

ACCOUNT INFORMATION UPDATE FORM (Business/Clubs/Associations)

Particulars of Account Holder

ފަންޓިއާނުގެ ބަނޑުލަފްސާނާގެ ފަސާހުތާތު

Company Name:

Registered Address:

Business Addresses:

Company Registry No. Date of Incorporation

Contact Numbers:

E-mail

Bank Account No.: Bank Name:

Bank Account Name:

Particulars of Dealing Company

ފަންޓިއާނުގެ ބަނޑުލަފްސާނާގެ ބަނޑުލަފްސާނާ

Broker License No:

Authorised Signature & Stamp of Dealing Company

Documents Required with the form:

- National Identity Card copies of authorized persons.
- Boad resolution if authorized signatories is changed.

We hereby request you to update the securities account information based on the details given in this form.

Particulars of Authorized Persons

ފަންޓިއާނުގެ ބަނޑުލަފްސާނާގެ ބަނޑުލަފްސާނާގެ ބަނޑުލަފްސާނާ

1. Full Name: Specimen Signature Specimen Signature

Designation:

Date:

2. Full Name: Specimen Signature Specimen Signature

Designation:

Date:

Organisation Seal

FOR MSD USE ONLY

Received by: Date, Name, Signature and Stamp

Info. Updated by: Date, Name & Signature

Client's MSD account number:

Remarks:

called/ emailed / collected