

ACCOUNT OPENING FORM

ENTITIES (INCORPORATED AND NON-INCORPORATED)

CONFIDENTIAL
FORM B

(Please indicate the business category and type of account to open by ticking the applicable box below)

CUSTOMER KYC (ACCOUNT) CATEGORY CORPORATE CLIENTS LOCAL FI FOREIGN FI LOCAL NON FI FOREIGN NON FI

ACCOUNT TYPE CURRENT ACCOUNT FIXED DEPOSIT ACCOUNT DOMICILIARY ACCOUNT

S	E	V	E	Other

THIS FORM SHOULD BE COMPLETED IN CAPITAL LETTERS. CHARACTERS AND MARKS SHOULD BE SIMILAR IN STYLE TO THE FOLLOWING

BRANCH BRANCH CODE ACCOUNT NUMBER

MANDATORY - PLEASE COMPLETE THIS SECTION

HOW DID YOU HEAR ABOUT US? RADIO NEWSPAPER BILLBOARD TV INTERNET SOCIAL MEDIA FIRSBANK FRIEND/FAMILY OTHER

1. COMPANY DETAILS (PLEASE COMPLETE IN BLOCK LETTERS AND TICK WHERE NECESSARY)

COMPANY/BUSINESS NAME

CERTIFICATE OF INCORPORATION/ REGISTRATION NUMBER

DATE OF INCORPORATION / REGISTRATION

D	D	M	M	Y	Y	Y	Y

 JURISDICTION OF INCORPORATION/ REGISTRATION

BUSINESS TYPE / NATURE SECTOR/INDUSTRY

OPERATING BUSINESS ADDRESS 1
 STREET NAME
 CITY/TOWN LOCAL GOVT. AREA
 STATE, COUNTRY

SECONDARY BUSINESS ADDRESS 2
 STREET NAME
 CITY/TOWN LOCAL GOVT. AREA
 STATE, COUNTRY

CORPORATE BUSINESS ADDRESS/REGISTERED OFFICE (IF DIFFERENT FROM ABOVE)
 STREET NAME
 CITY/TOWN LOCAL GOVT. AREA
 STATE, COUNTRY

EMAIL ADDRESS

WEBSITE (IF ANY)

CONTACT NUMBER 1

COUNTRY CODE	NUMBER		

 CONTACT NUMBER 2

COUNTRY CODE	NUMBER		

PREFERRED MEANS OF COMMUNICATION POST E-MAIL IN PERSON HOLD MAILLS

TAX IDENTIFICATION NUMBER (TIN)

SPECIAL CONTROL UNIT AGAINST MONEY LAUNDERING (SCUML) REG. NO

2. ANNUAL TURNOVER

ANNUAL TURNOVER CURRENCY USD NGN GBP EUR

(A) LESS THAN 50 MILLION 50 MILLION - LESS THAN N500 MILLION 500 MILLION - LESS THAN N5 BILLION ABOVE 5 BILLION

(B) IS YOUR COMPANY QUOTED ON ANY STOCK EXCHANGE? YES NO

(C) IF ANSWER TO QUESTION (B) IS YES, INDICATE WHICH STOCK EXCHANGE AND THE STOCK SYMBOL

3. ACCOUNT SERVICE(S) REQUIRED (PLEASE TICK APPLICABLE OPTION BELOW)

CARD PREFERENCES VERVE CARD MASTER CARD VISA CARD OTHERS (SPECIFY)

ELECTRONIC BANKING PREFERENCES INTERNET BANKING MOBILE BANKING ATM/POS OTHER ELECTRONIC CHANNELS (FEES MAY APPLY) SPECIFY

TRANSACTION ALERT PREFERENCES EMAIL ALERT (FREE) SMS ALERT (FEE APPLIES)

STATEMENT PREFERENCES EMAIL POST COLLECTION AT BRANCH

STATEMENT FREQUENCY MONTHLY QUARTERLY SEMI-ANNUALLY ANNUALLY

CHEQUE BOOK REQUISITION (FEES APPLIES) OPENED CHEQUE CROSSED CHEQUE 25 LEAVES 50 LEAVES 100 LEAVES

CHEQUE CONFIRMATION; WILL YOU LIKE TO PRE-CONFIRM YOUR CHEQUES? YES NO

CHEQUE CONFIRMATION THRESHOLD; IF THE ANSWER TO THE ABOVE IS YES, PLEASE SPECIFY THE THRESHOLD

4. CHEQUE CONFIRMATION THRESHOLD

IF YOU WOULD LIKE TO HAVE A HIGHER THRESHOLD FOR PRE-CONFIRMATION, PLEASE SPECIFY THE AMOUNT (I.E. THRESHOLD ABOVE NXXX,000.00)

