

Vertex International Securities

CLIENT INFORMATION FORM INDIVIDUAL

FORM NO.....

Serial No.....

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

Surname Other names

Business name (where applicable) Reg. No.

Attach copy of certificate of Reg)

Nationality ID No. Passport No.

Name and Address of Employer

Marital status Occupation

Date of Birth Pin No.

Physical address (Building)

P.o.Box Town

Telephone: (Office) (HSE) Fax:

Your next of kin

Surname Other names

Relationship

P.O.Box Town

Telephone: (Office) (HSE) Fax:

Signature Date

For official use only

Officer in charge of Agent

Designed Supervisor

Account No: