



Corporate Opening Form

Company Address

7th Floor, ED Building, 47 Marina, Lagos.
Phone number: 015155558, 015155559

Email: Hello@coremars.com

Website: www.coremars.com

A COMPANY DETAILS

Registered Name			
Registered Address			
Foreign Business/Mailing Address (if any)			
Incorporation Country		Tax Identification Number (TIN)	
Domicile Country		Type of Business	
Sector		Sub- Sector	
Registration Number		Date of Registration	
Email Address			
FATCA Classification: Foreign Financial Institution (FFI)		☐	Non Foreign Financial Institution (NFFI)
Web Address			Telephone Number
Foreign Telephone Number (If any)			Fax
Please list your services			

B DETAILS OF DIRECTORS (1)

Title		Nationality		Affix current passport size photo
Surname				
First Name				
Middle Name				
Residential Address				
State		Country of residence		
Mobile Phone		Zip Code		
Home Phone		Fax		
Office Address				
Work Phone		Designation		
Email Address		Shareholding Percentage (If Any)		
Date of Birth				
Means of Identification		ID Number		
Issue date				
Signature/Date				

Tick as appropriate **A** ☐ **B** ☐ **C** ☐ **D** ☐

C DETAILS OF DIRECTORS (2)

Title		Nationality		Affix current passport size photo
Surname				
First Name				
Middle Name				
Residential Address				
State		Country of residence		
Mobile Phone		Zip Code		
Home Phone		Fax		
Office Address				
Work Phone		Designation		
Email Address		Shareholding Percentage (If Any)		
Date of Birth				
Means of Identification		ID Number		
Issue date				
Signature/Date				

Tick as appropriate **A** ☐ **B** ☐ **C** ☐ **D** ☐

D DETAILS OF DIRECTORS (3)

Title		Nationality		Affix current passport size photo
Surname				
First Name				
Middle Name				
Residential Address				
State		Country of residence		
Mobile Phone		Zip Code		
Home Phone		Fax		
Office Address				
Work Phone		Designation		
Email Address		Shareholding Percentage (If Any)		
Date of Birth	D M Year	ID Number		
Issue date	D M Year	Expiry date	D M Year	
Signature/Date			Tick as appropriate A ☐ B ☐ C ☐ D ☐	

E DETAILS OF DIRECTORS (4)

Title		Nationality		Affix current passport size photo
Surname				
First Name				
Middle Name				
Residential Address				
State		Country of residence		
Mobile Phone		Zip Code		
Home Phone		Fax		
Office Address				
Work Phone		Designation		
Email Address		Shareholding Percentage (If Any)		
Date of Birth	D M Year	ID Number		
Issue date	D M Year	Expiry date	D M Year	
Signature/Date			Tick as appropriate A ☐ B ☐ C ☐ D ☐	

F DETAILS OF DIRECTORS (5)

Title		Nationality		Affix current passport size photo
Surname				
First Name				
Middle Name				
Residential Address				
State		Country of residence		
Mobile Phone		Zip Code		
Home Phone		Fax		
Office Address				
Work Phone		Designation		
Email Address		Shareholding Percentage (If Any)		
Date of Birth	D M Year	ID Number		
Issue date	D M Year	Expiry date	D M Year	
Signature/Date			Tick as appropriate A ☐ B ☐ C ☐ D ☐	

PURPOSE FOR OPENING THIS ACCOUNT**EXPECTED ORIGIN OF FUNDS TO BE USING DURING THIS RELATIONSHIP**

The initial investments are a minimum lump sum of N10,000,000.00 (Ten Million Naira). Thereafter, you can choose to make minimum subsequent investments of N1,000,000.00 (One Million Naira). Please tick the appropriate column if you wish to receive tenor-specific pay outs or reinvestment of earned income. Tenor specific pay outs refer to interest and dividend payments on the residual principal. You can change this instruction t any time by contacting any of our Relationship Managers. If you choose the option of receiving income (i.e. interest and dividend) payments on a tenor specific basis paid into your bank account please complete section below.

