

# Corporate Account Opening Form.

PLEASE COMPLETE IN BLOCK LETTERS

## Basic Information

Name of Company/Estate

Registration Number  Date of Incorporation  /  /

Local Entity  Foreign Entity

## Contact Details

Registered Address

Telephone 1 (Office)  Telephone 2 (Office)

Email Address

## Contact Persons

Name of Signatory/Administrator/Executor 1:

Address

Phone Number  BVN

Email Address

Role  TIN (TAX ID)

Attach Passport Photo

Name of Signatory/Administrator/Executor 2:

Address

Phone Number  BVN

Email Address

Role  TIN (TAX ID)

Attach Passport Photo

## Company/Estate Bank Details

BVN

Bank 1 (Main Account)  Bank 2

Account Number 1  Account Number 2

## Trust Products

Debentures  Collective Investment scheme  Cordros Voluntary Retirement Trust

Bulk Wills  Bonds  Staff Share Option Scheme

## Duration

Proposed commencement of Trust  /  /  Duration of Trust

## Funding options

Monthly  Quarterly  Lump sum  Annually  Semi Annually  Others

## Funding Mode

SPO (Standing Payment order)  Cheques  Funds Transfer

Is any signatory a Political Exposed Person or Affiliated to a Politically Exposed Person? Yes  No

If yes, please give details

|             |      |             |      |
|-------------|------|-------------|------|
| Signature   | Date | Signature   | Date |
| Designation |      | Designation |      |

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## Debit Authorization

I/WE hereby authorize a monthly debit of my account number \_\_\_\_\_ with \_\_\_\_\_ Bank to the tune of NGN \_\_\_\_\_ in favor of Cordros Trustees Ltd on the \_\_\_\_\_ day of \_\_\_\_\_

### Beneficiary 1

|               |   |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
|---------------|---|--|-------------------------------|--|---|---|-------|--|---|--|--|--|--|--|--|--|-----------------------------|--|--|
| Title         | Mr. <input type="checkbox"/>  |  | Mrs. <input type="checkbox"/> |  | Ms. <input type="checkbox"/>                            |   | Other |  | <input style="width: 100%;" type="text"/> |  |  |  |  |  |  |  | Attach<br>Passport<br>Photo |  |  |
| Full Name     | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Date of Birth | <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> |  |                               |  |   | Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Address       | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Relationship  | <input style="width: 100%;" type="text"/>   |  |                               |  | Email Address <input style="width: 100%;" type="text"/> |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Phone Number  | <input style="width: 100%;" type="text"/>   |  |                               |  |   |   |       | % of AUM to be Allocated <input style="width: 100%;" type="text"/> |   |  |  |  |  |  |  |  |                             |  |  |

### Beneficiary 2

|               |   |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
|---------------|---|--|-------------------------------|--|---|---|-------|--|---|--|--|--|--|--|--|--|-----------------------------|--|--|
| Title         | Mr. <input type="checkbox"/>  |  | Mrs. <input type="checkbox"/> |  | Ms. <input type="checkbox"/>                            |   | Other |  | <input style="width: 100%;" type="text"/> |  |  |  |  |  |  |  | Attach<br>Passport<br>Photo |  |  |
| Full Name     | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Date of Birth | <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> |  |                               |  |   | Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Address       | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Relationship  | <input style="width: 100%;" type="text"/>   |  |                               |  | Email Address <input style="width: 100%;" type="text"/> |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Phone Number  | <input style="width: 100%;" type="text"/>   |  |                               |  |   |   |       | % of AUM to be Allocated <input style="width: 100%;" type="text"/> |   |  |  |  |  |  |  |  |                             |  |  |

### Beneficiary 3

|               |   |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
|---------------|---|--|-------------------------------|--|---|---|-------|--|---|--|--|--|--|--|--|--|-----------------------------|--|--|
| Title         | Mr. <input type="checkbox"/>  |  | Mrs. <input type="checkbox"/> |  | Ms. <input type="checkbox"/>                            |   | Other |  | <input style="width: 100%;" type="text"/> |  |  |  |  |  |  |  | Attach<br>Passport<br>Photo |  |  |
| Full Name     | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Date of Birth | <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> |  |                               |  |   | Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Address       | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Relationship  | <input style="width: 100%;" type="text"/>   |  |                               |  | Email Address <input style="width: 100%;" type="text"/> |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Phone Number  | <input style="width: 100%;" type="text"/>   |  |                               |  |   |   |       | % of AUM to be Allocated <input style="width: 100%;" type="text"/> |   |  |  |  |  |  |  |  |                             |  |  |

### Beneficiary 4

|               |   |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
|---------------|---|--|-------------------------------|--|---|---|-------|--|---|--|--|--|--|--|--|--|-----------------------------|--|--|
| Title         | Mr. <input type="checkbox"/>  |  | Mrs. <input type="checkbox"/> |  | Ms. <input type="checkbox"/>                            |   | Other |  | <input style="width: 100%;" type="text"/> |  |  |  |  |  |  |  | Attach<br>Passport<br>Photo |  |  |
| Full Name     | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Date of Birth | <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> |  |                               |  |   | Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Address       | <input style="width: 100%; height: 20px;" type="text"/><br><input style="width: 100%; height: 20px;" type="text"/>  |  |                               |  |   |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Relationship  | <input style="width: 100%;" type="text"/>   |  |                               |  | Email Address <input style="width: 100%;" type="text"/> |   |       |  |   |  |  |  |  |  |  |  |                             |  |  |
| Phone Number  | <input style="width: 100%;" type="text"/>   |  |                               |  |   |   |       | % of AUM to be Allocated <input style="width: 100%;" type="text"/> |   |  |  |  |  |  |  |  |                             |  |  |

