



**Pety Trade**  
Limited

3<sup>RD</sup> FLOOR, UAC HOUSE, 1-5 ODUNLAMI STREET, MARINA, CMS.

**SECTION A KYC FORM**

Company Details:	
Full Name:	
RC Number	Telephone No(s):
Business Sector	Tax Identification Number (TIN):
Specific Type: Partnership <input type="checkbox"/> Enterprise <input type="checkbox"/> Limited Liability Co mpany <input type="checkbox"/> Others <input type="checkbox"/>	
Registered Business Address:	
Principal Business Address (if different from above)	
Country of residence:	Corporate Email Address
Bank Name:	Branch
Account Name	Account Number

**SECTION B: Principal Contact**

Name	
Residential Address:	
Phone Number	E-mail Address
Signature & Date	
<b>Details Of Board Of Director(s) (where a form C07/CAC7 has been submitted, please proceed to the next question)</b>	
Name	
Residential Address	
Phone Number	E-mail Address

Means of Identification: <input type="checkbox"/> International Passport <input type="checkbox"/> Driver's License <input type="checkbox"/> National ID Card <input type="checkbox"/> INEC Voters Card <input type="checkbox"/> Others (please specify)		
ID Number	Issue Date	
Expiry Date	Place of Issue	Affix Passport
Occupation	Citizenship	
Shareholding		

Name		
Residential Address		
Phone Number	E-mail Address	
Means of Identification: ID Type <input type="checkbox"/> International Passport <input type="checkbox"/> Driver's License <input type="checkbox"/> National ID Card <input type="checkbox"/> INEC Voters Card <input type="checkbox"/> Others (please specify)		
Issue Date		Affix Passport
ID Number	Place of Issue	
Expiry Date		
Occupation	Citizenship	
Shareholding		
Specimen Signature & Date		



**SECTION C: Guarantor's Details (Must not be an official or director of the company)**

First Name			Middle Name			Surname:		
Residential Address								
Phone Number			E-mail Address			Date Of Birth		
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			State of Origin					
ID Type <input type="checkbox"/> International Passport			Driver's License <input type="checkbox"/> National ID Card			INEC Voters Card <input type="checkbox"/> Others (please specify)		
ID Number			Issue Date //			Affix Passport		
Expiry Date //			Place of Issue					
Specimen Signature & Date			/					

**SECTION D: Statutory Documents**

Please tick the submitted copy documents below and attach the documents to the form.

- Certificate of Incorporation or Registration and Status Report (Provide accompanying documents)
- Articles of Association/Memorandum of Association
- Proof of Address (Dated within the last 3 months eg. Utility Bill, Electricity Bill, Rental agreement, etc)
- Anti-Money Laundering (AML) / Know Your Customer (KYC) policies
- Ownership structure Scheme/ Organizational Chart
- Company Bank Statement
- Certified document signed by a company director / authorized signatory listing all company shareholders

**Declaration**

We confirm that all the information is true and correct. We also confirm that we will inform you if any changes to the above occur in future.

\_\_\_\_\_  
**Name, Signature and Date**



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