

**EXPRESS PORTFOLIO SERVICES LIMITED**  
(MEMBER OF THE NIGERIAN STOCK EXCHANE) RC 292820

**CORPORATE ACCOUNT OPENING FORM**

NAME: .....

DATE OPENED: .....

## CORPORATE/PARTNERSHIP ACCOUNT FORM

### ACCOUNT INFORMATION

COMPANY NAME: .....

CERTIFICATE OF INCORPORATION (RC NO) .....

DATE OF INCORPORATION: .....

TYPE OF BUSINESS: .....

OPERATING BUSINESS ADDRESS: .....

CORPORATE BUSINESS ADDRESS: .....  
(REGISTERED OFFICE IF DIFFERENT FROM ABOVE)

E-MAIL ADDRESS: .....

WEBSITE (IF ANY): .....

PHONE NUMBER(S): .....

TAX IDENTIFICATION NUMBER (TIN): .....

BANK..... BRANCH: .....

ACCOUNT NUMBER: ..... BANK SORT CODE: .....

DATE ACCOUNT WAS OPENED: .....

**KEY CONTACT PERSONS/PRINCIPAL OFFICER DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF IDENTIFICATION: ..... ID NO: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

MOBIL NUMBER: .....

E-MAIL ADDRESS: .....

**KEY CONTACT PERSONS/PRINCIPAL OFFICER DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF IDENTIFICATION: ..... ID NO: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

MOBIL NUMBER: .....

E-MAIL ADDRESS: .....

**KEY CONTACT PERSONS/PRINCIPAL OFFICER DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF IDENTIFICATION: ..... ID NO: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

MOBIL NUMBER: .....

E-MAIL ADDRESS: .....

**ACCOUNT SIGNATORY'S DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF IDENTIFICATION: ..... ID NO: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

MOBIL NUMBER: .....

E-MAIL ADDRESS: .....

CLASS OF SIGNATORY: .....

SIGNATURE: ..... DATE: .....

**DIRECTOR'S DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF ID: ..... ID NUMBER: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

.....

MOBILE NUMBER: .....

E-MAIL: .....

SIGNATURE: ..... DATE: .....

**DIRECTOR'S DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF ID: ..... ID NUMBER: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

.....

MOBILE NUMBER: .....

E-MAIL ADDRESS: .....

SIGNATURE: ..... DATE: .....

.

**DIRECTOR'S DETAILS**

SURNAME: .....

FIRST NAME: .....

MIDDLE: .....

DATE OF BIRTH: ..... GENDER: .....

MOTHER'S MAIDEN NAME: .....

MEANS OF ID: ..... ID NUMBER: .....

OCCUPATION: .....

JOB TITLE: .....

RESIDENTIAL ADDRESS: .....

.....

MOBILE NUMBER: .....

E-MAIL ADDRESS: .....

SIGNATURE: ..... DATE: .....

***BOARD RESOLUTION OF DIRECTORS TO OPEN ACCOUNT***

We the members of the board of .....

On this ..... Of ..... 20.... hereby resolved to: .....

This Resolution is hereby signed under our seal as it was passed by the Board of Directors of

.....

.....

Name of Secretary and Signature

Name of Director and Signature

*Company seal must be fixed*

# RESOLUTION OF ALL PARTNERS

FULL NAME OF FIRM: .....

PASSED AS OF THE ..... DAY OF ..... YEAR 2015

BE IT RESOLVED:

1. THAT the partnership open an investment Account with Express Portfolio Services Ltd
2. THAT (choose one)

- Anyone of the following partners:
- Any two/three/four of the following partners:
- All of the following partners:

NAME: ..... TITLE: ..... SIGNATURE: .....

NAME: ..... TITLE: ..... SIGNATURE: .....

NAME: ..... TITLE: ..... SIGNATURE: .....

Whose name (s) appear (s) above has/have hereby been given full power and authority by partnership to deal with all decisions with respect to the Partnership's Investment Account and to execute any documents (s) in connection therewith and as such document (s) executed by said partners (s) on behalf of the partnership are hereby ratified and confirmed and Express Portfolio Services Limited shall be entitled to rely upon the authority without need to make further inquiries of the partnership.

3. **THAT** the managing partner of the partnership shall inform Express Portfolio Services of all changes of persons **holding positions** holding the positions listed in paragraph 2 thereof .

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CERTIFIED to be a true copy of the Resolution duly passed by the partners of -----  
----- at a properly constituted meeting duly held on ----- day of  
----- 20----- which Resolution is now in full force and effect, has not been mandated and does  
not conflict with the partnership Agreement of the said partnership.

MANAGING PARTNER: ..... SIGNATURE: -----



## *F*URTHER DETAILS

A. Kindly state employer's name and address or vocation and place of business

(If any) -----  
-----  
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B. Kindly state the purpose and reason for opening the account or establishing the Relationship

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C. Kindly state the source (s) of wealth or income and expected origin of funds to be used in the investment you have chosen to undertake with Express Portfolio Services Limited

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D. Kindly state your place of domicile -----

### **Important Notice**

To help the Federal Government of Nigeria fight the funding of terrorism and money laundering activities, the money laundering (Prohibition) (Amendment) Act 2012 and subsequent amendment thereto requires all financial and non-financial institutions to obtain, verify and record information that identifies each person who open an account. In this regard when you open an account with us at Express Portfolio Services Limited, we will ask for your name address, means of identification, occupation and other information that will enable us identify you and verify your identity on an ongoing basis.

Furthermore, in compliance with the money laundering (Prohibition) Act 2011, any single transaction, lodgement or transfer of funds in excess of N5,000,000 or its equivalent in the case of an individual or N10,000,000 or its equivalent in the case of a body corporate shall be reported in writing within 7days to the Nigerian Financial Intelligence Unite (NFIU) and the Securities And Exchange Commission (SEC) as applicable.

### **INTERNAL COMPLAINTS MANGEMENT POLICY**

Express Portfolio Services Limited maintains a comprehensive complaint register where clients complaints are adequately addressed and amicably resolved. Any client(s) of **Express Portfolio Services Limited** who has any complaint(s) will be required to channel such complaints to the management of **Express Portfolio Services Limited** for immediate resolution. Such Complaint should only be reported to the Regulatory Authorities if the management fails to resolve it

## **DESIGNATED NON FINACIAL INSTITIUTIONS COMPLINACE**

All designated Non-Financial Institutions (DNFIs) are required for regulation purpose to register with The Special Control Unit against Money Laundering (SCUML) of Federal Ministry of Commerce, Nigeria in order to monitor their business transaction against money laundering.

DNFIs refer to:

- a. Dealers in jewelry, precious stone and metals
- b. Dealers in cars and luxury goods
- c. Audit firms
- d. Tax consultants
- e. Clearing and settlement companies
- f. Lawyers
- g. Notaries
- h. Independent legal practitioners and chartered accountants
- i. Trust and Company Services providers (who provide service third parties)
- j. Hotels
- k. Casinos (including internet and ship based casinos)
- l. Supermarkets
- m. Real estate agents
- n. Non-governmental organizations (NGOS)
- o. Religious and charitable organizations
- p. And any such other business and professions as the Federal ministry of Trades and Investments or appropriate regulatory authority may from time to time designate

The above DNFIs customers include sole practitioners, partners and employed professionals within professional firms; they do not refer to “internal” professionals that are employees of other types of business, or to professionals working for government agencies, who may already be subject to Anti Money Laundering / Counter Financing of Terrorism measures.

Note: SCUML deals with such DNFIs that are incorporated entities (companies, business names, incorporate trustees etc): however individuals that practice or render such services in their personal capacity must also present themselves to SCUML for clearance.

**FOR OFFICIAL USE ONLY**

<b>S/NO</b>	<b>DETAIL</b>	<b>REMARK</b>
1.	Account Opening Form	
2.	Passport Photographs of Directors / Signatures	
3.	Identity: Drivers License, National ID, international Passport	
4.	Certificate of Incorporation	
5.	Forms CO2 and C07	
6.	Proof of Address (e.g)	
7.	Board Resolution detailing the authorized signatories to the account	
8.	Board Resolution authorizing the account opening	
9.	Special Control Unit Against Money Laundering (SCUML) Certificate	
10.	Certificate of Incorporation (Original for Sighting)	
11.	Memorandum and Article of Association (e.t.c)	
12.	Proof of address (e.g copy of utility bill)	
13.	Evidence of CAC registration of business name (for private firms)	
14.	Company's Profile	
15.	Directors' Profile	
16.	List of Names and Addresses of current Directors	

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VERIFIED BY: ..... APPROVED BY: .....