*IN LINE WITH EXTANT LAW AND EXISTING REGULATION

5. ACCOUNT SIGNATORY'S DETAILS

1 TITLE SURNAME

OTHER NAME FIRST NAME

MOTHER'S MAIDEN NAME

DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y

 GENDER M F

MARITAL STATUS SINGLE MARRIED DIVORCED WIDOWED

NATIONALITY PLACE OF BIRTH

STATE OF ORIGIN LGA OF STATE OF ORIGIN

DO YOU HAVE DUAL CITIZENSHIP? YES NO IF YES, PLEASE STATE SECOND NATIONALITY

RESIDENCY STATUS PERMANENT TEMPORARY RESIDENT PERMIT NO. (IF APPLICABLE)

PERMIT ISSUE DATE

D	D	M	M	Y	Y	Y	Y

 PERMIT EXPIRY DATE

D	D	M	M	Y	Y	Y	Y

OTHER COUNTRY OF TAX RESIDENCE

ID TYPE NATIONAL ID DRIVER'S LICENSE INTERNATIONAL PASSPORT PERMANENT VOTERS' CARD OTHERS
IF OTHERS PLEASE SPECIFY

ID NUMBER

ID ISSUE DATE

D	D	M	M	Y	Y	Y	Y

 ID EXPIRY DATE

D	D	M	M	Y	Y	Y	Y

BANK VERIFICATION NO

OCCUPATION STATUS/JOB TITLE

POSITION/OFFICE OF THE OFFICER

RESIDENTIAL ADDRESS

HOUSE NUMBER	STREET NAME
CITY/TOWN	LOCAL GOVT. AREA
STATE, COUNTRY	

MOBILE NUMBER (1)

COUNTRY CODE	NUMBER

 MOBILE NUMBER (2)

COUNTRY CODE	NUMBER

E-MAIL ADDRESS

CLASS OF SIGNATORY (PLEASE INDICATE CLASS IN THE BOX PROVIDED) A B C SIGNATURE DATE

D	D	M	M	Y	Y	Y	Y

2 TITLE SURNAME

OTHER NAME FIRST NAME

MOTHER'S MAIDEN NAME

DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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OCCUPATION STATUS/JOB TITLE

POSITION/OFFICE OF THE OFFICER

RESIDENTIAL ADDRESS

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CITY/TOWN	LOCAL GOVT. AREA
<input type="text"/>	<input type="text"/>
STATE, COUNTRY	

MOBILE NUMBER (1)

COUNTRY CODE	NUMBER
<input type="text"/>	<input type="text"/>

 MOBILE NUMBER (2)

COUNTRY CODE	NUMBER
<input type="text"/>	<input type="text"/>

E-MAIL ADDRESS

CLASS OF SIGNATURE (PLEASE INDICATE CLASS IN THE BOX PROVIDED) A B C SIGNATURE DATE

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3 TITLE SURNAME

OTHER NAME FIRST NAME

MOTHER'S MAIDEN NAME

DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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NATIONALITY PLACE OF BIRTH

STATE OF ORIGIN LGA OF STATE OF ORIGIN

DO YOU HAVE DUAL CITIZENSHIP? YES NO IF YES, PLEASE STATE SECOND NATIONALITY

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BANK VERIFICATION NO
OCCUPATION STATUS/JOB TITLE
POSITION/OFFICE OF THE OFFICER
RESIDENTIAL ADDRESS

HOUSE NUMBER										STREET NAME									
CITY/TOWN										LOCAL GOVT. AREA									
STATE, COUNTRY																			

MOBILE NUMBER (1) MOBILE NUMBER (2)
E-MAIL ADDRESS
CLASS OF SIGNATORY (PLEASE INDICATE CLASS IN THE BOX PROVIDED) A B C SIGNATURE DATE

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6A. DETAILS OF DIRECTORS/TRUSTEES/PROMOTER/EXECUTORS/ADMINISTRATOR/PRINCIPAL OFFICERS

1 TITLE SURNAME
OTHER NAME FIRST NAME
MOTHER'S MAIDEN NAME
DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 GENDER M F
NATIONALITY PLACE OF BIRTH
DO YOU HAVE DUAL CITIZENSHIP? YES NO IF YES, PLEASE STATE SECOND NATIONALITY
RESIDENCY STATUS PERMANENT TEMPORARY RESIDENT PERMIT NO. (IF APPLICABLE)
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BANK VERIFICATION NO
OCCUPATION STATUS/JOB TITLE
POSITION/OFFICE OF THE OFFICER
RESIDENTIAL ADDRESS

HOUSE NUMBER										STREET NAME									
CITY/TOWN										LOCAL GOVT. AREA									
STATE, COUNTRY																			

MOBILE NUMBER (1) MOBILE NUMBER (2)
E-MAIL ADDRESS

2 TITLE SURNAME
OTHER NAME FIRST NAME
MOTHER'S MAIDEN NAME
DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 GENDER M F
NATIONALITY PLACE OF BIRTH
DO YOU HAVE DUAL CITIZENSHIP? YES NO IF YES, PLEASE STATE SECOND NATIONALITY
RESIDENCY STATUS PERMANENT TEMPORARY RESIDENT PERMIT NO. (IF APPLICABLE)
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ID TYPE NATIONAL ID DRIVER'S LICENSE INTERNATIONAL PASSPORT PERMANENT VOTERS' CARD OTHERS
 IF OTHERS PLEASE SPECIFY _____

ID NUMBER _____

ID ISSUE DATE

D	D	M	M	Y	Y	Y	Y

 ID EXPIRY DATE

D	D	M	M	Y	Y	Y	Y

BANK VERIFICATION NO _____

OCCUPATION _____ STATUS/JOB TITLE _____

POSITION/OFFICE OF THE OFFICER _____

RESIDENTIAL ADDRESS _____
HOUSE NUMBER STREET NAME

_____ CITY/TOWN LOCAL GOVT. AREA

_____ STATE, COUNTRY

MOBILE NUMBER (1)

COUNTRY CODE	NUMBER

 MOBILE NUMBER (2)

COUNTRY CODE	NUMBER

E-MAIL ADDRESS _____

3 TITLE _____ SURNAME _____

OTHER NAME _____ FIRST NAME _____

MOTHER'S MAIDEN NAME _____

DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y

 GENDER M F

NATIONALITY _____ PLACE OF BIRTH _____

DO YOU HAVE DUAL CITIZENSHIP? YES NO IF YES, PLEASE STATE SECOND NATIONALITY _____

RESIDENCY STATUS PERMANENT TEMPORARY RESIDENT PERMIT NO. (IF APPLICABLE) _____

PERMIT ISSUE DATE

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ID NUMBER _____

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 ID EXPIRY DATE

D	D	M	M	Y	Y	Y	Y

BANK VERIFICATION NO _____

OCCUPATION _____ STATUS/JOB TITLE _____

POSITION/OFFICE OF THE OFFICER _____

RESIDENTIAL ADDRESS _____
HOUSE NUMBER STREET NAME

_____ CITY/TOWN LOCAL GOVT. AREA

_____ STATE, COUNTRY

MOBILE NUMBER (1)

COUNTRY CODE	NUMBER

 MOBILE NUMBER (2)

COUNTRY CODE	NUMBER

E-MAIL ADDRESS _____

6B. DETAILS OF NEXT KIN (SOLE - PROPRIETOR)

TITLE _____ FIRST NAME _____

SURNAME _____ OTHER NAME _____

DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y

 GENDER M F

MOTHER'S MAIDEN NAME _____

RELATIONSHIP _____

MOBILE PHONE NUMBER

COUNTRY CODE	NUMBER

 EMAIL ADDRESS _____

CONTACT ADDRESS

HOUSE NUMBER										STREET NAME									
CITY/TOWN										LOCAL GOVT. AREA									
STATE, COUNTRY																			

7. ADDITIONAL DETAILS

NAME OF AFFILIATED COMPANY/BODY

1

2

3

PARENT COMPANY'S COUNTRY OF INCORPORATION

BUSINESS ADDRESS OF PARENT/AFFILIATE COMPANY

8. DETAILS OF ACCOUNT HELD WITH OTHER BANKS BY THE PROSPECTIVE COMPANY/PARTNERSHIP/SOLE PROPRIETORSHIP

S/N	NAME AND ADDRESS OF BANK/BRANCH	ACCOUNT NAME	ACCOUNT NUMBER	STATUS (ACTIVE/DORMANT)
1.				
2.				
3.				
4.				

9A. AUTHENTICATION FOR POLITICALLY EXPOSED PERSONS AND FINANCIALLY EXPOSED PERSONS

ARE ANY OF THE SIGNATORIES, DIRECTORS OR SHAREHOLDERS POLITICALLY EXPOSED? YES NO

ARE ANY OF THE SIGNATORIES, DIRECTORS OR SHAREHOLDERS FINANCIALLY EXPOSED? YES NO

9B. RISK ASSESSMENT PROFILE

HIGH RISK - CATEGORY A MEDIUM RISK - CATEGORY B LOW RISK - CATEGORY C

10. AUTHORITY TO DEBIT ACCOUNT FOR SEARCH FEE

----- BANK PLC

Dear Sir,
AUTHORITY TO DEBIT OUR CURRENT ACCOUNT FOR SEARCH FEE

We hereby authorise you to debit our account with the applicable charges for the legal search conducted on our account at the Corporate Affairs Commission or relevant agency / authority.

Thank you.

Yours faithfully,

AUTHORISED SIGNATURE OF THE CUSTOMER / REPRESENTATIVE

AUTHORISED SIGNATURE OF THE CUSTOMER / REPRESENTATIVE

DATE

D	D	M	M	Y	Y	Y	Y

DATE

D	D	M	M	Y	Y	Y	Y

11. LETTER OF INDEMNITY

Financial Institutions are permitted to insert their terms to reflect unique business operations.

To: FBNQuest Merchant Bank Limited

Gentlemen,

Please be informed that at the meeting of the above-named company held on _____ the following resolutions were passed:

1. That an account be opened in the name of the Company with FBNQuest Merchant Bank Limited with the underlisted persons as signatories in line with mandate specified in the enclosed signature cards.

a.	<input type="text"/>	c.	<input type="text"/>
b.	<input type="text"/>	d.	<input type="text"/>

2. That FBNQuest Merchant Bank Limited is hereby authorised to debit the above account with the usual banking charges, interest commissions, legal fees etc and we hereby acknowledge that any sum standing to the debit of the Investment Account shall be liable to interest charges at a rate fixed by FBNQuest Merchant Bank Limited from time to time.

3. We hereby agree that in addition to any general lien to which you may be entitled you may at any time and without notice to us combine or consolidate all or any of the Company's account with you and set off or transfer any sum or sums standing to the credit of any one or more of such accounts or any other credits, be it cash, cheques, valuables, deposit, securities, negotiable instruments or other assets belonging to the company with you in or towards the satisfaction of any of the company's liabilities to you on any other account or in any other respect whether such liabilities be actual or contingent, primary or collateral, several or joint.

4. That FBNQuest Merchant Bank Limited is hereby authorised to honour all cheques, bills, promissory notes, acceptances, receipts, releases, guarantees or indemnities and generally accept all instructions provided same are executed by the above named signatories. INDEMNITY FOR HONOURING FUNDS TRANSFER INSTRUCTIONS AND FOR ACCEPTING THIRD PARTY CHEQUES.

5. We are fully aware that funds transfer instructions in respect of this account shall be by our letter duly signed according to mandate and we hereby acknowledge that the used of facsimile, untested telexes, photocopied letter issued according to our mandate and unaccompanied by original letter from us that will lead to the debit or credit, as the case may be, of our account is associated with additional risks and fraud exposure.

6. In consideration of FBNQuest Merchant Bank Limited agreeing to accept and act upon any such instructions, communication and documents by facsimiles, untested telexes, electronic mails or photocopied issued according to our mandate and unaccompanied by original copy of our duly signed letter, we hereby irrevocably undertake to indemnify FBNQuest Merchant Bank Limited and hold it harmless from and against all costs. (including but without limitation to) legal fees and expenses, claims, losses, liabilities, damages and proceedings whatsoever that FBNQuest Merchant Bank Limited may suffer or incur or that may arise as a result of FBNQuest Merchant Bank Limited's accepting or acting upon such instructions, communications or documents.

7. Furthermore, we hereby irrevocably release FBNQuest Merchant Bank Limited from all liability, loss and damages in the event that any untested telex or facsimile transmission, electronic mail for photocopied letter is not received or is mutilated, illegible or interrupted, duplicated, incomplete, unauthorized or delayed for any reason, or in the event that termination of the investment with FBNQuest Merchant Bank Limited is duly made by us in accordance with the mandate but contrary to any law or regulation presently in force.

8. FBNQuest Merchant Bank Limited shall have absolute discretion, for any reason whatsoever, to act or not to act upon documentation received by facsimile, untested telex, electronic mails or photocopied letters unaccompanied by a duly signed original copy of a letter issued by us/or to request verification of documents received by such means.

9. Also in consideration of FBNQuest Merchant Bank Limited issuing or accepting third party cheques and/or drafts from time to time, at our request, we hereby irrevocably undertake that we shall fully indemnify FBNQuest Merchant Bank Limited against all losses, expenses, cost, damages or otherwise, that may occur as a result of the issuance or acceptance of the said third party cheques and /or drafts provided that FBNQuest Merchant Bank Limited is under no obligation to accept third party cheques and/or draft and may at its absolute discretion refuse to accept third party cheques and/or drafts.

10. In consideration of your redeeming our investment in your Promissory Note/Treasury Bill Certificate to be issued from time to time, in the event of our damage or otherwise loss of the Note(s) Certificate(s) evidencing such investment, we hereby undertake to hold you harmless and keep you indemnified from all losses, cost or damages you may sustain, or be put to by reason of your paying on the said Promissory Note/Treasury Bill Certificate, or by reason of the said original Note or Certificate being at any time found or presented for payment and against all claims and demands which may be made in respect thereof.

We undertake further to return to you the original Note or Certificate should it be found by us or again come into our possession at anytime thereafter.

We fully understand and agree that FBNQuest Merchant Bank Limited shall not be liable for any loss or damages sustained by us by reason of the operation of the account provided such loss or damages was nots caused or facilitated by FBNQuest Merchant Bank Limited or any of its staff acting on its behalf.

DATE	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	D	D	M	M	Y	Y	Y	Y									DATE	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y																												
D	D	M	M	Y	Y	Y	Y																												
SIGNATURE OF CUSTOMER	<input type="text"/>	DIRECTOR OR SECRETARY'S NAME IN FULL	<input type="text"/>																																
DIRECTOR'S NAME IN FULL	<input type="text"/>	DIRECTOR OR SECRETARY'S SIGNATURE	<input type="text"/>																																
DIRECTOR'S SIGNATURE	<input type="text"/>	COMPANAY SEAL	<input type="text"/>																																

*If the account is to be operated by a Sole Signatory, the above Resolutions MUST be signed by at least ONE OTHER DIRECTOR apart from the person appointed as Sole Signatory.

12. ACCOUNT OPENING MANDATE

CUSTOMER KYC (ACCOUNT) CATEGORY (PLEASE TICK AS APPROPRIATE)

JOINT ACCOUNT
 FIXED INVESTMENT ACCOUNT
 OTHER TYPES OF ACCOUNT

ACCOUNT TYPE
 CURRENT ACCOUNT
 FIXED DEPOSIT ACCOUNT
 SAVINGS ACCOUNT
 DOMICILIARY ACCOUNT

S	€	¥	£	Others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACCOUNT NAME

ACCOUNT NUMBER

MANDATE AUTHORISATION / COMBINATION RULE (PLEASE TICK AS APPROPRIATE)
 SOLE SIGNATORY
 TWO OR MORE
 IF TWO OR MORE ARE TO SIGN, PLEASE SPECIFY

SIGNATORIES

1 TITLE	<input type="text"/>	NAME	<input type="text"/>	PHOTO																
SURNAME	<input type="text"/>																			
FIRST NAME	<input type="text"/>																			
OTHER NAME	<input type="text"/>																			
CLASS OF SIGNATORY	<input type="text"/>																			
IDENTIFICATION TYPE	<input type="text"/>																			
IDENTIFICATION NO.	<input type="text"/>																			
TELEPHONE NUMBER	<input type="text"/>																			
SIGNATURE	<input type="text"/>		DATE																	
			<table border="1" style="text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
D	D	M	M	Y	Y	Y	Y													
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>													

FOR BANK USE ONLY	
<input type="text"/>	<input type="text"/>
NAME	SIGNATURE

FOR BANK USE ONLY	
<input type="text"/>	<input type="text"/>
NAME	SIGNATURE

2 TITLE	<input type="text"/>	NAME	<input type="text"/>	PHOTO																
SURNAME	<input type="text"/>																			
FIRST NAME	<input type="text"/>																			
OTHER NAME	<input type="text"/>																			
CLASS OF SIGNATORY	<input type="text"/>																			
IDENTIFICATION TYPE	<input type="text"/>																			
IDENTIFICATION NO.	<input type="text"/>																			
TELEPHONE NUMBER	<input type="text"/>																			
SIGNATURE	<input type="text"/>		DATE																	
			<table border="1" style="text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
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FOR BANK USE ONLY	
<input type="text"/>	<input type="text"/>
NAME	SIGNATURE

FOR BANK USE ONLY	
<input type="text"/>	<input type="text"/>
NAME	SIGNATURE

NOTE: Two mandate cards must be filled by each applicant
 Financial Institutions can provide more space if the number of Signatories is more than spaces provided.

13. TERMS AND CONDITIONS

To: FBNQuest Merchant Bank Limited

Date

D	D	M	M	Y	Y	Y	Y

Branch

Dear Sir,

Please open an investment account in my/our name(s)

I/We request and authorise FBNQuest Merchant Bank Limited until I/we shall give notice in writing to the contrary to honour all orders which may be drawn on the said investment provided such orders are signed by me/us, in accordance with my/our mandate and I/We request and authorise FBNQuest Merchant Bank Limited to debit such investment or orders to the said investment with you.

I/We agree as follows:

1. To assume full responsibility for the genuineness, correctness and validity of all endorsements appearing on all cheques, orders, bills note negotiable instruments and receipts or other documents deposited for investment.
2. To hold FBNQuest Merchant Bank Limited free from any loss or depreciation of funds deposited with FBNQuest Merchant Bank Limited due to any future Government order, law, levy, tax embargo moratorium, exchange restriction or any other cause beyond your control, and that any or all funds standing to the credit of the investment are payable only at FBNQuest Merchant Bank Limited and only in such local currency, as may then be in local circulation.
3. To accept as due notification any notice of change in conditions governing the investment directed to my/our last known address and to be bound by such change.
4. That any notice or letter addressed to me/us and sent through the post to the address supplied by me/us shall be considered duly delivered to and received by me/us at the time it would be delivered in the ordinary course of post.
5. That if cheques credited to my/our individual joint investment account are returned dishonoured, the same may be transmitted to me/us through my/our last known address either by hand delivery or post. You may notify me/us of the returned cheque via my/our telephone or email.
6. That I/We note that FBNQuest Merchant Bank Limited will accept no liability whatsoever for funds handed to members of its staff outside banking hours or outside FBNQuest Merchant Bank Limited premises.
7. I/We understand and agree that FBNQuest Merchant Bank Limited is under no obligation to honour any withdrawal order on this investment unless there are sufficient funds in the investment to cover the value of the said withdrawal and I/We understand and agree that any such instruction or order may be returned to me/us unpaid.
8. I/We agree that in addition to any general lien or similar right to which FBNQuest Merchant Bank Limited as a licensed financial institution may be entitled by law FBNQuest Merchant Bank Limited may at any time and without prior notice to me/us combine or consolidate all or any of my/our investments with and liabilities to FBNQuest Merchant Bank Limited and set off or transfer any such sums standing to the credits of any one or more of such account or any other credit be it cash, cheque, valuable, deposits, securities, negotiable instruments or other assets belonging to me/us with FBNQuest Merchant Bank Limited in or towards satisfaction of any of my/our abilities to FBNQuest Merchant Bank Limited or any other account or in any other respect whether such liability be actual or contingent, primary or collateral and several of joint.
9. In consideration of my/our investment in your Promissory Note(s), Treasury Bill Certificate(s) to be issued from time to time, in the event of my/our damage Or otherwise loss of the Note(s) / Certificate(s) evidencing such investment, I/we hereby undertake to, hold you harmless and keep you indemnified from all loss, costs or damages you may sustain, or be put to by reason of your paying on the said Note(s) Certificate (s) being at any time found or presented for payments and against all claims and demands which may be in respect thereof.

10. I/We undertake further to return to FBNQuest Merchant Bank Limited the original Note or Certificate should it be found by me/us or again come into my/ours possession anytime thereafter.
11. I/We fully understand and agree that FBNQuest Merchant Bank Limited shall not be liable for any loss or damages sustained by me/us by reason of the operation of the account provided such loss or damage was not caused or facilitated by FBNQuest Merchant Bank Limited or any of its staff acting on its behalf.
12. That FBNQuest Merchant Bank Limited is authorised to impose penalties for any withdrawal made prior to maturity or without due notice.
13. That I/We shall from time to time provide FBNQuest Merchant Bank Limited with any documentation necessary for FBNQuest Merchant Bank Limited to determine the validity of the investments through this account.
14. In the absence of clear disposal instruction the principal amount and interest at maturity will be liquidated and FBNQuest Merchant Bank Limited may at its discretion hold the funds in a non interest bearing account pending further instructions or send a payment order or cheque to me/us at my/our last, known address.
15. I/We are fully aware that funds transfer instruction on this account shall be by my/our letter duly signed according to mandate and I/We hereby acknowledge that the use of facsimile, untested telexes, photocopied letters, electronic mails (on letter head or otherwise) or other unsecured means of communication to convey instructions for funds transfers or any other such instructions not backed by duly signed original letter from me/us that will lead to the debit or credit, as the case may be, of my/our account is fraught with additional risks and fraud exposure.
16. In consideration of FBNQuest Merchant Bank Limited agreeing to accept and act upon any such instructions communication and documents, by facsimile, untested telexes, electronic mails or photocopied letters issued according to my/our mandate unaccompanied by original copy of our duly signed letter, I/We hereby irrevocably undertake to indemnify FBNQuest Merchant Bank Limited and hold it harmless from and against all cost, (including but without limitation to) legal fees and expenses claims, losses, liabilities, damages and instructions, communication or documents.
17. Furthermore, I/We hereby irrevocably release FBNQuest Merchant Bank Limited from all liability, loss and damages in the event that any untested telex or facsimile transmission, electronic mail or photocopied letter is not received or mutilated, illegible or interrupted, duplicated, incomplete, unauthorized or delayed for any reason, or in the event that termination of the investments with FBNQuest Merchant Bank Limited is duly made by me/us in accordance with the mandate but contrary to any law or regulation presently in force.
18. FBNQuest Merchant Bank Limited shall have absolute discretion, for any reason, whatsoever, to act or not to act upon documentation received by facsimile, untested telex, electronic mail or photocopied letter unaccompanied by a duly signed original copy of a letter issued by me/us and/or to request verification or documents received by such means.
19. Also, in consideration of FBNQuest Merchant Bank Limited issuing or accepting third party cheques and/or draft from time, to time, at my/our request, I/we hereby irrevocably undertake that I/we shall fully indemnify FBNQuest Merchant Bank Limited against all losses, expenses, costs damages or otherwise, that may occur as a result of the, issuance or acceptance of the said their party cheques and or/draft.
20. With respect to joint investment, FBNQuest Merchant Bank Limited may rely upon the authority of those present without more for purpose of dealing with us until the receipt by FBNQuest Merchant Bank Limited of an instruction revoking or modifying same provided however that in the case of an actual or suspected crisis or deadlock in the running/maintenance of the investment, FBNQuest Merchant Bank Limited shall at its circumstances to protect our interest (including but not limited to the acceptance or rejection of a purported instruction) and we hereby indemnify FBNQuest Merchant Bank Limited for any loss howsoever arising incurred by FBNQuest Merchant Bank Limited

as a consequence of FBNQuest Merchant Bank Limited's action(s) in such circumstances. "FBNQuest Merchant Bank Limited views seriously incidence of dud cheque issuance. To this end, we expect FBNQuest Merchant Bank Limited customers to take steps to avoid issuance of same. FBNQuest Merchant Bank Limited shall report incidence of dud cheques to appropriate authorities for their further action.

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21. If a breach is associated with the operation of your account, you agree that we have the right to apply restrictions to your account and report to appropriate law enforcement agencies in line with extant laws.

22. IT IS HEREBY AGREED AS FOLLOWS;

- a. I/We hereby authorise FBNQuest Merchant Bank Limited to initiate, roll over or reinvest our investment in Commercial Paper Note(s) hereafter referred to as "Instrument (s)" issued by various registered companies in Nigeria and the authority herein given shall extend to FBNQuest Merchant Bank Limited as its sole discretion moving my/our said investment from one particular instrument to another in good faith and as demanded by commercial expediency.
- b. I/We hereby authorise FBNQuest Merchant Bank Limited to maintain safe custody of the instrument (s) on its behalf for the tenor of the investment.
- c. FBNQuest Merchant Bank Limited's role is limited to the custody of the instrument(s). It is does not imply or include recourse for the value or worth of the investment.

I hereby agree with the above Terms & Conditions

JOINT ACCOUNT HOLDERS

NAME	TELEPHONE	EMAIL ADDRESS	SIGNATURE

DATE

D	D	M	M	Y	Y	Y	Y

SIGNATURE (S) OF CUSTOMER(S)

NAME(S) IN FULL

- d. I/We agree that the responsibility for the repayment of the value of the investment shall be that of the issuers of the instrument(s).
- e. In the event of loss or destruction of the instrument(s) whether or not due to lack of diligence or care on the part of FBNQuest Merchant Bank Limited, the issuer(s) of the instrument(s) will repay me/us the value of the instrument upon proper identification or evidence of title to the instrument(s).
- f. I/We agree and understand that the commitment of FBNQuest Merchant Bank Limited to maintain custody of the instrument(s) is limited to the forgoing conditions only and no further commitments is intended, whether express or implied.

23. That the above resolutions/mandate shall remain valid and in force until rescinded by notice in writing under my/our hand.

24. DATA

- a. I/We agree that FBNQMB may use the information disclosed in connection or as a result of operating the Account ("Data") for assessment and analysis and to identify products and services (including those supplied by third parties) which may be relevant to us. We may disclose data:
 - a) To credit reference agencies, any person who may assume our rights under this Agreement, a member of FBN Holdings Group, or
 - b) If we have a right or duty to disclose or are compelled to do so by law.
- b. I/We consent to the processing of personal data in line with FBNQuest Data Privacy Policy (<https://fbnquest.com/quicklinks/policies/privacy-policy/>).