Initial Investment (Min of N10,000,000.00)	Preferred Income Payment Structure	
	Tenor-specific payouts	Reinvestments:

Bank	
Account Name	
Account Number	
Bank verification Number (BVN)	

The following items will also be required to complete the account opening process:

1. Certified copy of Certificate of Incorporation or evidence of registration;
2. Certified copy of Memorandum and Articles of Association;
3. Certified copy of Form CO7 (Particulars of Directors);
4. Copy of the utility bill for the company;
5. Copy of identification of signatories (Driver's license, International Passport or National ID Card.
6. Resident permit or work permit for foreign citizens

CLIENT AGREEMENT

when you sign this account opening form, you confirm that you understand and agree that;

1. The information provided to us in this form is true and complete.
2. You will advise us of any changes and additional information we may require.

The authorized signatories are the only persons who can give us instructions on, or receive information about your account unless you advise us otherwise. This includes instructions for withdrawals

Signature Mandate

Client Signature

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Official Use Only

Verified by:		Signature/ Date	
Compliance Unit Head:		Signature/ Date	

I/We, the undersigned,

_____ (hereinafter referred to as "the client") hereby request and authorize you, Coremars Asset Management Limited (hereinafter referred to as "Coremars AML"), to effect transactions, on the client's behalf on the following terms and conditions:

1. Coremars AML is hereby authorized to purchase and/or sell securities for the client's account only on the client's prior instructions. Such instructions shall, accordingly, be obtained from the client in respect of each purchase and/or sale transaction (or series of transactions) effected by Coremars AML. Coremars AML is also authorized and empowered to perform such acts as are necessary to give effect to these instructions.
2. We understand that Access Bank Custodians will act as our Custodian for the safekeeping of cash and securities. Accordingly, Coremars AML shall not maintain custody of my/our cash or securities. All cash payment by me/us for the purpose of effecting transactions shall be made directly to the Custodian Account.
3. I/We hereby take full responsibility for any loss occasioned by paying cash directly through account officers without any recourse to Coremars AML.
4. In effecting transactions on client's behalf:
- 4.1. Coremars AML shall procure the immediate payment by the Custodian to the client or to the clients order, all cash proceeds received by the custodian in respect of, or arising from, the execution of the client's instructions in immediately available feely transferable funds.
- 4.2. Coremars AML and/or the Custodian shall be entitled to charge the client for expenses incurred in the process of executing transactions for the client. Coremars AML and/or the custodian shall be entitled to debit such applicable charges from the client's account prior to remitting cash.
- 4.3. Coremars AML is hereby authorized to have a personal interest in any transaction for the purchase and/or sale of the client's securities, which personal interest may conflict with those of the client. Unless requested by the client in writing, Coremars AML is not required to specifically disclose such interest to the client prior to entering such transactions.
- 4.4. Coremars AML is hereby requested and authorized at its sole discretion to provide any or all services, and to enter in to and/or effect any and all transactions, via such methods of communication, including electronic means as Coremars AML shall specify from time to time.
5. I/We hereby agree that Coremars AML shall be assisted in the discharge of its anti-money laundering responsibilities by me/us providing such information and evidence as Coremars AML may request from time to time in this regard.
6. I/We agree that Coremars AML have no responsibility for and shall be indemnified be me/us in full on demand against any loss, damage or other liability suffered or incurred by Coremars AML in connection with any instruction or request from us, believed by Coremars AML in good faith to have been given in accordance with this mandate.
7. This mandate shall only be cancelled by notice in writing or delivered by hand or sent by registered post by one party to the other party to the applicable address and such cancellation shall only become effective when the other party has received such notice.
8. In this mandate the expression "Transaction" means and includes:
- 8.1. Any purchase an sale of or other dealing in commercial or government paper, bonds, certificates of deposit, equities and other securities on behalf of us; and
- 8.2. such other transactions effected on my/our behalf or entered with me/us.
9. In the case of liquidation before maturity, the clients shall forfeit the interest accrued from the point of investment.
10. For its services, Coremars AML shall earn 2% per annum of the Asset under Management at the point of purchase of my investments(s) (the "Fee"). The fee shall be net of any charges applicable to my account and shall be debited from my account by Coremars AML (or the custodian where applicable).
11. Coremars AML reserves the right to review this dealing mandate from time to time to reflect market realities.
12. This mandate shall be governed by the Nigerian Law.

I have read this mandate or have had my solicitor review it and fully understand and acknowledge the terms herein contained.

Authorized Signatory

Authorized Signatory

N.B. All deletions and/or alterations must be initialed by the client. The mandate must be initialed by all signatories thereto

ACCOUNT AUTHORIZATION

TRANSACTIONS AUTHORISATION REQUIREMENTS: Please tick any of the following to confirm our authorization for transactions on the account:

By Telephone

By Email

By Written authorization

Others, Please specify

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Please note that if no instruction restrictions are specified, Coremars AML may, as its sole discretion, accept and act on any instruction or the purported instructions issued by you however given or originated including fax, telex, or any electronic system used by Coremars AML from time to time. Coremars AML may also, at its sole discretion, require at any time instructions from you.

DEED OF INDEMNITY – FOR FAXES AND ELECTRONIC INSTRUCTION

This deed of indemnity is made this _____ day to _____ by (hereinafter referred to as "the client which expression shall where the context so admits include his successors-in-title-and assigns") in favour of Coremars Asset Management Limited (hereinafter referred to as "Coremars AML" which expression shall be where the context so permits include its successors-in-title and assigns).

WHEREAS:

The client has opened an investment account(s) with Coremars AML, and desires to issue investment instructions and other transactions documents to Coremars AML, as may be required from time to time.

The client hereby requests. and Coremars AML hereby agrees to act upon fax, internet, electronic mails and scanned copies of documentation for banking facilities/transactions with Coremars AML and for any instruction in respect of the account(s) and its operations as if same were originals and/or hard copies provided that the documentation and instructions are issued in line with the client's mandate with Coremars AML.

IT IS HEREBY AGREED AS FOLLOWS:

In consideration of Coremars AML agreeing to accept fax, internet, electronic mails and scanned copies of documentation for banking facilities and any instruction in respect of my investment account(s) and its operations,

I, _____ hereby irrevocably and unconditionally agree that all fax, internet, electronic mails and scanned copies of any documentation and/or instructions issued by me in respect of my account(s) or dealings with Coremars AML shall be binding and enforceable against me. I further agree to fully indemnify Coremars AML against any proceedings, claims, expenses and liabilities whatsoever which may be taken or made against or incurred by Coremars AML by reason of Coremars AML accepting the fax, internet, electronic ails, scanned copies of the documentation and/or instructions.

I further confirm that Coremars AML set-off any such expenses/cost incurred by it in respect of my obligations herein against any of my investment account(s) with Coremars AML.

Authorized Signatory

Name

Signature

Date

		D			M					Year
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Authorized Signatory

Name

Signature

Date

		D			M					Year
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BOARD RESOLUTION

EXTRACT FROM THE MINUTES OF THE MEETING OF THE BOARD / MEETING OF THE MANAGING COMMITTEE OF THE COMPANY HELD
ON _____ DAY OF _____, _____ AT ITS REGISTERED OFFICE
AT _____

The Board adopted the following resolutions:

1. That an investment account(s) be opened in the name of _____ with
COREMARS ASSET MANAGEMENT LIMITED.
2. That the following person(s) be and is/are hereby jointly authorized to open, operate the above investment account:

S/N	NAME	DESIGNATION	MANDATE	SIGNATURE

3. That the above-mentioned persons be and are hereby authorized on behalf of the company to transact on the said account(s) as they deem fit, without any or further recourse to the company and any decision taking by the above mentioned authorized persons shall be binding on the company.

4. That the company through any of its authorized or designated officer(s) shall promptly notify COREMARS ASSET MANAGEMENT LIMITED in writing of any change in its resolutions(s), and such notice shall be forwarded to our office.

5. That the company shall indemnify COREMARS ASSET MANAGEMENT LIMITED against any loss, expenses and/or damages it may sustain through the company's failure to notify or delay in notifying COREMARS ASSET MANAGEMENT LIMITED of any alteration, amendment or addition to the corporate documents, submitted to COREMARS ASSET MANAGEMENT LIMITED by the above authorized persons.

6. That the common seal of the company be affixed to such documents as may be required by the COREMARS ASSET MANAGEMENT LIMITED. Dated this ____ day of _____ 20____

SIGNED SEALED AND DELIVERED BY THE WITHIN-NAMED

DIRECTOR

DIRECTOR/SECRETARY