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## **CORPORATE INVESTMENT ACCOUNT APPLICATION FORM (KYC)**

\*Company Name: -----

\*Company Type: Limited Liability { } Partnership { } Others -----

\*RC Number: ----- \*Registered Business Address -----

\*Business Operation Address: (As contained in original receipts issued within the previous 3 months by Public Utilities):  
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\*Business Activity: ----- Annual Turnover ₦ -----

\* Email Address: ----- \*Telephone Number: -----

\*Nature of Business: -----

\*Bank Account Number: ----- Bank Sort Code: -----

\*Bank Name: ----- Account Opening Date: -----

\*Bank Address: ----- \*BVN of Signatories-----

\*Investment Objective: ----- \*Source(s) of Funds: -----

\* Principal Contact Person: -----

\* Email Address: ----- \*Telephone Number: -----

\*International Passport/Driver's License/National I.D Card No: -----

\*Date Issued: -----

**(Please it is compulsory to fill the items in asterisks)**

**TO: RAINBOW SECURITIES & INVESTMENT COMPANY LIMITED**

I/we hereby request you to open an Investment Account in my name and authorize you to honour all instructions and dispositions relating to the account signed by me. Please also find enclosed herewith:

- 1. Photocopy of my International Passport/Driver's License/National I.D Card.**
- 2. Two (2) Passport Photographs each for all signatories.**
- 3. Utility bill within previous three (3) months.**

I/we agree that the set-off conditions received and signed by me, shall apply as expressly set out therein, and I hereby declare that the information given herein is correct and is the basis for the opening of the Investment Account.

I/we also agree to pay any debit balance on my account within 24 hours failing which interest shall be charged/applied on such debit balance and that such debit balance plus interest thereon shall be set off against subsequent credit to my account.

Furthermore, **RAINBOW SECURITIES & INVESTMENT COMPANY LIMITED** shall have the right to dispose of part or all of my shares to regularize any debit on my account.

Yours faithfully,

1. Name: -----	2. Name: -----
Designation: -----	Designation: -----
Tel. Number: -----	Tel. Number: -----
Specimen Signature: -----	Specimen Signature: -----
3. Name: -----	4. Name: -----
Designation: -----	Designation: -----
Tel. Number: -----	Tel. Number: -----
Specimen Signature: -----	Specimen Signature: -----

**FOR OFFICIAL USE ONLY**

Remark by Account Officer: -----

Relationship Officer's Name: ----- Signature: ----- Date: -----

Approving Officer's Name: ----- Signature: ----- Date: -----

**COMPLIANCE CHECK:**

S/N	DOCUMENTS	AVAILABLE	NOT AVAILABLE	REMARKS
<b>FOR CORPORATE</b>				
1	COMPLETED KYC FORM			
2	RECENT PASSPORT PHOTOGRAPH OF SIGNATORIES			
3	MEANS OF IDENTIFICATION OF SIGNATORIES			
4	UTILITY BILL OF SIGNATORIES			
5	CERTIFICATE OF REGISTRATION/INCORPORATION			
6	MEMO & ARTICLE OF ASSOCIATION			
7	FORM CAC 2			
8	FORM CAC 7			
9	BOARD RESOLUTION			
10	SIGNATURE MANDATE WITH DETAILED RESIDENTIAL ADDRESS OF SIGNATORIES			