

INDIVIDUAL ACCOUNT OPENING FORM

PERSONAL DETAILS:	
First Name:	Middle Name:
Last Name:	Mother maiden Name:
Phone Number:	———— Sex: Male 🗖 Female 🗖
Date of Birth:	
Nationality:	Marital Status: Single ☐ Married ☐ Divorced ☐
State	
	Nationality:
Present Address:	
Email Address:	
CAREER/EMPLOYMENT	
Occupation:	
Employer's Address:	
Employment Status: Salaried Earner Self-	-Employment□ Retired □ Unemployed □ Student□
Expected Annual Income: Less than \$1M	1M to ₦5M
Source of Fund: Salary□ Business Income □ In	nvestment/Sale of Property Personal Savings Others
BANK DETAILS	
Bank Name	NEXT OF KIN DETAILS
Account Name:	Name:
Account Number:	Phone Number:
Bank Verification Number:	
Bank Account Opening Date:	
ACCOUNT TYPE	

Kindly select your preferred account type: Collective Investment Schemes Fixed Income ☐ Foreign Currency Investment ☐ Investment Plans ☐ Separately Managed Accounts ☐ Stockbroking with Existing CHN ☐ Stockbroking with New CHN ☐ Others ☐

PORTFOLIO MANAGEMENT (FOR INVESTMENT MANAGEMENT CLIENTS ONLY) Separately Managed Accounts: Discretionary Portfolio Management Account Non-Discretionary Portfolio Management **Investment Plans** Balanced ☐ Conservative ☐ Ethical ☐ Growth ☐ Guaranteed ☐ Other ☐ QUESTIONNAIRE. A. INVESTMENT OBJECTIVE: WEALTH ACCUMULATION | FUTURE COMMITMENT | RETIREMENT | B. INVESTMENT EXPERIENCE: LIMITED ☐ GOOD ☐ EXTENSIVE ☐ NONE ☐ C. INVESTING EXPERIENCE: NONE ☐ 1-2 YEARS ☐ 2-5 YEARS ☐ OVER 5 YEARS ☐ D. INVESTMENT TIME FRAME: LESS THAN 1YEAR ☐ 1-2YEARS ☐ 2-5 YEARS ☐ OVER 5YEARS ☐ E. ARE YOU A PERMANENT RESIDENCE OF ANY OTHER COUNTRY? YES NO IF YES. KINDLY ENSURE TO FILL THE FATCA FORM ATTACHED. F. HAVE YOU OCCUPIED ANY POLITICAL OFFICE? IF YES, KINDLY STATE THE LAST TWO (2) POLITICAL OFFICES OCCUPIED. 1. _____ Date: from _____ to ____ 2. ______ Date: from _____ to _____ g. Have any of your close relatives/associates occupied a political office? Yes \square No \square If yes, kindly state the names and your relationship with such person: 1. Name _____ Relationship: Position Held: ______ to _____ to ____ 2. Name_____ Relationship: Position Held: ______ bate: from _____ to _____

I,attest that the information provided herein is accurate and would notify Financial Trust Company Nigeria Limited to update my record where any

The following documents are required for account opening and validation

1. Utility Bill

change occurs

2. Passport Photograph

Signature: _____

3. Valid Means of Identification Card (Preferably NIN)