



1ST FLOOR, LEFT WING, LABOUR HOUSE CENTRAL BUSINESS DISTRICT, ABUJA
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 WEBSITE: www.tiddosecurities.com

TIDDO SECURITIES LIMITED
 CLIENT REGISTRATION FORM
 (TO BE COMPLETED IN CAPITAL LETTERS)

INDIVIDUAL APPLICANT

Client's Declaration

- (i) **I/We** understand that all payments by **me/us** to your company must be by **cheque** or **Bank credit advice** in case of cash payment (i.e. your company will not accept liability for direct cash payment through any staff since it is against your company's policy). Payment for stocks sold will also be by crossed cheque in my/our name.
- (ii) Whenever **I/we** forward stocks for verification you should feel free to provide any required indemnity cover for same to the relevant Registrar and charge **my/our** account accordingly.
- (iii) Whenever **my/our** account(s) fall into debit you are free to offset same against **my/our** stockholding(s).

1. Title: _____	Gender _____	(Please Attach Two Passport Size Photographs)
2. Surname: _____	_____	
3. Other Names: _____	_____	
4. Date of Birth: _____	_____	
5. Mother's Maiden Name: _____	_____	
6. Permanent Home Address: _____	_____	
7. State of Origin/ Local Govt: _____	_____	
8. Country: _____	_____	
9. Citizenship: _____	_____	
10. Current Contact Address: _____	_____	
11. Current Postal Address (P. O. Box or P. M. B. Only): _____	_____	
12. Tel: _____	_____	
13. Fax: _____	14. E-MAIL _____	
15. CSCS A/C No (If any): _____	_____	
16a. Main Bankers (Name and Address): _____	_____	
16b. Bank Account Name: _____	_____	
16c. Bank Account Number: _____	BVN: _____	
16d. Date Bank Account was opened: _____	_____	

17. **NEXT OF KIN/GUARDIAN**

Name: _____ **Phone No:** _____

Address: _____ **CSCS/CHN No (if any)** _____

18. **Referees:** _____

19. **Applicant's Signature(s) (1)** _____ **(2)** _____

Please Attach Photocopy of Driver's License, International Passport (Bio data page) or National ID Card (Complemented by Official Identity Card) as well as Utility Bills (NITEL, PHCN or Water Board).

For official use

Date Opened:

Passport No.:

Other Identification:

Reference:

Contact Staff/Branch:

Approved: