

Investment Type		Equities <input type="checkbox"/>	Treasury Bill / Notes / Bonds <input type="checkbox"/>
Account Number:		CSD Number:	
First Applicant			
Title:	Surname:	First Name:	
Other Name:			
Nationality:	Date of Birth:	Place of Birth:	
Marital Status:	Mother's Maiden Name:		
Residential Address:			
City:	Zip Code:	Country:	
Mailing Address:			
City:	Zip Code:	Country:	
Tick where applicable:			
Local Individual (LI) <input type="checkbox"/>	Local Company (LC) <input type="checkbox"/>	Foreign Individual (FI) <input type="checkbox"/>	Foreign Company (FC) <input type="checkbox"/>
Resident Foreigner (FR) <input type="checkbox"/>	Local Junior (LJ) <input type="checkbox"/>	Foreign Junior (FJ) <input type="checkbox"/>	Joint Account (JA) <input type="checkbox"/>
Telephone:	Mobile:	Fax:	
Occupation:			
Email:			
ID Details:	Passport <input type="checkbox"/>	Drivers License <input type="checkbox"/>	National ID <input type="checkbox"/> NHIS <input type="checkbox"/> Voter ID <input type="checkbox"/>
Number:		Issuing Authority:	
Issue Date:	/ /	Expiry Date:	/ /
Joint Applicant			
Surname:			
Other Names:		Maiden Name:	
Nationality:	Date of Birth:	Place of Birth:	
Telephone:	Mobile:	Fax:	
Email:		Residential Address:	
Occupation:			
ID Details:	Passport <input type="checkbox"/>	Drivers License <input type="checkbox"/>	National ID <input type="checkbox"/> NHIS <input type="checkbox"/> Voters ID <input type="checkbox"/>
Number:		Issuing Authority:	
Issue Date:	/ /	Expiry Date:	/ /
Next of Kin's Details			
Name:			
Telephone:	Mobile:	Fax:	
Relation to the Account Holder:			
E-mail address:			
Mailing Address:			
Authorised Person other than Account Holder(s) to Deal on the Account:			
Name:			
Telephone:	Mobile:	Fax:	
Relation to the Account Holder:			

E-mail address					
Mailing Address:		City: Zip Code:		Country:	
ID Details: Passport <input type="checkbox"/> Drivers License <input type="checkbox"/> National ID <input type="checkbox"/> NHIS <input type="checkbox"/> Voters ID <input type="checkbox"/>					
Number:			Issuing Authority:		
Issue Date: / /			Expiry Date: / /		
Settlement Details					
Account Name:			Account Number:		
Bank Name:			Bank Branch:		
Swift / Sort Code:					
Instructions and Employment Details					
Mode of Instructions:		Form <input type="checkbox"/>		Telephone <input type="checkbox"/>	
				Email (with indemnity) <input type="checkbox"/>	
Mode of Notification:		Telephone <input type="checkbox"/>		Email <input type="checkbox"/>	
Mode for Receiving Statements:		E-mail <input type="checkbox"/>			
Source(s) of Income/Funds.....					
Employment Status:		Employed <input type="checkbox"/>		Unemployed <input type="checkbox"/>	
				Self-employed <input type="checkbox"/>	
				Retired <input type="checkbox"/>	
Previous Occupation			Current Occupation		
Previous Employer			Current Employer		
Employer's Address					
Employment Dates: (From:		To:)	
Financial, Investment and Risk Profile					
Approximate Annual Income (GH¢)	Net Worth (GH¢)	Investment Horizon	Objectives	Investment Knowledge	Risk Tolerance
<input type="checkbox"/> Under 2,000	<input type="checkbox"/> Under 25,000	<input type="checkbox"/> Under 1 year	<input type="checkbox"/> Security	<input type="checkbox"/> Professional	<input type="checkbox"/> 0 Zero
<input type="checkbox"/> 2,000-4,999	<input type="checkbox"/> 25,000 - 49,999	<input type="checkbox"/> 1 – 2 years	<input type="checkbox"/> Income	<input type="checkbox"/> Sophisticated	<input type="checkbox"/> 1
<input type="checkbox"/> 5,000 – 9,999	<input type="checkbox"/> 50,000 - 99,999	<input type="checkbox"/> 3 – 5 years	<input type="checkbox"/> Balance	<input type="checkbox"/> Good	<input type="checkbox"/> 2 Low
<input type="checkbox"/> 10,000 - 24,999	<input type="checkbox"/> 100,000 - 249,999	<input type="checkbox"/> 5 – 10 years	<input type="checkbox"/> Growth	<input type="checkbox"/> Fair	<input type="checkbox"/> 3
<input type="checkbox"/> 25,000 - 49,999	<input type="checkbox"/> 250,000 - 500,000	<input type="checkbox"/> Over 10 years	<input type="checkbox"/> Aggressive	<input type="checkbox"/> Limited	<input type="checkbox"/> 4 Medium
<input type="checkbox"/> 50,000 - 100,000	<input type="checkbox"/> Over 500,000		<input type="checkbox"/> Speculation	<input type="checkbox"/> Novice	<input type="checkbox"/> 5
<input type="checkbox"/> Over 100,000					<input type="checkbox"/> 6 High
Online Trading Facility					
Yes <input type="checkbox"/>		No <input type="checkbox"/>			

Declaration by Applicant(s)

Have you been convicted in any Court of Law for a criminal offence or are there any proceedings now pending against you which may lead to such a conviction?

No Yes : (Provide details).....

Are you acting as a nominee in trust for others?

No Yes : (Name).....

I/We hereby declare that I/we am/are not involved in or related to any act of or dealing with the trafficking of narcotics and dangerous drugs and proceeds of such trafficking. I declare that the information provided in this form is true and complete. I undertake to notify Databank Brokerage Limited immediately in writing of any change in particulars or information provided above.

[Signature - 1st Applicant]

[Signature - 2nd Applicant]

Indicate the No. of Signatories One to sign Two to sign All to sign

Date: / / Date: / /

DBL's Compliance Requirements

Required Documents (Tick as Applicable)

Comments

Signed Account Opening Documents:

Certified Copy of Regulations

Signed CSD Account Opening Form:

Certified Copy of Cert. of Incorporation

Directors Resolution to Set up Trading A/C

Certified Copies of ID of Authorised Officers

Specimen Signature of Authorised Officers

Signed Electronic Communication Indemnity Form

Applicants residential address confirmed through one of the following:

- Tenancy Agreement
- Reference letter
- Utility Bill
- Directional Map

Documents Received by:

Date: / /

Processed by:

Date: / /

Authorised by:

Date: / /