

Individual Account Opening Form

Lambeth Trust and Investment Company Limited
RC508344

Investment Information

Primary Objective:

Capital Preservation Income Aggressive Growth Others _____
(Please specify)

Secondary Objective:

Tax Maximisation Liquidity Others _____
(Please specify)

Time Horizon

Less than 1year Less than 2years More than 2years Others _____
(Please specify)

Risk Tolerance

Low Moderate High Others _____
(Please specify)

Investment Knowledge

Beginner Modest Experienced Professional Others _____
(Please specify)

Title Surname: _____

Other Names: _____

Marital Status: Single Married Others _____
(Please specify)

Residential Address (not P.O. Box) _____

Mailing Address: _____

Telephone

Mobile: _____ Office: _____ Home: _____

Email: _____

Date of Birth: / /
Day Month Year Nationality: _____

State of Origin: _____ Local Govt of Origin: _____

Place of Work: _____

Address of Place of Work: _____

Tax Identification No: _____

ID Type: Int'l Passport Driver's Licence National ID Others _____
(Please specify)

ID No.: _____

Date Issued / / Place of Issue _____
Day Month Year

Foreigners' Resident Permit No: _____ Permit Validity: _____

Mother's Maiden Name: _____ Spouse's Name: _____

Type of Account: Stock broking Asset Mgt Portfolio Mgt
(Please tick type of Account (s) you want to open)

Preferred Means of Communication: Email Telephone Others _____
(Please specify)

Referee's Name: _____

Email: _____ Phone No.: _____

Signature (for mandate purposes). Please sign within the box

Passport
Photograph

Date: ___ / ___ / _____

NEXT OF KIN

Names: _____

Relationship: _____ Mobile No.: _____

Contact Address: _____

BANK ACCOUNT INFORMATION

Name of Bank: _____

Address of Bank: _____

Account Type: _____

Account Number: _____

Sort Code: _____

Date account was opened: _____

PLEASE STATE ACCOUNT HOLDER’S SOURCE OF FUNDS

Estimated Annual Income Estimated Networth

POLITICALLY EXPOSED PERSONS (PEP)

The Anti Money Laundering and Combating Financing of Terrorism Acts require that all our clients declare if they are politically exposed. Politically exposed persons (PEP) are those holding political office in Nigeria or elsewhere or their immediate family members. If applicable, please state below:

Full Name of person holding the post: _____

Political Position Held: _____

Relationship with PEP _____

Level: _____
(Federal, State or Local govt)

Name of State or Local Govt: _____

Date Appointed or Elected / /
Day Month Year

DECLARATION

I confirm that all the information provided in this form are correct and accurate. By signing this application form, I apply for an account with Lambeth Trust and Investment Company Limited and agree to be bound by the terms and conditions of the account if this application is accepted. If I am signing under a Power of Attorney, I declare that the Power of Attorney has not been amended or revoked.

Signature _____

FOR OFFICE USE ONLY					
Checklist of attached documents					
	YES	NO	WAIVED	DEFER	UNTIL
Copy of Identification: Driver’s license or International Passport or National ID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>
One passport size photograph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>
Copy of utility bill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>

The applicant(s) was/were interviewed by me by telephone/in person (delete as appropriate).

I recommend that aAccount be opened as requested.

Account Officer's Name:Signature: Date:

Head of Unit's Name:Signature: Date:

Executive Management Remarks:

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Head of Operations: Date: