

(TLH- Trading license Holder )

Investment House 8<sup>th</sup> Floor 21/25 Broad Street Lagos Tel: 01-6322979, 08102061440 Affix Recent Passport Here

## STOCKBROKING ACCOUNT UPDATE (INDIVIDUALACCOUNT)

Kindly note the following important point for the opening of stock broking Account with

## **MOLTEN TRUST LIMITED**

The account opening form shall be submitted along with the following documents.

- a. A Copy of this Application form
- b .A passport Photograph of the account holder.
- c. A valid driver's license, international Passport or National I.D of the signatory
- d. A copy of any utility bill
- e. Employers Identity Card

Full Name:surname	OTHER NAMES	
Maiden Name		
Nationality	State Of Origin	L.G.A
Residential Address:		
Mailing Address	E-Mail Address	
Phone No.	Occupation	
Date of Birth: ————————————————————————————————————	— Marital Status: Single	Married
Next Of Kin	Relationship	Phone
Next Of Kin Address:		
	s	
Source of Fund	Bank Account No	
Banker's Name	Banker's Address	
	BVN	

## **PERSONAL IDENTIFICATION PROVIDED** (tick appropriate one) Driver's License National I.D International Passport ADDRESS CONFIRMATION A copy of utility Bill Bank statement **REFERENCE**(Kindly include address and contact details of two referee) 1. NAME **Address** 2.NAME Tel: Address **DECLARATION** 11/We hereby certify that all the information provided by me/us are true and correct 2 If for any reason arising from my/our Mandate, Molten Trust enters into any transaction on my/our behalf resulting in my/our account being thrown into debit, I/we hereby authorizes Molten trust Limited to sell any share(s) in my/our portfolio to offset such debit balance including accrued interest arising thereof 3Molten trust Limited, reserves the right to sell shares in any account that is not funded within seven days to normalize the account. 4 that all deposit payment shall be by cheque, bank draft or credit advice: it is the company's policy not to enterinto cashtransaction with the clients and shall not be held responsible for any liability arising from such transaction. 5 Payment for proceeds of sales shall be by in crossed cheque written in the name of the beneficial/owner whose name appeared on the share certificate or deposit instrument or account holder. 6 Any change in my/our address or any material information shall be communicated immediately to **MOLTEN TRUST LIMITED** 7 I/We have read all the condition/terms and have agreed to be bound by them Signature of client signature of client (if joint) For Official use Only Account Officer \_\_\_\_\_ Account Opened by \_\_\_\_\_\_ Signature: — Complete Not complete Documentation

Comment —