



FRANCIS DRUMMOND & CO. LTD
 Stockbroker
 (Established in 1949)



CDSC A/C No.: _____

CODE No.: _____

BROKERAGE ACCOUNT APPLICATION

NOTE

- Please complete all sections of this form
 - Sign and date the completed application form
 - Attach the following to the completed application form, a certified as original copy of cert of Incorp/ Reg, National ID and PIN
- We cannot process the application without the above items

BUSINESS ACCOUNT (To be completed in **BLOCK LETTERS**)

Date: _____

A) Details of Business

Name of business _____

Nature of Business (Industry) _____

Cert. of Incorp / Reg. No. _____ Date of Incorp/ Reg. _____ Pin No. _____

Associated companies _____

B) Contact Details

Street/ Road/ Building _____

P.O. BOX _____ Code _____ Town / City _____

Email: _____ Tel No. _____ Cell No. _____

Facebook _____ Twitter _____

C) Particulars of significant stakeholders (Director/ Shareholder with at least 10% ownership) *if space here below is inadequate attach copy of the other particulars.*

Stakeholder's name	(Individuals or company)	Identification	Ownership %	Nationality

Directors: Ndung'u Gathinji (Chairman), King'ori Gathinji, Wangeci Kanjama, Peterson Wangai
 Licensed by the Capital Markets Authority. Founder Member, Nairobi Securities Exchange
 Correspondent firms: Dar es Salaam, Kampala, Johannesburg & London

D) Financial Information (Please tick Appropriately)

Value of transactions		Expected range (Kshs. equivalent)			
Sum of all payments into account per month		Up to 500,000	500,001 up to 1M	1M to 100M	Over 100M
Total value of cash/ cheque	Local currency				
Deposits	Foreign Currency				
Total value of foreign	Incoming				
Remittances	Outgoing				

DECLARATION:

We/ I hereby,

- (i). Confirm that the details/ information we/I have given here above is correct in every respect and also that we/ I have read, understood and undertake to comply, observe and be bound by the terms and conditions set out herein.
- (ii). Undertake to notify my CDA any change of particulars or information provided by me/us in this form.

Signature: _____ Signature: _____ Signature: _____ Signature: _____

Date: _____ Date: _____ Date: _____ Date: _____

OFFICIAL USE ONLY

Name of Staff / Agent _____ Agent Code: _____

Signature: _____ Date: _____

Checked by: _____ Signature: _____

Authorised by: _____ Signature: _____

CUSTOMER INFORMATION CHECKLIST

- Valid identification documents obtained and authenticated.
- Clear document copies, complete & duly certified
- Each valid nationality identification documents obtained and verified.
- Photographs obtained
- Alterations counter signed.
- Contact information available obtained.
- Sources of income/ funding obtained and verified.
- Resolutions obtained.