address:

 ID Type(*tick as applicable*): Driver's License Int'l Passport Voter's Card NIN

ID Number:

Expiry Date:

Bank Name:

Account Name:

Account Number:

 Account Type: Savings Current

BVN:

Account Opening Date:

Affix Current
Passport
Photograph

Authorized Signatory (2)

Full Name:		
Date of Birth (dd/mm/yyyy):	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Place of Birth:	Nationality:	
Residential Address:		
Phone Number:	Email Address:	
ID Type(tick as applicable): Driver's License <input type="checkbox"/> Int'l Passport <input type="checkbox"/> Voter's Card <input type="checkbox"/> NIN <input type="checkbox"/>		
ID Number:	Expiry Date:	Affix Current Passport Photograph
Bank Name:	Account Name:	
Account Number:	Account Type: Savings <input type="checkbox"/> Current <input type="checkbox"/>	
BVN:	Account Opening Date:	

Authorized Signatory (3)

Full Name:		
Date of Birth (dd/mm/yyyy):	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Place of Birth:	Nationality:	
Residential Address:		
Phone Number:	Email Address:	
ID Type(tick as applicable): Driver's License <input type="checkbox"/> Int'l Passport <input type="checkbox"/> Voter's Card <input type="checkbox"/> NIN <input type="checkbox"/>		
ID Number:	Expiry Date:	Affix Current Passport Photograph
Bank Name:	Account Name:	
Account Number:	Account Type: Savings <input type="checkbox"/> Current <input type="checkbox"/>	
BVN:	Account Opening Date:	

Authorized Signatory (4)

Full Name:		
Date of Birth (dd/mm/yyyy):	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Place of Birth:	Nationality:	
Residential Address:		
Phone Number:	Email Address:	
ID Type(tick as applicable): Driver's License <input type="checkbox"/> Int'l Passport <input type="checkbox"/> Voter's Card <input type="checkbox"/> NIN <input type="checkbox"/>		
ID Number:	Expiry Date:	Affix Current Passport Photograph
Bank Name:	Account Name:	
Account Number:	Account Type: Savings <input type="checkbox"/> Current <input type="checkbox"/>	
BVN:	Account Opening Date:	

Names & Signatures of Directors (with Mandate / Signing Instruction)

I. _____
 II. _____
 III. _____
 IV. _____

Questionnaire

1. Have you occupied any political position? Yes No Date: From _____ To _____

If 'Yes' please state the recent political position occupied: _____

2. Have any of your close relatives/associates occupied a political position? Yes No

If 'Yes', please state your relationship below:

i) Name and Position: _____ Date: From _____ To _____
 ii) Name and Position: _____ Date: From _____ To _____

3. How did you hear about us: Staff Relatives Website Social Media Others (specify) _____

Declaration and Rights to Set off

We wish to open an Estate account and confirm that the above information is true, we agree to be bound by the terms and conditions governing the operation of the account in particular. We hereby unreservedly confirm that if our account should become overdrawn and We 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 our accounts or dispose off our shares to liquidate the outstanding balance. We hereby certify that the funds and sources of such funds and/or asset are legitimate and not directly or indirectly of any unlawful activity.

Name, Signature and Date Name, Signature and Date Name, Signature and Date Name, Signature and Date

FOR OFFICIAL USE ONLY

Documentation Checklist

1. Completed Account Opening Form <input type="checkbox"/>	2. Proof of Address for all Directors & Signatories (Utility Bill) <input type="checkbox"/>
3. Means of Identification of Signatories <input type="checkbox"/>	4. Two Passport Photograph of Signatories <input type="checkbox"/>
5. Copy of Article & Memorandum of Association <input type="checkbox"/>	6. BVN Validation Printouts (For Signatories) <input type="checkbox"/>
7. Copy of Utility Bill of Company address (Not older than 3 months) <input type="checkbox"/>	8. Particulars of Shareholders <input type="checkbox"/>
9. Particulars of Directors Form CAC 7 (LTDs only) <input type="checkbox"/>	10. Return of Allotment of Shares Form CAC 2 (LTDs only) <input type="checkbox"/>
11. Copy of Certificate of Incorporation <input type="checkbox"/>	12. CSCS Direct Cash Settlement Form <input type="checkbox"/>
13. 13. Board Resolution / Management Approval stating a. Approval to open a stock broking account with ISL <input type="checkbox"/> b. The List of Authorized Signatories <input type="checkbox"/>	14. Banker's Confirmation from holder's bank addressed to ISL <input type="checkbox"/>
Documentation Status: Complete <input type="checkbox"/> Incomplete <input type="checkbox"/>	Risk Rating : High <input type="checkbox"/> Low <input type="checkbox"/>

Delivered By: Email Company Representative Self Others (Specify)

Documents Received By: (Name/Signature/Phone Number)

Documents Received By (Staff Name):	Sign & Date:
Location/Branch:	Initial Deposit:
Head of Department:	Sign & Date:
Compliance Officer:	Sign & Date:

ISL Policies and Process

Complaint 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 or be letter delivered to our Head Office at, 14B Keffi Street, South-West Ikoyi, Lagos or Ibadan Branch, 9, Onireke Residential Layout, Dugbe, Ibadan, Oyo State.

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.

Email & SMS Indemnity

I / We hereby indemnify Interstate Securities Limited against any precarious liabilities that may arise as a result of honoring My / Our Mandates, Instructions sent via My / Our telephones and electronic mails.

Privacy Notice

We are committed to protecting your personal data disclosed to us. Therefore, we will ensure that your data is collected and kept securely for the specific purpose, processed lawfully and retained not longer than necessary. We will use the personal data you provide only for the purpose of stockbroking activities. For details, please read up our Privacy Policy through this link https://www.interstatesecurities.com/document/PRIVACY_POLICY.pdf on our website.

