



GTI DISCRETIONARY INVESTMENT PLAN

SURNAME: (MR, MRS, ALH, PASTOR, CHIEF, DR.):-----FIRST NAME: -----
OTHER NAMES: ----- OCCUPATION: -----
DATE OF BIRTH: -----STATE OF ORIGIN/LOCAL GOVT: -----
NATIONALITY----- POSTAL ADDRESS: -----
RESIDENTIAL ADDRESS: -----
PHONE NUMBERS: ----- HOME: -----
E-MAIL ADDRESS: -----
OFFICE/BUSINESS NAME: -----
OFFICE/BUSINESS ADDRESS: -----
MOTHER'S MAIDEN NAME: -----
NAME OF SPOUSE (IF MARRIED): -----
ADDRESS OF SPOUSE: -----
NAME OF BANK: -----BANK A/C NO.: -----
BANK SORT CODE: ----- DATE OF CREATION OF BANK A/C:-----
BVN No: ----- NEXT OF KIN: -----
TIN:-----PAYER ID-----
ADDRESS OF NEXT OF KIN: -----
RELATIONSHIP WITH NEXT OF KIN: -----TEL. No. NEXT OF KIN-----
CLIENT'S SIGNATURE: -----DATE-----

FOR OFFICIAL USE ONLY

RECEIVED BY:-----
NAME/SIGNATURE/DATE
ACCOUNT OFFICER :-----
NAME/SIGNATURE/DATE
HEAD OF OPERATION :-----
NAME/SIGNATURE/DATE
INTERNAL CONT./COMPLIANCE :-----
NAME/SIGNATURE/DATE

Documents enclosed (Tick as appropriate)

1. Two Current Passport Photographs
2. Current/Valid I.D: D/Licence, Int'l Passport or National I.D. Card
3. Proof of Address (e.g. copy of recent Utility Bill, PHCN or water bill)

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