FOR INTERNAL USE

1. REQUIREMENTS CHECKLIST

S/N	DOCUMENTS REQUIRED	CHECKED	DEFERRED	WAIVED	N/A
A.	DULY COMPLETED AND SIGNED ACCOUNT OPENING FORM (ALL RELEVANT FIELDS MUST BE COMPLETED)				
B.	DULY COMPLETED AND SIGNED SPECIMEN SIGNATURE CARD(S), (WHERE REQUIRED)				
C.	BOARD OR PARTNERSHIP RESOLUTION / MANDATE LETTER / APPROVAL LETTER (FOR PUBLIC SECTOR ORGANISATIONS)				
D.	TWO (2) CLEAR PASSPORT-SIZE PHOTOGRAPHS OF EACH SIGNATORY, WITH NAMES WRITTEN ON THE REVERSE SIDE				
E.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE CERTIFICATE OF REGISTRATION				
F.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE PARTNERSHIP DEED (PARTNERSHIP CONSTITUTION), THE CLUB, SOCIETY, ASSOCIATION OR CHARITY'S CONSTITUTION OR ITS EQUIVALENT				
G.	THE COPY OF THE ENABLING ACT/DECREE (WHERE APPLICABLE)				
H.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE REGULATORY OR SUPERVISORY LICENSE TO OPERATE, IF ANY				
I.	THE CTC OF THE MEMORANDUM & ARTICLES OF ASSOCIATION (MEMART) OR ITS EQUIVALENT				
J.	THE CTC OF THE PARTICULARS OF SHAREHOLDERS OR ITS EQUIVALENT				
K.	THE CTC OF THE PARTICULARS OF DIRECTORS OR ITS EQUIVALENT				

S/N	DOCUMENTS REQUIRED CHECKED	CHECKED	DEFERRED	WAIVED	N/A
L.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE PROOF OF REGISTERED ADDRESS OF THE COMPANY				
M.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE MEANS OF IDENTITY AND PROOF OF ADDRESS OF ALL SIGNATORIES TO THE ACCOUNT, AT LEAST TWO (2) DIRECTORS AND EACH INDIVIDUAL SHAREHOLDER WITH AT LEAST 5% INTEREST, OR PARTNER (AS APPLICABLE)				
N.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE INCORPORATION DOCUMENTS OF CORPORATE SHAREHOLDERS WITH AT LEAST 5% INTEREST				
O.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE VALID RESIDENCE PERMIT OF A RESIDENT NON-NIGERIAN SIGNATORY, DIRECTOR AND/OR SHAREHOLDER WITH AT LEAST 5% INTEREST				
P.	TWO INDEPENDENT AND SATISFACTORY REFERENCES				
Q.	SEARCH REPORT (WHERE APPLICABLE)				
R.	POWER OF ATTORNEY				
S.	THE SIGHTED, NOTARISED OR CERTIFIED COPY OF THE CERTIFICATE ISSUED BY THE SPECIAL CONTROL UNIT AGAINST MONEY LAUNDERING (SCUML)				
T.	TAX IDENTIFICATION NUMBER (TIN), IF ANY				
U.	DULY COMPLETED KYC/AML QUESTIONNAIRE ON THE BANK'S LETTERHEAD				
V.	EVIDENCE OF REGISTRATION WITH NIGERIAN INVESTMENT PROMOTION COUNCIL				
W.	LATEST ANNUAL ACCOUNTS AND REPORT OF THE COMPANY, IF ANY				

A. ACCOUNT OPENED BY

NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>
NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. DEFERRAL/WAIVER OF DOCUMENT (IF ANY) AUTHORIZED BY

NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>
NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. ADDRESS VERIFICATION CARRIED OUT BY

NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>
NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>

COMMENTS(S); (ADDRESS DESCRIPTION AND RESULT FINDINGS)

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D. ACCOUNT OPENING AUTHORIZED / APPROVED BY

NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>
NAME	<input type="text"/>				
SIGNATURE	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>

REFERENCE FORM



The Manager
FBNQuest Merchant Bank Limited
16 Keffi Street, Off Awolowo Road
S.W. Ikoyi, Lagos, Nigeria

CONFIDENTIAL

DATE

D	D	M	M	Y	Y	Y	Y

Dear Sir,

Name(s) of Prospective New Customer(s) _____

I/We understand that the above named person(s) has/have applied to open an Investment Account with you.

I/We have known the above named company for

and I/We comment on its reputation _____

CAUTION! IT IS DANGEROUS TO INTRODUCE A PERSON WHO IS NOT WELL-KNOWN TO YOU

I/We also confirm that the applicant is a person / are persons to whom the usual banking facilities may be extended. I/We maintain current account(s) with

Referee's Name (Coy.) _____
Name of Bank/Branch _____

and the account number(s) is/are _____

We authorise you to contact the above named bankers for the purpose of verifying our standing and the status of our account with them _____

Yours faithfully, _____ Name (in block letters)

REFERENCE FORM



The Manager
FBNQuest Merchant Bank Limited
16 Keffi Street, Off Awolowo Road,
S.W. Ikoyi, Lagos, Nigeria

CONFIDENTIAL

DATE

D	D	M	M	Y	Y	Y	Y

Dear Sir,

Name(s) of Prospective New Customer(s) _____

I/We understand that the above named person(s) has/have applied to open an Investment Account with you.

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Referee's Name (Coy.) _____
Name of Bank/Branch _____

and the account number(s) is/are _____

We authorise you to contact the above named bankers for the purpose of verifying our standing and the status of our account with them _____

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