(d)

Indertake not to hold you responsible for delays in the collection of orders due to breakdown or failure of ransmission or communication in the collection of communication or control of 30 days counted in con

CentrePointInvestments
Limited

### WEIVE MEMBER OF THE NIGERIAN STOCK EXCHANGE

#### **Head Office:**

Nigerian Girls Guide Association (NGGA) Building 16, Omo-Osagie Street, Off Awolowo Road, S. W. Ikoyi, Lagos. Tel: 08182276708, 08023368979, 08023171118. E-mail: centrepointng@yahoo.cominfo@centrepointng.com

# (APPLICATION FOR OPENING OF STOCKBROKING ACCOUNT)

. 1///	e/Chief/Dr./Alhaji/Mr./Mrs./Miss:
acco	hereby make application to open a stockbroking ount with Centre-Point Investments Limited. ("Centre-Point").
In c Cer	onsideration for your agreement to establish the said account, I/We hereby appoint atre-Point Investments Limited as my/our stockbroker and:-
(a)	undertake at all times to maintain a credit balance of N 2000,00(TwoThousand /Naira) in my/our account with you.
(b)	authorize you to purchase, sell securities and other ancillary services on my/our behalf and to pay all commission, fees, duties, interest, taxes and other expenses etc in connection with such services rendered.
(c)	authorize you to send all communication to me /us at the address given below or to suc other address as I/we may from time to time given in writing. All communication so ser

Aba Branch:

account.

117,Camerom Road, Aba. Tel: 08036489299 Fax: 01-4631594 Abuja Branch:

Suite G18 Febson Mall (Former Russel Centre) Zone 4, Wuse Abuja Tel: 08033154816

whether by mail, telegraph, messenger or otherwise shall be deemed to be given to me/us

personally whether actually received or not, and the cost thereof shall be for my/our

Kano Branch:

Union Bank Building, 37, Niger Street, P.O. Box 217, Kano. Tel: 08023727972

- (d) undertake not to hold you responsible for delays in the transmission of orders due to breakdown or failure of transmission or communication facilities or for any other causes beyond your reasonable control or anticipation.
- (e) Authorize you to charge interest at the prevailing market rate per month of 30 days counted from the appropriate settlement date on any debit balance on my/our account in your books.
- (f) Authorize you to sell any securities held by you in my/our behalf if the debit balance on my/our account at any time exceeds 50% of the market value of the securities.
- (g) Authorize you to debit my/our account with your annual ledger fee (currently N1000.00p.a.). This is however subject to review by management

Signature & Date

### **Contract Conditions**

- Our contract notes will be forwarded to your e-mail automatically or provided on demand as evidence of any transactions made.
- 2. Full Statement of Account will be provided / forwarded to your e-mail on demand.

1.	Name (Surname First):	For Office Use Only	
2.	State of Origin:		Date of Birth:
4.	L.G.A.:	5.	Sex:
6.	Drivers Licence No/Passport	No:	
7.	Residence:		Effective Data:
	en millipa		Superitrophone Sales Sales
8.	CHN(CSCS no.):		
9.	Telephone:		(1) levotgqA
10.	Business/ Occupation:		(%)
11.	E-mail:	totaentCl to liveons y	
12.	Address for correspondence:		essetti.
		,	
13.	Mother's Maiden Name:		
14.	Next Of Kin:		
15.	Phone no. of next of kin:	16. Next o	f Kin CHN NO.:
17.	Contact Person in Centrepoir	nt:	
18.	If married, please state spous	se's Name & address:	
		Bank Name/ Branch:	
19.	Bank Hetails.		ct.):
		Account Number:	
20.	BVN Details:		
21.	Client's Signature:		
DOCL	JMENTATION REQUIREMENT	S:	
	Passport Photographs		
	tility Bill (PHCN, Water Bill etc)		tonde flames
	vidence of Identification (Int'l Po COMPANY: (In addition to the		iver's license

Certificate of Incorporation, Form Co2,Co7,MEMART, Board Resolution

\* And any other Documents that may be required from time to time by the regulatory authorities.

**Customer Information Sheet** 

## Customer Information Sheet

D.	For Office Use Only:	Name (Surname First);	
Application No:-			
Account No:- Status: Cash Account		LGA	
Status. Cash Account	Warging / toodan		
Effective Date:		Residence:	
Initial Payment:			
References Confirmed:			
Date:			
Approval (1)			
(2)		Business/ Occupation:	.O.t
	Approval of Director		
Date	180	nebnoqsemoo Director bbA	St
		Mother's Maiden Name:	
and the second second section is a second section to the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section is a second section in the second section in the second section is a second section in the second section is a second section in the second section is a second section in the section is a second section in the section is a second section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section is a section in the section in the section in the section is a section in the section in the section in the section is a section in the	Anna ann an tagan ann ann ann ann ann an ann an ann an		. Ist
СіРОНІЙ ИО.:		Phone no. of next of kirr.	
	tnio.		
	ouse's Name & address:	If married, please state spo	
	Date of Creation (of Bank Acct. Account Number;		
	Name of Account		