FIDELITY FINANCE COMPANY LIMITED

(Member of The Nigerian Stock Exchange)

□Stockbrokers □Portfolio Managers

□Investment Advisers □Issuing House

ACCOUNT OPENING FORM

CLIENTS ACCOUNT OPENING FORM (KYC UPDATES)

TITLE:..... NIN:.....

SURNAME:.....

OTHER NAMES:.....

ADDRESS.....

..... DATE OF BIRTH:.....

PHONE NUMBER:..... OCCUPATION:.....

GENDER Male ☐ Female ☐

EMAIL ADDRESS:.....

LOCAL GOVERNMENT:.....NEXT OF KIN:.....

NEXT OF KIN PHONE NUMBER.....

STATE OF ORIGIN:.....

NEXT OF KIN ADDRESS:.....

RELATIONSHIP WITH NEXT OF KIN:.....

MOTHER'S MAIDEN NAME:.....

BANK NAME:..... BVN:.....

BANK ACCOUNT NUMBER:.....

BANK ACCOUNT NAME:.....

SOURCE(S) OF FUND:.....

DATE:..... SIGNATURE:.....

INDEMNITIES

a. You agree to indemnify FIDELITY FINANCE COMPANY LIMITED against any claims resulting from your negligence, violation of Applicable Laws, breach of warranties or failure to comply with this agreement.

b. You must provide accurate and up-to-date KYC/CDD information and comply with all applicable AML/CFT/CPF laws. Also, be at least 18(eighteen) years to be eligible to open and use an account with us, you acknowledge that in order to open an account and continuously operate said account in compliance with AML/CFT/CPF Laws. ("KYC/CDD Information" means you must provide identification and CDD documents as required to comply with AML/CFT/CPF Laws.)

c. The above Email and Phone Number hereby serves as communication mediums to enable "Buy and/or Sell" Mandate for the trade of shares/stocks/bonds through your CSCS Account domiciled with the company in accordance with the service offering subscribe to and such instructions must emanate either via email and phone texts filled in this account opening for or by a hard copy of a duly executed mandate form by authorized signatory(ies)

d. You affirm that in line with the relevant Data protection laws in Nigeria, you consent to the collection and processing of my personal data/information in the absence of any fraud, duress, undue influence or coercion for the purpose of this account opening and other necessary data processing activities which may arise therefrom, including the performances of the relationship between myself and FIDELITY FINANCE COMPANY LIMITED

e. Consent to indemnify the Company against any losses whatsoever suffered by you or the company as a result of the company acting on the basis of the stated email. You hereby consent that the provided e-mail and phone number will be your preferred means of communication.

CLIENT'S SIGNATURE: .....DATE: .....

FOR OFFICIAL USE ONLY

ACCOUNT OFFICER: .....
NAME/SIGNATURE/DATE

HEAD OF OPERATION: .....
NAME/SIGNATURE/DATE

COMPLIANCE OFFICER: .....
NAME/SIGNATURE/DATE

APPROVAL: .....
NAME/SIGNATURE/DATE

REQUIREMENTS:

- 1 Passport Photo:
- Copy of means of ID (D/License, Int'l Passport, National ID/NIN ID, PVC);
- Utility Bill (PHCN, Waste Disposal etc).