

AGENCY / INTERMEDIARY





CATEGORY OF BUSINESS		
Fund Managers	Brokers Custodian	Others
If Other, Please Specify		
*COMPANY DETAILS		
Company / Business Name:		
Certificate of Incorporation Number:		
Date of Incorporation / Registration:	D D M M Y Y Y	
Jurisdiction of Incorporation / Registration:		
any):		
Type / Nature of Business:		
Sector / Industry:		
Principal Place of Business:		
Company Postal Address:		
Digital Address(GhanaPost GPS):		
Email Address:		
Website Address (if any):		
TIN: *STATEMENT SERVICES		
Mode of Statement Delivery:	Email By post	SMS Collection
Statement Frequency:		her additional statement frequency
*EXPECTED ACCOUNT ACTIVITY		
Source of Funds:	Member Proceeds fro	Others
If Other, please specify:		
*KEY CONTACT PERSON		
Surname:		
First Name:		
Other Name(s):		
Date of Birth:	D D M M Y Y Y	Gender: Male Female
Residential Status:	Resident Ghanaian	Non-Resident Ghanaian
	Resident Foreigner	Non-Resident Foreigner
If country of origin is not Ghana, please provide the fo	ollowing: Resident Permit Number	Permit Issue Date
	Place of Issue	Permit Expiry Date
ID Type:	Voters ID Drivers License	SSNIT Biometric Card National ID
Passport  Job Title:	Voters ID Drivers License	331411 biometric Cara INdrional ID
Permanent Address:		
Email Address:		
Contact Number 1:		
Contact Number 2:		
*SIGNATORY DETAILS 1		
Surname:		
First Name:		
Other Name(s):		
Date of Birth:	D D M M Y Y Y	Gender: Male Female
Residential Status:	Resident Ghanaian	Non-Resident Ghanaian
if a first collaboration of the	Resident Foreigner	Non-Resident Foreigner
If country of origin is not Ghana, please provide the fo	Resident Permit Number	Permit Issue Date
	Disconsistance	Descrit Familia Dest
	Place of Issue	Permit Expiry Date
ID Type:		
Passport	Voters ID Drivers License	SSNIT Biometric Card National ID
Job Title:		
Email Address:		
Contact Number 1: Contact Number 2:		

*SIGNATORY DETAILS 2					
Surname: First Name: Other Name(s): Date of Birth: Residential Status:	Resident Ghanaian Resident Foreigner	YYYY	Gender: Non-Resident Non-Resident	Ghanaian	Female
If country of origin is not Ghana, please	<b>provide the following:</b> Resident Permit Number		Permit Issue D		
	Place of Issue		Permit Expiry	Date	
ID Type: Passport	Voters ID D	rivers License	SSNIT Bion	netric Card	National ID
Job Title:					
Email Address:					
Contact Number 1:					
Contact Number 2:					
*SIGNATORY DETAILS 3					
Surname: First Name:					
Other Name(s):					
Date of Birth:	D D M M Y	YYYY	Gender		Female
Residential Status:	Resident Ghanaian		Non-Resident		
If country of origin is not Ghana, please	Resident Foreigner		Non-Resident	roreigner	
com, e. cg o ca, p.cacc	Resident Permit Number		Permit Issue D	ate	
	Place of Issue		Permit Expiry	Date	
ID Type:					
Passport	Voters ID Driv	vers License	SSNIT Biome	etric Card	National ID
Job Title: Email Address:					
Contact Number 1:					
Contact Number 2:					
*BANK ACCOUNT DETAILS					
Bank Name	Account Name	Account Numbe	er	Bank Bran	ch
*EMAIL / TELEPHONE / FAX INDEMNITY To be drafted based on company's operations  *ACCOUNT MANDATE					
Name of Signatory			Signature Spe	cimen	
Name of Signatory			Signature Spe	cimen	
One to sign	Either to sign A	ll to sign	0	thers	
*TERMS AND CONDITIONS					
To be drafted based on company's operations					
To be draited based on company's operations					

*DECLARATION							
I/we		hereby declare th	at all the information sub	mitted by m	e/us in this form	n is correct, true and	d valid.
that by my/our request,	to open andmaintain	securities account(s) in my/o					,
my/our particulars or in	ntormation as may be we have read thoroug	e necessary. hly and understood theconten	ats of this applicationan	d have aiver	n my/our conser	nthy virtue of	
my/our signature(s) on	this form.						
		ny/our prerogative without so direct or consequential loss			e received from	(Company name).	
		my/our securities account(s)			all be settled by	me/us accordingly	
Name:		Signo	ature:			Date:	
				_			
TERMS OF DECLARA	TION						
To be drafted based or	n company's oper	rations					
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head of state/governm	nent, politician, se	enior public official, seni	or military offical, se	enior publi	c corporation	n officer, high ra	nk
olitical party official in	•	•	-	•	•	-	
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head of state/governme	ent, politician, seni	or public official, senior r	military offical, senior	public corp	poration office	er, high rank poli	tical party
fficial outside Ghana.	YES / NO						
	:6						
yes to any above, plea	se specify name c	and nature of the positio	n:				
, , ,		and nature of the positio	n:				
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yes to any above, please very	ROFILE			ch client IE Hig		were screened	
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