



Note: Portions marked with (*) Are compulsory sections and must be completed
This form must be sent to the Manager

Channels	
<input type="checkbox"/> Face to Face	<input type="checkbox"/> Branches <input type="checkbox"/> Other (please specify) _____
Originating branch: _____	
Category of Investment	
<input type="checkbox"/> Individual	<input type="checkbox"/> Joint <input type="checkbox"/> ITF
<input type="checkbox"/> HNI	<input type="checkbox"/> CIS <input type="checkbox"/> Fixed Income <input type="checkbox"/> Brokerage <input type="checkbox"/> CSD No: _____
Others:	
Product Name 1 _____	
Product Name 2 _____	
Product Name 3 _____	
*Personal Information 1	
*Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Other (Please specify) _____
*Surname:	*First Name:
Other Name(s):	Maiden Name:
*Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married	*Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
*Date of Birth (DD-MM-YYYY)	*Place of Birth:
Mother's Maiden Name: _____	
*Residential Status:	
<input type="checkbox"/> Resident Ghanaian	<input type="checkbox"/> Non-Resident Ghanaian <input type="checkbox"/> Resident Foreigner <input type="checkbox"/> Non-Resident Foreigner
*Country of Origin:	*Country of Residence:
If country of origin is not Ghana, please provide the following:	
Resident Permit Number:	Permit Issue Date (DD-MM-YYYY):
Place of Issue:	Permit Expiry Date (DD-MM-YYYY):
*Occupation: _____	
Profession:	Professional Licence Number (If Applicable):
*TIN / Ghana Card No.: _____	
*Personal Information 2	
*Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Other (Please specify) _____
*Surname:	*First Name:
Other Name(s):	Maiden Name:
*Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married	*Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
*Date of Birth (DD-MM-YYYY)	*Place of Birth:
Mother's Maiden Name: _____	

***Personal Information 2 (continued)**

***Residential Status:**

Resident Ghanaian Non-Resident Ghanaian Resident Foreigner Non-Resident Foreigner

*Country of Origin: _____ *Country of Residence: _____

If country of origin is not Ghana, please provide the following:

Resident Permit Number: _____ Permit Issue Date (DD-MM-YYYY): _____

Place of Issue: _____ Permit Expiry Date (DD-MM-YYYY): _____

*Occupation: _____

Profession: _____ Professional Licence Number (If Applicable): _____

*TIN / Ghana Card No.: _____

***Contact Details**

*Residential Address: _____

Nearest Landmark: _____ Digital Address (GhanaPost GPS): _____

City / Town: _____

Postal Address: _____

Email Address: _____

*Mobile Number 1: _____ Mobile Number 2: _____

***Contact Details (In case of emergency):**

Contact Name: _____

Relationship to Client: _____

*Contact Number: _____

***Proof of Identity 1 (Must be completed by each applicant)**

*ID Type: Passport Voters ID Drivers License SSNIT Biometric Card National ID

ID Number: _____ *Issue Date (DD-MM-YYYY): _____

Place of Issue: _____ *Expiry Date (DD-MM-YYYY): _____

***Proof of Identity 2 (Must be completed by each applicant)**

*ID Type: Passport Voters ID Drivers License SSNIT Biometric Card National ID

ID Number: _____ *Issue Date (DD-MM-YYYY): _____

Place of Issue: _____ *Expiry Date (DD-MM-YYYY): _____

***Statement Services**

*Mode of Statement Delivery: Email By post SMS Collection

*Statement Frequency: Quarterly Specify any other additional statement frequency

***Employment / Business Details**

*Status: Employed Self-employed Retired Student

Years of Employment: _____ Years of Current Employment: _____ Years of Previous Employment: _____

Total Monthly Income Range: Below 1,000 Above 1,001 - 5,000 Above 5,000-10,000 Above 10,000

***Employment / Business Details (continued)**

NB: Income includes salary and other income / cash inflows

Employer / Business / School Name:

Employer / Business /School Address:

Nearest Landmark:

Digital Address
(GhanaPost GPS):

City / Town:

*Nature of Business:

Business / School / Office Contact Number 1:

Business/School / Office Email

Business / School / Office Contact Number 2:

In Trust For

*Title Mr. Mrs. Ms. Prof. Dr. Other (Please specify)

*Surname:

*First Name:

Other Name(s):

Maiden Name:

Relationship with Account Applicant:

Marital Status Single Married

Gender Male Female

*Date of Birth (DD-MM-YYYY)

Place of Birth:

*Country of Origin:

*Country of Residence:

*ID Type: Passport Voters ID Drivers License SSNIT Biometric Card National ID

*ID Number:

*Issue Date (DD-MM-YYYY):

*Place of Issue:

*Expiry Date (DD-MM-YYYY):

Beneficiary

Beneficiary/ies Details

Name	Relationship	GPS Code	Contact	Percentage (Should Add Up To 100%)

***Client Investment Profile**

1 *Investment Objective:

2 *Risk Tolerance: Low Medium High

3 *Investment Horizon: Short Term Medium Term Long Term

4 *Investment Knowledge: Low Medium High

***Expected Account Activity**

*Source of Funds: Salary Proceeds from Business Inheritance/Gifts Personal Savings
 Others (please specify)

*Initial Investment Amount:

***Anticipated Investment Activity:**

Top-ups: Monthly Quarterly Bi-Annually Annually
 Other (please specify)

Withdrawals: Monthly Quarterly Bi-Annually Annually
 Other (please specify)

***Anticipated Investment Amount:**

*Regular Top-up Amount (Expected): Regular Withdrawal Amount (Expected):

***Bank Account Details**

Bank Name	Account Name	Account Number	Bank Branch

***Account Mandate 1**

Name of Signatory _____ Signature Specimen _____

Name of Signatory _____ Signature Specimen _____

One to sign Either to sign Both to sign

***Account Mandate 2**

Name of Signatory _____ Signature Specimen _____

Name of Signatory _____ Signature Specimen _____

One to sign Either to sign Both to sign

***Client Additional Information 1**

NB: The following questions are designed to enable the institution determine whether the client is a Politically Exposed Person (PEP)

Do you, your spouse, or any other immediate family member, including parents, in-laws, siblings and dependants fall under the following:

A head of state/government, politician, senior public official, senior military official, senior public corporation officer, high rank political party official in Ghana Yes No

If yes to any above, please specify name (if not the applicant) and nature of the position:

A head of state/government, politician, senior public official, senior military official, senior public corporation officer, high rank political party official outside Ghana Yes No

If yes to any above, please specify name (if not the applicant) and nature of the position:

***Client Additional Information 2**

NB: The following questions are designed to capture information for common reporting standards as well as FATCA (Foreign Account Tax Compliance Act)

Are you a citizen of any foreign country (besides Ghana)? Yes No

Do you hold passport of any foreign country (besides Ghana)? Yes No

Do you hold green card of any foreign country (besides Ghana)? Yes No

Are you resident in any foreign country? Yes No

Have you spent more than 183 days in any foreign country? Yes No

If the responses to any of the above questions is Yes, please provide the following information:

Full Name:

Foreign Residential Addresss:

Foreign Mailing Address:

Foreign Telephone Number:

Foreign Tax Identification Number (TIN)/Social Security Number (SSN)/National Identity Number:

I/We, _____ Hereby confirm the information provided above is true, accurate and complete.

Signature

Date (DD-MM-YYYY)

Undertaking to be signed only by those who responded 'YES' to the first set of questions above

Subject to the applicable local laws, I hereby give consent to the Institution to share my information with foreign tax authorities where necessary to establish my tax liability. Where required by domestic or foreign tax authorities, I give my consent and agree that the Institution may withhold from my investments such amounts as may be required according to the applicable laws of relevant jurisdictions.

