

MOLTEN TRUST

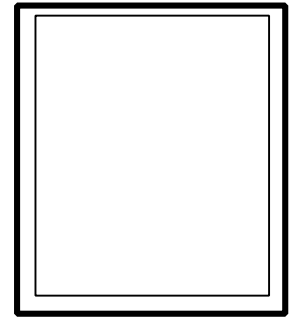
Limited

(TLH- Trading License Holder)

Investment House

8th Floor 21/25 Broad Street Lagos.

[Tel:016322979](tel:016322979), [08023125989](tel:08023125989).



CORPORATE INVESTMENT APPLICATION FORM

Kindly note the following important point for opening a stock broking Account with **MOLTEN TRUST LIMITED**
The account opening shall be submitted along with the following documents.

- a. A copy of this application form
- b. A passport photograph of each of the signatories.
- c. A valid driver's license or international Passport or national I.D of the signatories
- d. A copy of board Resolution
- e. A copy of memo & Article of Association

f. A copy of form CO7

COMPANY'S DETAILS

(TO BE COMPLETED IN BLOCK LETTERS)

COMPANY NAME : _____

COMPANY ADDRESS: _____

MAILING ADDRESS: _____

E-Mail ADDRESS: _____

PHONE NO(S). _____

DATE OF INCOPORATION/REGISTRATION _____

NATURE OF BUSINESS: _____ REG.NO. _____

CONTACT NAME _____ PHONE NO. _____

REGISTERED OFFICE ADDRESS(If difference from above) _____

BVN:

ACCOUNT NUMBER & BANK NAME:

DATE ACCOUNT WAS OPENED:

NAMES OF AUTHORISED SIGNATORIES

GROUP

SPECIMEN SIGNATURES

_____ 1
 _____ 2
 _____ 3

SIGNATURE MANDATE:

DECLARATION

1 We hereby request you to open an investment Account in the name of the afore-mentioned company and authorize you to honour all instructions and dispositions relating to the account signed by the authorized signing officials in accordance with the resolution of the board of directors/Trustees, a certified copy of which is attached here to. Please also find enclosed herewith

i. Certificate of incorporation of the company or(as appropriate)certificate evidencing change of name of Company or certificate of registration for inspection and return. ii. Certified true copy of the Memorandum and articles of association of the company amended up to date iii. Specimen Signature of the directors, Secretary and /or other signing officials.

2 If for any reason arising from my Mandate, Molten Trust enters into any transaction on our behalf resulting in Our account being thrown into debit, we hereby authorize Molten trust Limited to sell any share(s) in our Portfolio to offset such debit balance including accrued interest arising thereof.

3 We agree that the set-off condition received and signed by us shall apply as expressly set out therein, and hereby declare that the information given is correct and is the basis for the opening of the investment Account

4 We have read all the condition/terms and have agreed to be bound by them

Authorize signatory



Authorize signatory

FOR OFFICIAL USE ONLY

Account Officer: _____

Account Opened by:

Date: _____

Signature: _____

Documentation

Complete

Not complete

Approved by: _____

Comment _____

CORPORATE BOARD RESOLUTION

We hereby certify that the board of directors of (a) _____

At a meeting of the Board held on the (b) _____

At (c) _____

Passed the following resolution which was recorded in the minute book of the Company:

RESOLVED

(i). That an investment Account for the Company be opened with Molten Trust Limited
Investment house 8th floor 21/25 broad street Lagos

(ii). That Molten Trust limited is hereby requested and authorized to act on any instructions with
Regard to any transactions of the company provided such documents are signed by

Signing instruction _____

(iii) That Molten Trust Limited be supplied with a copy of the Memorandum and Articles of Association of the Company and a list of the names and signatures of the Directors. Secretary _____ And officers and authorized officials in the company.

(iv) That this resolution be communicated to Molten trust limited and remain effective until duly
Rescinded and or modified by a subsequent resolution passed by the board of directors, a
Certified copy of which signed by the chairman and the secretary, shall be communicated to
Molten Trust Limited.

Chairman



Secretary

Notes: (a) Names of company (b) date of Meeting (c) Venue of meeting (d) mandate for
Operation of account