Best Execution Policy

Best Execution Policy is the process where a Dealing Member Firm obtains the best possible result for its clients' instructions, taking into account the price, costs, speed, likelihood of execution and settlement.

We will adopt the best execution policy always, subject to any specific instructions the client may give. We will not execute orders at our discretion except signed mandates by clients expressly indicating their request with no ambiguity is provided. Client's account must be funded (BUY), mandates duly filled & signed and KYC documents updated before any settlements of sales proceeds are made.

Risk Disclosure Statement For Trading in Financial Instruments

This document contains important information for trading in financial instruments listed on the Nigerian Stock Exchange ("NSE" or "the Exchange"), and other trading Platforms, including NASD and FMDQ ("Other Platforms"). All Clients and prospective Clients, should read this document before trading in financial instruments listed on the Exchange or other Platforms.

You must know and appreciate that trading in equities or other financial instruments traded on the Exchange and other Platforms, may result in losses as well as in gains. Equities and other financial instruments have varying elements of risks and trading in such instruments on the Exchange or other Platforms is generally not an appropriate avenue for someone of limited resources/limited investment and/or trading experience and low risk tolerance. You should therefore carefully consider whether such trading is suitable for you in the light of your financial condition and knowledge. If you trade on the Exchange or other Platforms whether through a Mandate executed by an authorized dealer in ISL, or by yourself, through our online trading portal and suffer adverse consequences or loss, you shall be solely responsible for the same and Interstate Securities Limited ("ISL"), the Exchange, or other Platforms shall not be responsible, in any manner whatsoever, for any losses or adverse consequences. This exemption from responsibility also applies to the Clearing Houses and Depositories that maybe involved in clearing and settlement of trades, including the Central Securities Clearing System Limited ("CSCS").

It will not therefore be open for you, to claim that adequate disclosure regarding the risks involved was not made, or that sufficient explanation of the full risk involved was not provided by ISL. Clients shall be solely responsible for the consequences of trades and no contract can be rescinded on that account. As a client, you must acknowledge and accept that there can be no guarantee of profits and no exception from losses, while executing orders for purchase and/or sale of equities or other financial instruments being traded on the Exchange or other Platforms.

It must be clearly understood by you that your dealings on the Exchange or other Platforms through a Stockbroker/ISL shall be subject to your fulfilling certain formalities set out by the Stockbroker/ISL, which inter alia, will include your filling the Know-Your-Client ("KYC") Form, and that both you and the Stockbroker/ISL are subject to the rules and regulations, byelaws, circulars and guidelines in force from time to time, set by the relevant Competent Market Authority ("CMA"), Self-Regulatory Organizations, Capital Market Trade Groups or Associations such as the Securities and Exchange Commission, the NSE, CSCS, as well as other governmental agencies.

No consideration to trade should be made without thoroughly understanding and reviewing the risks involved in such trading. If you are unsure, you must seek professional advice on the same. In the light of the risks involved, you should undertake transactions only if you understand the nature of the relationship in to which you are entering and the extent of your exposure to risk.

Kindly visit our website at www.interstatesecurities.com to learn more on the risks.

Consent Clause

By signing this form, I/WE understand how my/our data will be used and consent to its use as stated in your privacy policy. For details, please read up the Privacy Policy through this link <https://www.interstatesecurities.com/PRIVACY-POLICY/> on the website.

Clients Acknowledgement

I/We confirm receipt of all these policies and processes including the Risk Disclosure Statement and have read, understood and agree to the contents therein;

Name of Account Holder: _____

Signature of Account Holder: _____

Name of Joint Account Holder: _____

Signature of Joint Account Holder: _____

Dated this _____ day of _____, 20____

InterTrade

Introducing our OMS trading platform..

We are pleased to introduce to you; our ever loyal clients Interstate Securities OMS trading platform. The features of this platform includes the following:

1. Ability to access the market online, real time.
2. Ability to send mandate directly to our trade stations in the course of market activities.
3. Access to your account balances.
4. Daily price list.
5. Immediate trade alerts on transactions

Acceptable Use Policy on OMS

Disclaimer: Carefully consider your investment objectives, the risks, charges and expenses involved in Investing in the Nigerian stock market. It's important to note that the same way profits can be made in the market, losses can also be made as well. This therefore implies that a good knowledge of the market is required before actively investing in the stock market. Market volatility, trading volumes, systems performance and other factors may delay system access and response times. Execution prices, speed and liquidity are affected by many factors which ranges from demand and supply of the stock, the queue priority etc. Interstate Securities will therefore not be liable for any losses emanating from these factors. Likewise, you are responsible for any errors emanating from your entries on mandates sent to our trade station in respect of stocks and quantities to either buy or sell.

Security Issues

You are responsible for the security of the services used; Interstate Securities will not be responsible for the consequences of your failure to employ adequate security measures (i.e. loss or corrupted files, identity theft and fraud).

If we identify that your account is being used to compromise the integrity of the trading platform, we reserve the right to suspend or disconnect your services without notice.

You must keep your password(s) confidential and secure. If you think your password has become known to any unauthorized persons or maybe used in an unauthorized way you should take steps to change your password immediately.

Clients Acknowledgement

I, _____ the undersigned, have read and understood the acceptable Use Policy and agree to its terms. I will strictly adhere and be accountable for any misuse emanating from me.

Title: _____

Name: _____

Signature: _____

E-Mail Address: _____

Phone Number: _____

Dated this _____ day of _____ 20_____

Asterisked () Fields Are Compulsory*