



SMADAC SECURITIES LIMITED (RC 460957)
(Member of The Nigerian Stock Exchange)

INDIVIDUAL INVESTMENT APPLICATION FORM

Personal Data

Title: Mr. Mrs. Ms. Other.

Name of Investor(s):

Date of Birth: State of Origin:

L.G. Area: Nationality:

International Passport/Driver's License/National ID No.:

Issue Date: Expiry Date:

Residential Address: (Street Number)

Tel. Home: Bus: Fax:

Mobile No. E-mail:

Occupation:
(If Business, Please State Type of Business E.G. Contractor)

Mailing Address: (if different from above)

Mother's Maiden Name (Surname):

Next of Kin:

Relationship to Applicant:

Next-of-Kin Contact Address: (if different from applicant's):

Purpose/Reason for opening the account:

Source of Income:

Initial Investment: (Cheques):

CURRENT ACCOUNT BANK DETAILS (Your Bank Account Name Details should correspond with CSCS Account Name)

Bank Name: Branch:

Account Name: Account Number:

Bank Account Opening Date: BVN:



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For Office Use Only

Account Officer's Name:

Account Officer's Signature & Date:

Client's Account Number:

CSCS (CHN) Number:

Introduced By:

Checklist

S/N	Details for Individual Account	Yes	No	Waived
1.	Duly completed Account Opening Form with two recent clear passport photographs with Names & Signature on the reverse side			
2.	Means of Identification (Copy of International passport, Driver's License & National ID Card)			
3.	Proof of address - Utility Bill. (PHCN/Water/Telephone Bill)			
4.	Minimum Initial Deposit			
5.	Visitation Report			

Account Waiver Approved By:

Compliance Manager:

Signature:



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TERMS AND CONDITIONS

Mandate

The Clients agree that his/her mandate is subject to the rules and regulations of the Securities and Exchange Commission (SEC) and the Nigerian Stock Exchange (NSE). Where a purchase mandate is dependent on the sales proceeds of stocks, the purchase mandate will not be executed until the sales transaction has been executed. The sale mandate will also be executed even if the stocks to purchase are not available.

Transmission of information

The client acknowledges that there are certain risks associated with conveying instructions by facsimile, text message, post and/or email, and hereby fully waive, discharge and indemnify SMADAC Securities Limited in respect of any loss or damages resulting from the use of facsimile, text messaging, postal or e-mail instruction. Where confirmation of a transaction is transmitted to the Client through an electronic medium, SMADAC Securities Limited will not be liable to the Client or to any other person receiving the confirmation for or in respect of any direct, indirect or consequential liability, loss, damage or cost of any kind or nature resulting from the use of facsimile, text messaging, postal, or e-mail instructions sent through an electronic medium, whether or not as a result of the destruction of date, system malfunction, interruption of communication links or any other problem over which SMADAC Securities Limited has no control.

Account Statement

The client undertakes to carefully peruse and consider all statement rendered and forthwith advise SMADAC Securities Limited within 7(Seven) days, in writing, if there is anything contained in such statement that is not understood or that is believed to be incorrect.

Fees

The Client agrees that in consideration for the services provided by SMADAC Securities Limited in terms of this mandate, SMADAC Securities Limited shall be entitled to the management fees for Discretionary Portfolio Management set out and as amended from time to time in writing. The Client agrees to pay fees and commissions in accordance with SMADAC Securities Limited fees and commissions schedule which is subject to change from time to time at SMADAC Securities Limited discretion. The Client agree that all expenses relating to managing the assets in his/her account including but not limited to statutory transfer and redemption fees shall be deducted from his/her account **Non-Disclosure**

The Clients agrees to keep confidential any information about SMADAC Securities Limited regarding advices and trading practices. SMADAC Securities Limited in turn agrees not to divulge my/our information to any third party except as required conducting their duties and as may be required by law.

Funding Account in Debit

Purchase of Stock into client's unfunded account is allowed only in cases where there is a formal approval from the appropriate authorities and must not exceed four(4) days, transaction day plus 3(three) days (i.e T + 3).

Where the execution of the valid mandate throws the account into debit an overdraft position is created. Any sum standing to the debit of client's account as a result of this overdraft position and not liquidated after 4(four) days shall automatically be liable to interest charges at a prevailing market rate. SMADAC Securities Limited is authorized to debit client account with usual charges, commission and interests for such facilities.

Anti-Money Laundering

The Client agrees that its transactions are subject to the provisions of the Money Laundering (Prohibition) Act 2011 of The federal Republic of Nigeria and hereby agrees to carry out his/her responsibilities under the Act. Furthermore, the client agrees that SMADAC Securities Limited is required by regulation to report all suspicious transactions to the relevant regulatory bodies.

Third party Payments

The client agrees that payments of proceeds of investment from his/her account shall only be to the client. No 3rd party payments instruction shall be honoured as SMADAC Securities Limited is not obligated to honour such requests.

Verification of Certificates

To facilitate prompt verification of certificates, clients should endeavor to attach copies of share application form, dividend warrants and banker's confirmation of the client's signature as the case demands. SMADAC Securities Limited will not be responsible for verification delays due to incomplete documentation, irregular signature issue or any other reasons outside its sphere of control.

Confirmation

I/We confirm assent to be bound by the terms and condition stated above and also the information provided herein is accurate and would notify you to update my/our records where and whenever any changes occurs

Client Name:

Signature:

Date:

****PLEASE THUMB PRINT**

Right thumb Print



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VISITATION REPORT

This is to certify that (Client's Name):

Was visited on and hereby confirm that it is the residence

of

Client's Address:

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DESCRIPTION OF RESIDENT

Account's Officer Name:

Signature:

Date: