



# **ACCOUNT OPENING FORM - CORPORATE**

Section 1: ENTITY DETAILS			
esidency: Resident Non-resident If non-resident - Country of incorporation/registration			
Registered name:			
Name of account/Trade name:			
Physical business address (if applicable):			
Postal address:		Postal c	ode:
Head office address/Registered address (if applicable	e):	Postal c	ode:
Identity/Trust/Registration No.		Registration date (YYYY	-MM-DD):
Income tax number:	PIN number:	VAT n	number:
Establishment date (YYYY-MM-DD):		Financial year end (MM-DD):	
Anticipated annual turnover (in local currency):			
Type of activity expected on the account (e.g. cash d	eposits, debit orders	):	
Source of funds (e.g. Donation,Third Party Ioan):			
Source of income (e.g. profit from sales):			
Type of business conducted:		No. of empl	oyees/members
Business telephone number:		Business fax number:	
Contact details of Director/Authorised signa	tory		
Contact person	Capacity	Contact telephone numbers	E-mail
Section 2: BANK ACCOUNT DETA	AILS		
Account Name:		Account Number:	
Bank:	_ Branch:	Country	:
Sort Code/Routing Number/SWIFT Number/IBAN Nu	mber:		
Swift Code:			
Section 3: RISK PROFILE			
Investment Objective - tick where appropriate			
☐ Income - seeking to earn income through holding	of income yielding s	securities	
$\ \ \Box$ Growth - seeking to achieve growth of capital thr	ough investment in s	securities	
☐ Short term growth - short term trading to capitaliz	e on market fluctuation	ons	
☐ Speculation - aggressive investments that assum	ne above-average ma	arket risk to achieve corresponding ga	ains
Others (specify):			

# sbg securities

#### Section 4: RFI ATED PARTIES

#### A. Natural persons

These are individuals who are the authorised signatories, guardians of minors, members of close corporations, elected office bearers of informal bodies, partners of a partnership including silent partners, persons who exercise executive control in a partnership, directors of companies, including all directors authorised to act on behalf of the company, shareholders of companies with 25% or more of the voting rights trustees of a trust, beneficiaries of a trust, founders of a trust, manager of affairs of a foreign company, principal executive officer of domestic companies. I/We consent to the SBGS carrying out identity and fraud prevention checks.

	Full names	Type of Identity and number (e.g. Passport, National ID)	Country of issue of Identity document and Nationality	Residential address	Residential / Cell Contact telephone number	Capacity Designation	Signatory on account (Yes/No)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

#### **B.** Juristic entities

These are legal entities / businesses who are close corporations, partnerships, trusts, companies, other legal entities such as informal bodies, who are shareholders with 25% or more of the voting rights.

## Record details of related parties

	Registered name / Name of Trust / Other legal entity	Registration number / Trust number	Type of organisation (e.g. Ltd company / Informal Body)	Trade name	Rgistered address / Master's address (Trusts)	Head office address (if multiple offices)	Physical business address
1							
2							
3							
4							







Section 5: INVESTMENT PRODUCTS
☐ Equities (Complete and attach CDS account opening form) ☐ Fixed Income (I/we authorise SBG securities to use my/our KYC information to open a Central Depository System account at Central Bank of Kenya
Section 6: SIGNING MANDATE
A. Signing Instruction for Limited Company
☐ Only one to sign ☐ Any Director to sign ☐ Any two Directors to sign ☐ All Directors to sign
☐ Others (please specify)
B. Signing Instruction for Sole Proprietorship or Partnership
☐ By myself (for Sole Proprietorship) ☐ By any of us (for Partnership)
☐ Other arrangement (please specify)
Section 7: E-MAIL INDEMNITY

The client irrevocably and unconditionally agrees that of investment accounts, email/online/fax instructions (if opted for) will be acted upon without any other written confirmation. SBG Securities Limited will not liable for any adverse incident that might arise upon execution of such orders. The client acknowledges that they are fully aware and cognizant of the various risk's inherent and associated with communicating instructions by electronic means and the potential for various fraudulent activities arising from and out of such transmissions are fully prepared to accept such risks and that SBG Securities Limited will not assume such risks which may have far reaching consequences.

# Section 8: DATA PRIVACY NOTICE

We collect, process, and share your personal information to provide you with the services and products that you applied for. For any other processing not related to this purpose, your consent will be obtained. To read our detailed Privacy Statement, please visit: <a href="https://www.sbgsecurities.co.ke/kenya/personal/about-us/legal/privacy-and-security-statement">https://www.sbgsecurities.co.ke/kenya/personal/about-us/legal/privacy-and-security-statement</a>

### **Section 9: DECLARATION**

I/We the undersigned confirm that I/ we have read and understand the terms and conditions available on our website: https://www.sbgsecurities.co.ke/sbgsecurities/securities/about-us/terms-and-conditions and verify that the information provided above is true and that the below will be used as specimen signatures for any transactions with SBG Securities Ltd. I/We declare that the source of funds indicated above do not arise out of money laundering or illicit activities.



Section 10: SIGNATORIES		
Signatory	Signatory	Signatory
Name:	Name:	Name:
Date:	Date:	Date:
Signatory	Signatory	Signatory
Name:	Name:	Name:
Date:	Date:	Date:
Company Seal		





Colour photo

EUROPA TOWERS; WESTLANDS, 10TH FLOOR, ALONG LANTANA ROAD, NAIROBI P.O. BOX 3464 00100, GPO NAIROBI, KENYA, Tel: 020-2912000; FAX 2229405, www.cdsckenya.com

# (TO BE COMPLETED IN DUPLICATE) SECURITIES ACCOUNT OPENING/MAINTENANCE FORM

Joint Account Yes No.

NEW or EXISTING CDS Account Number CDA Code Account Number Client type Are You Tax Exempt? Yes No. Names in Block Letters Surname Other Names Company/Business Name (if client is a company, society or other organization) ID/Passport/Reg. No. (for company, business, etc) PIN No. Address Postal Code Telephone Number(s) Fax Number Email Address Date of Birth/Incorporation (as applicable) Country of Residence Source of funds Nationality Relationship F-mail Address Next of Kin Name Phone Number 1 2 Client Category (Tick as Applicable) Local Individual (LI), Local Company (LC), Foreign Individual (FI) Foreign Company (FC), E.A. investor (EI) E.A Company (EC) Dividend Disposal preference () by bank, please give details below () By Cheque Tick Where applicable Bank Details Bank **Branch** Account No. DECLARATION: I/We hereby: (i) Request to open and maintain a Securities Account in my/our name/ Change particulars in my/our Securities Accounts as indicated above (delete as appropriate) (ii) Affirm that all information in this form is correct. (iii) Undertake to notify my CDA any change of particulars or information provided by me/us in this form. Name(s) Signature(s)

1. ..... 2. ..... 2. ..... 3. ..... 4. ..... 4. .....

(Securities Account Holder's Authorized Signatory/Seal for Companies) Date: ...../..../..../

For CDA use only Witnessed and Verified by: ..... Authorized by: ..... Name: Name: ..... ...... Designation:

Designation: ..... ..... Date: ..... ..... Company Stamp

Other Services / Products

I/We request to be subscribed to the following services/products whose terms of use, I/We confirm to have read and understood. Find the Terms & Conditions at: www.cdsckenya.com

SMS Services	Online Account Services	Email Account Services