

**CORPORATE CLIENT NEW ACCOUNT/AMENDMENT FORM**

REGISTERED COMPANY NAME: .....

ADDRESS : .....

POST CODE: ..... TOWN: ..... STATE: .....

CONTACT PERSON : ..... DESIGNATION: .....

E-MAIL : ..... DEPARTMENT: .....

TEL NO : ..... FAX NO: .....

MAILING ADDRESS : .....

*(If different from above)*

POST CODE: ..... TOWN: ..... STATE: .....

FORM OF BUSINESS: :  SOLE PROPRIETOR  PARTNERSHIP  LIMITED COMPANY  PUBLIC LISTED

NATURE OF BUSINESS : .....

EMPLOYEERS IN TOTAL : .....

IN BUSINESS SINCE : .....

DATE OF INCORPORATION : ..... BUSINESS REG/CERT. OF INCORP NO: .....

AUTHORISED CAPITAL : ..... PAID UP CAPITAL: .....

NAMES AND ADDRESSES OF BANKERS:

1) ..... 2) .....

POST CODE: ..... TOWN: ..... POST CODE: ..... TOWN: .....

STATE : ..... STATE : .....

BANK A/C NO: ..... BANK A/C NO: .....

**\*KINDLY ATTACH CURRENT FORM 24/49 AND ANNUAL REPORT OR AUDITED FINANCIAL REPORT.**

I/WE THE UNDERSIGNED CONFIRM THAT THE INFORMATION GIVEN IS TRUE.

.....  
AUTHORISED SIGNATURE AND COMPANY CHOP

.....  
DATE

.....  
NAME OF AUTHORISED PERSON

.....  
DESIGNATION

**FOR OFFICE USE ONLY**

FACILITY GRANTED : .....

REVIEWED BY : ..... DATE : .....  
Name

APPROVED BY : ..... SIGNATURE : .....  
Name of Authorised Person

COMPANY CODE : .....