



GLAMSHIRE  
INVESTMENTS LIMITED

## ACCOUNT OPENING FORM

Account Type

☐

Individual Single Account

☒

Individual Joint Account

Currency

☒

NGN

☐

USD

☐

OTHERS

Products/Services

☒

Private Wealth Management & Advisory

☐

Institutional Asset Management

☐

Alternative Investment(s)

☐

Other Investment(s)

**Advisor should tick appropriate or combination of products to be signed by the client**

Name and Signatories

Name (First Signatory)

Name (Second Signatory)

Signature

Signature

### Investment Objectives

- ☒ Capital preservation
- ☒ Capital Appreciation
- ☐ Steady stream of income
- ☒ Income as well as capital appreciation

### Risk Tolerance

- ☐ High
- ☒ Moderate
- ☐ Low

### Time Horizon

- ☒ Immediate Access (2 years or less)
- ☐ Short Term (2-5years)
- ☐ Long Term (5 years above)

***\*On approval of account opening with Glamshire Investments Limited, the Client will make transfer (indicated amount)***

☒ Cheque/Transfer

N500,000.00

Notes (Official use only)

## PERSONAL INFORMATION

(Please tick as appropriate & write in block letters)

Please affix passport  
photograph here with  
your name clearly  
written behind

Title  Surname

Other names

Residential address

Phone number (s):  Home

Email

Date of Birth  /  /   Nationality

State of Origin  Mother's Maiden name

Marital Status: ☒ Married ☐ Single Gender ☐ Female ☒ Male

Means of ID: ☐ Driver's License ☒ International Passport ☐ National ID ☐ Voter's Card

ID number  Issue Date  Expiry Date

## EMPLOYMENT DETAILS

☒ Employed ☐ Self Employed ☐ Others

Occupation/Business  Inception date  /  /

Employer/Business Name

Employer/ Business Address

Approx. Annual Income (Net)

Approx. Annual Income (Gross)

**SPOUSE DETAILS (IF MARRIED)**

Title	<input type="text" value="Mrs"/>	Surname	<input type="text" value="Abidoye"/>
Other names	<input type="text" value="Olawumi Abidemi"/>		
Residential Address	<input type="text" value="No.17 Aliu Animashaun Street Lekki Phase 1 Lagos Nigeria"/>		
Gender	<input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	Nationality	<input type="text" value="Nigeria"/>
		State of Origin	<input type="text" value="Osun State"/>
Phone Number(s): Mobile	<input type="text" value="08060221602"/>	Home	<input type="text" value="08091501462"/>
Email	<input type="text" value="olami_2k7@yahoo.com"/>		

**AUTHORISED SIGNATORIES FOR MANDATE PURPOSE**

*Please affix passport photograph here with your name clearly written behind*

**Account Holder (A)**

*Please affix passport photograph here with your name clearly written behind*

**Second Signatory (B)**

Name (s) (First Signatory)

Name (s) (Second Signatory)

Signature

Signature

Signing Instructions

A and B sign jointly

☐

Either to Sign

☒

(Please tick as required)

Confirmation of Signature Mandate

**BANK ACCOUNT DETAILS**

Bank	Access Bank	Account Number	0033908184
Account Name	Abidoye Ibukun	BVN	22215782144
Branch	Ile-Ife, Osun state		

**NEXT OF KIN**

Title	Mrs	Surname	Abidoye		
Relationship	Wife	Gender	Female	Date Of Birth	DD / MM / YEAR
				19	/ 05 / 1984
Phone Number	08060221602				
Contact Address	No 17, Aliu Animashaun Street, Lekki Phase 1, Lagos				
Email	olami_2k7@yahoo.com				

**Attestation**

I/We attest that all information provided herein are accurate and would notify you to update my/our records where any change occurs.

Ibukun Abidoye
Name, Signature & Date
Olawumi Abidoye
Name, Signature & Date

FOR OFFICIAL USE ONLY

	DOCUMENTS OBTAINED	IN PLACE	REFERRAL
1	Completed Account Opening Form		
2	Means Of ID		
	A. International Passport		
	B. Driver’s License		
	C. National ID		
	D. Permanent voter’s card		
3	Passport photographs		
4	Utility Bills		
5	Residence Permit (Foreigners only)		
6	Visitation Report		

Verified by

Signature and date

APPROVAL

Head of Operation Approval

Head of Internal Control

Executive Management