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## Declaration

- I/We declare that I am at least 18 years old
- I/We am acting on behalf of my child/ward.
- That past performance is not a guide to future returns. The value of investments and income from them may go down as well as up.
- I/We agree that:  
The redemption process takes 3-5 working days and a draft or fund transfer is made in favor of the unit holder (as the name appears on this form and all requests for redemption shall be on the redemption form.

## Document Checklist

- Documents: CAC Form 1.1, Form CO2 and CO7, Memart and Certificate of Incorporation.
- Board resolution authorizing the opening of this account and appointing signatories.
- Valid means of identification for all directors and appointed signatories.
- Passport photo of signatories
- Signature Mandate for Signatories
- Utility Bill for the company and signatories

## Terms and Conditions

- You agree that all transactions carried out on your account are subject to the provisions of the Money Laundering (Prohibition) Act 2011 of the Federal Republic of Nigeria and hereby agree to carry out your responsibilities under the Act. Furthermore, you agree that Cordros is required by regulation to report all suspicious transactions to the relevant regulatory bodies.
- Cordros reserves the right to record any telephone conversations between you and any member of Cordros' staff and you acknowledge that this is in line with international best practice and shall be done solely for the purpose of resolving any disputes which may arise concerning telephone advice or instructions.
- All redemption proceeds shall be transferred to the dedicated Bank Account Number provided by you in this form only and Cordros is not obligated to honor any other bank account other than that provided by you, unless you have taken steps to substitute the bank account on our records in writing by completing the update form, which content shall take effect immediately upon submission. Please note that third party payments are not allowed and Cordros is not obligated to honor such requests. All redemption proceeds shall be paid only to the registered beneficiary's account.
- Should you have cause to suspect that your bank account details have been compromised by unknown third parties, you are obligated to inform us immediately, failure of which Cordros will not be held responsible for any fraud committed on your chosen bank account subsequent to the transfer of your redemption proceeds.
- All deposits into Cordros' account on your behalf shall be made directly from your bank account. Funds deposited by third parties shall not be honored by Cordros and that you agree that such funds will be returned to the source account less applicable bank charges.
- You permit us to issue notices required in relation to the operation of your account, legislation or regulation by making such notification available via our communication systems or sending such notification by email, SMS or similar future technologies. Any notices so issued by us, will as far as they contain contractual terms relating to your Cordros Money Market Fund Account, also form part of this agreement.
- In the unlikely event that you are dissatisfied with our services, you are to bring such dissatisfaction to our attention, and such complaints received by Cordros will be treated timeously in accordance with Cordros' Client Complaint Management Policy and applicable rules and regulations.
- Cordros shall take all reasonable precautions to preserve the integrity and prevent any unauthorized use or loss, damage or destruction of your data and information.
- Cordros shall not be liable for any delay in performance attributable to a cause beyond its reasonable control, and it is agreed that force majeure shall mean acts of nature such as earthquake, floods, tornadoes, fire; actions or inaction of government; war, civil disturbance, insurrection, vandalism, sabotage; strikes or other industrial disputes; exchange or market rulings; any act neglect or default of the other Party, or any cause outside Cordros' reasonable control.
- You declare that you are the sole beneficial owner(s) of the funds/assets to be deposited within the Fund. You also acknowledge that the funds and source of such funds are legitimate and not directly or indirectly the proceeds of any unlawful activity.
- You also agree to be bound by any review, changes or amendments made to the terms and conditions stated in this document, which may occur from time to time. Provided you receive written notification of such changes via your agreed means of communication.
- You agree that all documents you provide are valid and authentic and Cordros is authorized to verify any or all of the information provided by you.

## Email Indemnity

I/We hereby consent to the use of electronic mail, and by this consent, I/we unequivocally agree that instructions transmitted by electronic mail be binding for all purposes, including for purposes of evidence. I/We irrevocably undertake and warrant that I/We shall not make any demand or claim, or institute any action against Cordros Asset Management Limited (Cordros) should I/We suffer any loss or liability as a result of my/our consent to the use of electronic mail.

I/We agree to indemnify and hold Cordros harmless against all claims, demands, actions and proceedings which may be made or instituted against Cordros; and all liabilities, losses, damages which may be suffered by Cordros in connection with or arising as a result of my/our consent to electronic mail or Cordros' reliance on any instruction issued from my/our email account indicated herein or subsequently communicated by me/us or my/our nominated investment adviser or any other person I/we authorize to manage my/our account.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

AUTHORIZED SIGNATORY

AUTHORIZED SIGNATORY

## FOR CORDROS' USE ONLY

Client's Account Number

Product Name

Relationship Officer's Name

Compliance Approval

Approving Officer's Name

Signature

Date

Signature

Date

Signature

Date