

**CLIENT INFORMATION FORM  
COMPANY**

**FORM NO**.....

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

**Business name:** .....

**P. O. Box:** ..... **Town:** ..... **Tel.** .....

**Name of Directors**

- 1. ....
- 2. ....
- 3. ....
- 4. ....

**Signing Instructions:** .....

**Authorized Signatories:**

Name	Signature
1. ....	.....
2. ....	.....
3. ....	.....
4. ....	.....
5. ....	.....

**Bank Account Details:**

**Banker:** ..... **Branch:** ..... **A/C No:** .....


**Name of the officer completing the form:** .....

**Signature:** ..... **Date:** .....

**For Official Use Only**

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

**Verifying officer:** ..... **Signature:** ..... **Account No:** .....

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