CENTRAL DEPOSITORY & SETTLEMENT CORPORATION
Invested in Progress

SECURITIES ACCOUNT OPENING (CDS 1) FORM

INDIVIDUAL/JOINT ACCOUNT OPENING FORM

Account Type *(Tick appropriately)* Individual ☐ Joint Account Holders ☐ *(If more than 2 joint holders, details of the other(s) to be on another form signed by all)*

CDA CODE ☐ **CDS ACCOUNT NUMBER (NEW/EXISTING)** ☐

CLIENT DETAILS

PLEASE FILL DETAILS IN BLOCK

Gender Male ☐ Female ☐

Surname* ☐ Other Names* ☐

ID/Passport Number* ☐ Passport Expiry Date D D M M Y Y Y Y

ID Type* *(Tick as applicable)* National ID ☐ East African ID ☐ Passport ☐ Alien ID ☐

Investor Category**(Tick as applicable)* Local Investor (LI) ☐ Foreign Investor (FI) ☐ East African Investor (EI) ☐

Date of Birth* D D M M Y Y Y Y Nationality/Citizenship* ☐

KRA PIN* ☐ Country of Residence* ☐

Postal Address ☐ Postal Code ☐ City/Town ☐

Telephone Number* ☐ Country Code ☐

Email Address* ☐ Physical Location (Town/City) ☐

Source of Investment Funds* ☐

(if employment, provide name of employer)

Name of Employer ☐ Employer Postal Address ☐

Employer Telephone Number ☐ Employer Email Address ☐

(If business, provide name of business) ☐

Registration/Incorporation Certificate Number ☐

Postal Address ☐ Telephone Number ☐

Email Address ☐ Registered Office ☐

CLIENT DETAILS (APPLICABLE TO JOINT ACCOUNTS)

PLEASE FILL DETAILS IN BLOCK

Gender Male ☐ Female ☐

Surname* ☐ Other Names* ☐

ID/Passport Number* ☐ Passport Expiry Date D D M M Y Y Y Y

ID Type* *(Tick as applicable)* National ID ☐ East African ID ☐ Passport ☐ Alien ID ☐

Investor Category**(Tick as applicable)* Local Investor (LI) ☐ Foreign Investor (FI) ☐ East African Investor (EI) ☐

Date of Birth* D D M M Y Y Y Y Nationality/Citizenship* ☐

KRA PIN* ☐ Country of Residence* ☐

Postal Address ☐ Postal Code ☐ City/Town ☐

Telephone Number* ☐ Country Code ☐

Email Address* ☐ Physical Location (Town/City) ☐

Source of Investment Funds* ☐

(if employment, provide name of employer)

Name of Employer ☐ Employer Postal Address ☐

Employer Telephone Number ☐ Employer Email Address ☐

(If business, provide name of business) ☐

Registration/Incorporation Certificate Number ☐

Postal Address ☐ Telephone Number ☐

Email Address ☐ Registered Office ☐

TAX STATUS

Tax Exempt* Yes ☐ No ☐ *(If Yes, please attach a copy of your tax exemption certificate)*

PAYMENT DETAILS (DIVIDEND DISPOSAL AND PROCEEDS OF SALE)

(Tick where applicable) Domestic Bank ☐ International Bank ☐ Mobile Money Payment ☐

BANK DETAILS

Account Name

Account Number | Bank Name

Branch Code (Domestic Banks) | Bank Swift Code (International Banks)

Currency (International Banks) EURO ☐ USD ☐ GBP ☐ KES ☐ USH ☐ TZSH ☐ RFRANC ☐

Indicate any other currency

MOBILE MONEY PAYMENT DETAILS (Applicable only to Local Investors)

Phone Number

SIGNING MANDATE

Single ☐ Either to sign ☐ All of us jointly ☐ Any two to sign ☐

Name | Signature INSERT SIGNATURE

Name | Signature INSERT SIGNATURE

ARE YOU OR ANY OTHER PERSON CONNECTED WITH THE APPLICATION CLASSIFIED AS A POLITICALLY EXPOSED PERSON (P.E.P) OR CONNECTED TO A P.E.P?

YES ☐ NO ☐

If yes, specify the name of the person and the relationship.

CLIENT DECLARATION

1. *I/We certify that the information I/we have provided on this form and the documents I/we have attached are true, accurate and complete.*
2. *I/We declare that I am/we are the owner(s) of this CDS account.*
3. *I/We understand that any false or misleading information limits your ability to promote my/our right to privacy and when intentional, is a punishable criminal offence under the Laws of Kenya.*
4. *I/We certify that I/we have carefully read the Terms & Conditions and Privacy Notice provided in the CDSC website and I/we understand why you collect my/our personal information and how you safeguard my/our privacy.*
5. *I/We authorize CDSC to use the information collected in this form to open and maintain our securities account and for other related purposes.*
6. *I/We will notify CDSC or my/our CDA of any change of my/our information presented in this form and the documents I/we have attached.*
7. *I/We confirm that the funds used in the investment in securities are not arising out of proceeds of crime, money laundering and/or any illegal activities.*
8. *I/We indemnify CDSC against any claims arising out of the provision of any false or misleading information or for any costs or loss arising out of my/our conduct of the account.*

CLIENT DECLARATION (continued)

Name	*Signature*	*Date*
	INSERT SIGNATURE	D D M M Y Y Y Y
Name	*Signature*	*Date*
	INSERT SIGNATURE	D D M M Y Y Y Y

CDA SECTION

CDA DECLARATION

I hereby certify that I have verified the above information and that:

1. This form has been signed in my presence
2. To the best of my knowledge and belief, the name of the securities account holder as provided in the account opening form and the accompanying supporting documents refers to one and the same person/entity.
3. The person signing the account opening form has the proper authority to do so and I have examined the necessary documentary evidence.
4. We indemnify CDSC against any claims arising out of the failure to verify any information provided by the account holder.

Witnessed and verified by

Designation	Signature	Date
	INSERT SIGNATURE	D D M M Y Y Y Y

Authorized by

Designation	Signature	Date
	INSERT SIGNATURE	D D M M Y Y Y Y

CDA Stamp

Attachment checklist (certified copies):

- ☐ Certified copy of ID/Passport
- ☐ 1 recently taken passport photo
- ☐ Certified copy of KRA PIN certificate
- ☐ Certified copy of Tax exemption certificate (where applicable)