

WTSL

WT Securities Limited
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Write name
&
sign passport
behind

CLIENTS PERSONAL INFORMATION SHEET

Name of Investor(s):
Surname First Name Middle Name

Date of Birth:

Nationality: City:

Residential Address:

Mailing Address (if different from above):

Telephone: Mobile:

Fax: E-mail:

Occupation:
(If Business or Profession, Please State Type of Business e.g. Contractor)

Date of commencement of business relationship:

Next of Kin:

Telephone Number(s):

Relationship to Applicant:

Address of Next-of-kin (if different from Applicant's):

Signature: Dated this day of

WTSL OFFICIAL CHECKS

	YES	NO	WAIVED
(a) Particulars of shareholders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Two (2) passport photographs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Customer identification i.e Drivers Licence or International Passport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Other relevant documents for identification purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>