Signature

Date (DD-MM-YYYY)

Client Additional Information 3*For Depository Participant Use Only**Have you bought a security such as Treasury bill, bond shares etc before Yes No

Existing CSD Client ID (If Applicable)

Bank information of the investor for dividends, interest and maturity disposal if different from above Bank details (For equity or shares, the Bank information is optional)

Bank Name	Account Name	Account Number	Bank Branch

Declaration if Applicable

I/we hereby declare:

- (i) request to open and maintain a Security Account in my/our name
- (ii) affirm that all information in the form are correct
- (iii) undertake to notify the Depository Participant of any change of particulars or information provided by me in this form

Name: _____ Date (DD-MM-YYYY): _____
 (Securities Account holder / Authorised Signatory / Guardian)

Signature

Tick where applicable
 Local Individual (LI) Local Junior (LJ) Foreign Individual (FI) Foreign Junior (FJ) Resident Foreigner (FR)

Verified by CSD Officer: _____ Date (DD-MM-YYYY): _____
 (Name of Depository Participant Officer)

Signature _____ Stamp _____

Client CSD Securities Account Number:

Illiterate / Blind Customer Ratification

I agree to abide by the content of this agreement that has been truly and audibly read over and explained to me by inter

Mark of customer / thumbprint / signature _____ Mark of Interpreter / thumbprint / signature _____

Name and address of interpreter:

Language of interpretation: _____ Date (DD-MM-YYYY): _____

Release of Indemnity

- a **WHEREAS** I/we have requested the Stanbic Bank Ghana Limited (“hereinafter called ‘the Bank’ to act on instructions transmitted by me/us to it by Email).
- b **AND WHEREAS** the Bank has informed me/us that it is prepared to act on Email instructions which purport to emanate from me/us if it receives a release and indemnity in the form hereof;
- c **AND WHEREAS** I/we are prepared to give such release and indemnity:

NOW THEREFORE we, the undersigned (_____) herein

Represented by (_____)

In their capacity as (_____)

DO HEREBY-

- 1 acknowledge that it is not practical for the bank to establish the authenticity of all messages emailed to the Bank which purport to emanate from me/us;
- 2 agree that all Emailed instructions, mandates, consents, commitments and the like which purport to emanate from me/us shall be deemed to have been given by me/us in the form actually received by the Bank (“purported E-mailed instruction”) – which may, as a result of the malfunctions of equipment, the distortion of communication links and the like, be different to that intended or sent – and I/we shall be bound thereby;
- 3 hereby waive any rights I/we may have or obtain against the Bank arising directly or indirectly from any losses or damages which I/we may suffer because the Bank acts on any purported faxed instructions; and I/we agree to indemnify the Bank in respect of any claims, demands or actions made against it or losses or damages suffered by it because it so acted.
- 4 agree to implement and adhere to any procedure and /or restrictions imposed on me/us by the Bank from time to time regarding the sending of e-mail instructions to the Bank.
- 5 agree that this release and indemnity will not be any failure by the Bank to impose any or sufficient procedures or restrictions or to ensure that any, or all of them are adhere to;
- 6 agree that the Bank will not be obliged to act on any purported emailed instructions and that it may at any time on written notice sent to me/us at (_____) Withdraw from the arrangements envisaged in this document.

Signed at (_____) this _____ day of _____ 20 _____

Name	Authorised signatures

As witnesses	For and on behalf of
1	
2	



Stanbic

SBG Securities Ghana Limited

Standard Terms and Conditions applicable to Stockbroking Relationships with SBG Securities Ghana Limited

SBG Securities Ghana Ltd (SBG) office is open for business between Monday and Friday, 08h00 to 17h00 on each day that is designated a business day in Ghana (except public holidays).

Client orders can be sent via e-mail once an email indemnity form has been duly completed, signed and submitted. The dedicated e-mail address for communication is brokerage@stanbic.com.gh.

SBG is licensed by the Securities and Exchange Commission (SEC) of Ghana and also regulated by the Ghana Stock Exchange.

Account application forms may be sent electronically but must be confirmed by sending SBG the original of the same.

Orders/Amendments placed and received after the close of trading on any business day will be processed on the next business day after such receipt.

Orders/Amendments received on a day that is not a business day will be deemed to have been received on the business day immediately following the day of actual receipt.

