



(Trading License Holder of The Nigerian Exchange Limited)
RC 488472

ACCOUNT OPENING FORM No.....
INDIVIDUAL
Name of Client.....
Surname Other Names

If Joint
CHN(of existing CSCS Account).....
Residential Address:

.....LGA.....

Employer's name and address

Maiden name(if female/married).....

Home town.....State of Origin.....LGA..... Nationality.....

Mailing Address

Occupation

Date of Birth

Mother's maiden names

Telephone Number(s).....

Home	Mobile	Office
.....		
Fax	E-mail	

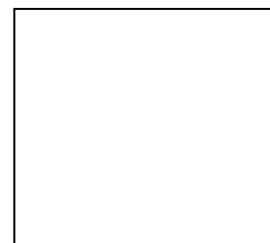
Specimen

Signature(s) of Account Holder(s).....

Purpose of opening the account.....

Expected Source(s) of Funds for the operation of the Account.....

.....



PYRAMID SECURITIES LIMITED
ACCOUNT OPENING FORM-INDIVIDUAL (CONTINUATION)

Name of client

I also own and operate CSCS Account(s) in the following name(s)

15

2 6.....

37

48

Name of Bankers (1) (2)

Bank Account no:

Sort Code:

Bank Account Name:

Date of opening Bank Account:

Next of KinCHN.....

AddressTel no.....

Signature and Name of Account Holder

Second Signature and Name (if Joint)

FOR OFFICE USE ONLY

Account Code if a Nominee Client.....CSCS Account No.....

Reference

Checked by:Approved byDate.....