



HARMONY SECURITIES LIMITED  
(TRADING LICENSE HOLDER)

## HARMONY SECURITIES LIMITED

(TRADING LICENSE HOLDER)

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Phone Number: 01-2918587

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Affix one  
passport  
photograph

### ACCOUNT OPENING FORM (JOINT)

Account Name

Name of Authorize Signatory 1

Mother's Maiden Name  Country of Birth

Gender F ☐ M ☐ Date of Birth  /  /  Place of Birth

Marital Status Single ☐ Married ☐ others (specify)  Religion

#### Contact Details

Mobile No. 1  Email Address

Postal Address

Residential Address

State of Origin  L.G.A

Occupation  Office Address

National (for non-Nigerian)  Resident Permit No.

Permit Issue Date  /  /  Permit Expiry Date  /  /

#### Valid means of Identification

National ID Card ☐ National Driver's License ☐ International Passport ☐ Others (please specify)

ID No.  ID Issue Date  /  /  ID Expiry Date  /  /

#### Next of Kin Information

Name

Mobile Number  Email Address

Relationship to Applicant Sibling ☐ Parent ☐ Spouse ☐ Others (specify)

Residential Address

Name of Authorize Signatory 2

Mother's Maiden Name  Country of Birth

Gender F ☐ M ☐ Date of Birth  /  /  Place of Birth

Marital Status Single ☐ Married ☐ others (specify)  Religion

#### Contact Details

Mobile No. 1  Email Address

Postal Address

Residential Address

State of Origin  L.G.A

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National (for non-Nigerian)  Resident Permit No.

Permit Issue Date  /  /  Permit Expiry Date  /  /

**Valid means of Identification**

National ID Card ☐ National Driver's License ☐ International Passport ☐ Others (please specify)   
ID No.  ID Issue Date  ID Expiry Date

**Next of Kin Information**

Name   
Mobile Number  Email Address   
Relationship to Applicant Sibling ☐ Parent ☐ Spouse ☐ Others (specify)   
Residential Address

**Bank Details**

Bank Name  Bank Acct No  BVN   
Bank Account Name   
Date of Creation of bank Account  Account Type

**DISCLAIMER**

I hereby confirm that all information given above are true and genuinely given to the best of my knowledge. Harmony Securities Limited should not be liable for any risk resulting from any form false declaration of the above supplied information.

Signature

Date **NOTE:**

Kindly bring forward both original & clear photocopy of your Valid Identity Card and Utility Bill.

**FOR OFFICIAL USE ONLY**

Application Received By  Sign  Date   
Client Introduced By   
Approving Officer  Sign  Date