Where an order consists of a purchase instruction, it can only be processed if sufficiently cleared funds are available to execute such an instruction.

In the case of changes in particulars, supporting documentation duly certified must accompany all requests.

Where an order is given, SBG would make requisite purchases/sales within a reasonable timeframe dependent on availability and the price quoted by the client for the identified shares.

The client acknowledges that it will ensure that SBG has the client's most up to date details and takes responsibility to inform SBG of any changes in personal information. In the event that the client becomes unreachable or any payment due to the client is rejected by the receiving bank, the client's investment may be regarded as an unclaimed asset. SBG will make a concerted effort in contacting the client in relation to the unclaimed assets.

Where an order is a switch or contingent, the purchase order will not be executed until the sale transaction has been executed. The sale order would be executed and not depend on availability of the stocks to purchase.

SBG is acting as an execution-only stockbroker and not financial advisors. Consequently, we will only execute your BUY and SELL orders on the floor of The Ghana Stock Exchange (GSE).

All deposits for share purchases should be made into the designated bank account as per the application form:

Foreign currency inflows must be sent to SBG relevant bank account and may be transferred in foreign currency or Ghana Cedis. Stanbic Bank Ghana will confirm the conversion rate or spot rate upon receipt of any foreign currency transfer. SBG will not be held liable for the client's investment until funds are received in SBG's relevant bank account.

SBG executes transactions based on the ruling market prices of stocks on the Ghana Stock Exchange only.

The client hereby agrees to provide all documentation and information required and understands that SBG is prohibited from processing any transaction on the client's behalf until all such documentation has been received, unless the submission and declaration has been completed by the client.

Payment and withdrawals can only be made into an account or cheque issue in the name of the client. No third-party cheque payments will be made except where client has expressly instructed SBG to do so.

SBG executes orders on a best effort basis only, and therefore unable to guarantee that an order will be executed on a particular day, even where such an order indicates that the relevant transaction is to be effected at "market price".

Orders will only be accepted where presented in the standard format provided by SBG which are available at our offices or can submitted via approved electronic means.

SBG reserves the right to go back to the client for more information, if additional information is required following the compliance review process. Unless previously provided to SBG, please send verified/certified copies of documents requires. These may be used to verify the identity of the client. Strictly, only clear, legible copies of identity and other documents will be accepted.

All contract notes confirming an execution of a transaction on your behalf will be forwarded by email to client by the close of business on the next working day.

SBG reserves the right to off-board a client should any aspects of the compliance process deem the client to be of an unacceptable risk. We can only process instructions which are fully complete and accurate and once the funds for the investment reflects in our bank account. We may suspend, delay or reject your instruction if it does not meet our requirements. You indemnify SBG against any loss of any nature which may arise if any money you have paid to the SBG bank account is reversed for any reason.

Should the client wish to lodge a complaint with SBG regarding the services being provided, the client can send an email to brokerage@stanbic.com.gh.

Contact Office Number: **+233 302 610 690** or via post to:

**SBG Securities Ghana Limited,
P.O. Box CT2344,
Cantonments,
Accra**

Data Protection

I/We agree to provide all documentation and information and understand that SBG Securities is prohibited from processing any transaction on my behalf until all such documentation and information has been provided. Any money received by SBG Securities that is not accompanied by the required documentation will be held in a temporary account until said documentation is received.

Data Protection: You consent to us collecting your Personal Information from you and where lawful and reasonable, from public sources for credit, fraud and compliance purposes, as well as the purposes set out below. If you give us Personal Information about or on behalf of another person (including, but not limited to, account signatories, shareholders, principal executive officers, trustees and beneficiaries), you confirm that you are authorised to: (a) give us the Personal Information; (b) consent on their behalf to the Processing of their Personal Information, specifically any cross-border transfer of Personal Information into and outside the country where the products or services are provided; and (c) receive any privacy notices on their behalf. You consent to us Processing your Personal Information:

- to provide products and services to you in terms of this agreement and any other products and services for which you may apply;
- to carry out statistical and other analyses to identify potential markets and trends, evaluate and improve our business (this includes improving existing and developing new products and services);
- In countries outside the country where the products or services are provided. These countries may not have the same data protection laws as the country where the products or services are provided. Where we can, we will ask the receiving party to agree to our privacy policies;
- By sharing your Personal Information with our third-party service providers, locally and outside the country where the products or services are provided. We ask people who provide services to us to agree to our privacy policies if they need access to any Personal Information to carry out their services; and within the Group.

