

APT SECURITIES AND FUNDS LIMITED

ONLINE TRADING ACTIVATION FORM

FOR CORPORATE

Please fill this form in ENGLISH and in BLOCK LETTERS.

PHOTOGRAPH
Please affix your
recent passport

A. IDENTITY DETAILS

- 1. Company Name:
2. Date of incorporation: (dd/mm/yyyy) & Place of incorporation:
3. Date of commencement of business: (dd/mm/yyyy)
4. Registration No. :
5. Status (please tick any one):
Private Limited Co./Public Ltd. Co./Body Corporate/Partnership/Trust/Charities/NGO's/Fl/ FII/HUF/AOP/ Bank/Government Body/Non-Government Organization/Defense Establishment/BOI/Society/LLP/ Others (please specify)

B. ADDRESS DETAILS

- 1. Address for correspondence:
City/town/village: State: Country:
2. Contact Details: Tel. (Off.) Mobile No.: Email id:
3. Specify the proof of address submitted for correspondence address(Water Bill/PHCN /Waste Mgt/Tenancy Agreement):
4. Registered Address (if different from above):
City/town/village: State: Country:

C. BANK ACCOUNT DETAILS (ONLY CURRENT ACCOUNT DETAILS REQUIRED)

- 1. Banker Name: Account Number:
2. Address of Bank:

D. BASIC REQUIREMENTS

- 1. Board Resolution
2. Memorandum & Article of Association
3. Certificate of Incorporation/Registration
4. Particulars of Directors(Form Co7)/Trustees
5. Partnership Deed
6. Power of Attorney
7. Approval Letter (for Government/Ministries/Parastatals)
8. Signatories International Passport/National ID/Driver's License/Tax Card
9. Signatories Passport Photograph
10. Share Allotment (Form Co2)

DECLARATION

By signing below, you agree and acknowledge that APTSEC shall not be liable for any loss or damage whether direct or indirect, arising from any Transactions conducted through the System and the use of any channel to access the trading site, suffered by you arising from the unlawful interception, corruption, delay, non-delivery or wrong delivery of any information provided through/for the Website, suffered by you arising from the breach of your security profile.

Name & Signature of the Authorized Signatory & Company Seal

Date: (dd/mm/yyyy)

FOR OFFICE USE ONLY

Originals verified and Self-Attested Document copies received

(.....)
Name & Signature of the Authorized Signatory

Date(dd/mm/yyyy)

Seal/Stamp of the intermediary