

**INVESTOR SERVICES ACCOUNT REGISTRATION FORM ( For Organisations ) (GSD 1d)**  
**To be completed in BLOCK LETTERS**

Client Account Code:

Name of Institution:

Address:

City  Country

Contact Person(s):

Date of Incorporation/Formation:

Company Registration No.

Tel:

Fax:

Email:

(Tick where applicable)  Local Institution  Foreign Institution

**Dividend Mandate**  **Bank**  **Post**

**If Bank, give details**

**Account Number:**

**Account Name:**

**Name of Bank:**  **Branch:**

Send statement by:  email  post  Hold

**Declaration:**

I/We hereby

- (i) request to open and maintain a security account in our name
- (ii) affirm that all information on the form are correct
- (iii) undertake to notify GSD of any change of particulars or information provided by us on this form

(name) \_\_\_\_\_ (sign) (date)  (dd / mm / yy)

(name) \_\_\_\_\_ (sign) (date)  (dd / mm / yy)

Seal/Stamp:

**For Depository Use Only**

Verified by:  (name) \_\_\_\_\_ (sign) (date)  (dd / mm / yy)

Stamp:

Securities Account No:

Supporting Documents:

- 1 Certified true copy of Certificate of Incorporation/Formation
- 2 Certified true copy of Regulation (or Constitution)
- 3 Certified true copy of Board Resolution authorising execution of Opening Form
- 4 Specimen Signatures of Authorized Signatories/passport pictures