You will find our Processing practices in the Group's and our privacy statements. These statements are available on the Group's websites or on request. If you are unsure about your tax or legal position because your Personal Information is processed in countries other than where you live, you should get independent advice.

Sanctions

Sanction Clause: We can close your account should your name appear on the sanction list. For the purpose of this agreement: "**Sanction List**" shall mean the specially designated nationals and blocked persons list of the Office of Foreign Asset Control (OFAC) of the department of treasury of the United States of America and/or the United Nations Security Council list of persons or entities suspected to be involved in terrorist related activities or the funding thereof and/or any other list of Her Majesty's Treasury of the United Kingdom and/or the European Union's Common Foreign and Security Policy and/or the French Ministry of Economy, Finance and Industry (MINEFI) as may be amended from time to time. We can also close your account and terminate all contracts if we identify activities to sanctioned individuals and/or entities. You will indemnify us for any losses that may occur as a result of blocked and/or seized funds.

Consent to Market

Permission to market products and services: As part of our service we would like to give you information about products and services offered by the Group, which we believe may benefit you. The Group means Standard Bank Group Limited, its subsidiaries and their subsidiaries. Because your personal information is confidential, we need your consent to share it within the Group.

Communicate other companies' products, services and special offers to me. If I respond positively to the communication, Yes No
that company may contact me.

Contact me for research purposes. (The research companies we use follow strict codes of conduct and treat customer information confidentially). Yes No

Market your products, services and special offers to me. Yes No

Share my personal information within the Group for marketing purposes and that the Group may then market its products, services and special offers to me. Yes No

*Declaration

I/we _____ hereby declare that all the information submitted by me/us in this form is correct, true and valid, that by my/our request, to open and maintain securities account(s) in my/our name and undertake to notify SBG Securities of any changes to my/our particulars or information as may be necessary.

I/We also declare that we have read thoroughly and understood the contents of this application and have given my/our consent by virtue of my/our signature(s) on this form.

I/We consent that investment decisions are my/our prerogative without sole reliance on the investment advice received from SBG Securities. SBG Securities accepts no liability for any direct or consequential loss arising from my/our decision.

I/We also declare that all debits incurred on my/our securities account(s) by virtue of my/our trade orders shall be settled by me/us accordingly.

Name

Date (DD-MM-YYYY)

Signature

***Customer Risk Profile**

Client Verification / Screening:

Level of Risk: Low Medium High

Nature of High Risk Exposure: PEP Non-Resident

High Risk Business (Refer to guide) State nature of business:

High Risk Country State Country:

***Approvals**

Account opened by _____ Account approved/authorized by Account Management

Name of Licensed Officer _____ Name

Position _____ Position

Date (DD-MM-YYYY) _____ Date (DD-MM-YYYY)

Signature _____ Signature

*Accounts of High Risk Nature must be jointly approved by CEO / Executive / Senior Manager and Compliance Officer

High risk account authorized/approved by Executive / CEO Yes No

Comments:

***Checklist**

SN.	Documents Required	Verified
1	*Passport-sized photographs (Account holders / Beneficiaries)	_____
2	*Proof of Identity	_____
3	*Proof of Identity of Account Beneficiary	_____
4	*Proof of Address	_____
5	*Specimen Signature(s)	_____
6	*Email Indemnity (for clients with email address)	_____
7	*Proof of Foreign Address (for Non-Resident clients)	_____
8	*Resident / Work Permit (for Non-Ghanaians)	_____
9	*Executed Management Agreement (Strictly for High Net Worth Clients)	_____