

CLIENT INFORMATION FORM INDIVIDUAL

FORM NO.....

(Required as per Capital Markets Authority Act 1992. Rules parts IV Section 11(1)(1) & (b))

Title:

Full name:.....

Nationality:

Passport No:

National Identification Number (NIDA):

Date of Birth:

Occupation:

Physical address:

P.O. Box:

Region:

Mobile:

Email:

Bank Account Details:

Banker:

Branch:

A/C No:

Signature:

Date:

Your next of kin:

Full name:

Relationship:

Region:

Mobile:


Date:

For Official Use Only

Officer in charge :.....**Signature**

Verifying officer :.....**Signature**

CDS Account No :.....

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