## ONBOARDING FORM - CORPORATE

**COMPANY DETAILS** 



This form should be completed in CAPITAL LETTERS using BLACK INK. Character and style should be similar in style to the following ABC

Company/Business Name:																						
Company Address:																						
City:										Sta	ate:											
LGA:										Cour	ntry:											
Company RC Number:								Count	ry of Reg													
Date of Registration:	D	D M	M	Υ	YY	Υ	Tax	x Ider	tification	Num	ber:											
Sector/ Industry:										E-ma	ail:											
Company Phone Number:									M	obile	Num	ber:										
Company Website:																						
Company Social Media Handle:																						
Ownership Type:																						
Annual Turnover:																						
DIRECTOR'S INFORMATION																						
Title:		Surr	ame:																			
Middle name:						Fir	st Na	me:											٨٤	Paca	nt	
																			АПХ	RHCH		
Marital Status: Single	Marri	ed		Divor	ced	_													Affix Pas			
Marital Status: Single	Marri			Divor	ced	W	idow	ed	D D	M	M	Υ	Υ	Υ	Y					spor		
Marital Status: Single  Gender: Male		ed		Divor	ced	_	idow	ed	D D	M	M	Y	Y	Y	Y							
				Divor	ced	W	idow	ed	D D	M	M	Y	Y	Y	Y							
Gender: Male				Divor	ced	W	idow	ed	D D	M	M	Y	Y	Y	Y							
Gender: Male				Divor	ced	W	idow	ed	D D  State:	M	M	Y	Y	Y	Y							
Gender: Male  Residential Address:				Divor	ced	W	idow	ed			M		Y	Y	Y							
Gender: Male  Residential Address:  City:				Divor	ced	W	idow	ed	State:	try:			Y		Y							
Gender: Male  Residential Address:  City:  LGA:					ced	Date	idow	ed rth:	State: Coun	try:			Stayi	Y  ng wi		mily	Othe	Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:						Date	idow of Bi	ed rth:	State: Coun	try: Addre	ess:	Y				mily	Othe	Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:  Years at present residence:						Date	idow of Bi	ed rth:	State: Coun	try: Addre	ess:	J				mily	Othe	Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:  Years at present residence:  Work Phone Number:						Date	idow of Bi	ed rth:	State: Coun	try: Addre	ess:	Numb	er:			mily	Othe	Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:  Years at present residence:  Work Phone Number:  E-mail Address:						Date	idow of Bi	ed rth:	State: Coundary Mailing Ow	try: Addre	ess:	Numb	er:			mily	Othe	Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:  Years at present residence:  Work Phone Number:  E-mail Address:  Position Held:				Resid	ence Ty	Date	idow of Bi	ed rth:	State: Coundary Mailing Ow	try: Addre	ess:	Numb	er:		th Fai	mily lid Vo		Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:  Years at present residence:  Work Phone Number:  E-mail Address:  Position Held:  Means of Identification		Female		Resid	ence Ty	Date	idow of Bi	ed rth:	State: Coundary Mailing Own	try: Addre	ess:	Numb	er:		th Fai			Ph				
Gender: Male  Residential Address:  City:  LGA:  Landmark:  Years at present residence:  Work Phone Number:  E-mail Address:  Position Held:  Means of Identification  National ID		Female	ationa	Resid	ence Ty	Date	idow of Bi	ed rth:	State: Coundary Mailing Own	try: Addre	ess: Pero	Numb	er:		th Fai			Ph				



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Politically exposed persons (PEI	Ps) status Yes No	
Public position held		
SHAREHOLDER / DIRECTO	RDETAILS	
Title:		1
Surname:	Middle name:	
First Name:	Marital Status: Single Married Divorced	Widowed
Gender: Male	Female Date of Birth:	M Y Y Y
Residential Address:		
City:	State:	
LGA:	Country:	
Landmark:	Mailing Address:  Mailing Address:	
Years at present residence:	Residence Type: Rented Owned Staying with Family Ot	thers
Work Phone Number:	Mobile Number:	
E-mail Address:		
Position Held:	Shareholding Percentage:	
Means of Identification	Internal Decement Valid Driverlal icones Valid Vateria Cond	
National ID	International Passport Valid Driver's License Valid Voter's Card	
Identification Number:		
Date of Issue:	D D M M Y Y Y Date of Expiry:  D D M M Y Y  O D D M M Y Y  O D D M M M Y  O D D M M M Y  O D D M M M Y  O D D M M M Y  O D D M M M Y  O D D M M M Y  O D D M M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M Y  O D D M M M M M Y  O D D M M M M Y  O D D M M M M M Y  O D D M M M M M Y  O D D M M M M M M M M M M M M M M M M M	YY
Bank Verification Number:	LinkedIn Handle:	
Politically exposed persons (PEI	Ps) status Yes No	
Public position held		
SHAREHOLDER / DIRECTO	R DETAILS	
Title:		2
Surname:	Middle name:	
First Name:	Marital Status: Single Married Divorced	Widowed
Gender: Male	Female Date of Birth:	M Y Y Y
Residential Address:		
City:	State:	
LGA:	Country:	
L		
Landmark:	Mailing Address:	

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Work Phone Number:	Mobile Number:						
E-mail Address:							
Position Held:	Shareholding Percentage:						
Means of Identification							
National ID	International Passport Valid Driver's License Valid Voter's Card						
Identification Number:							
Date of Issue:	D D M M Y Y Y Y  Date of Expiry:  D D M M Y Y Y Y						
Bank Verification Number:	LinkedIn Handle:						
Politically exposed persons (P	PEPs) status Yes No						
Public position held							
SHAREHOLDER / DIRECT	OR DETAILS						
Title:	3						
Surname:	Middle name:						
First Name:	Marital Status: Single Married Divorced Widowed						
Gender: Male	Female  Date of Birth:  D D M M Y Y Y Y						
Residential Address:							
City:	State:						
LGA:	Country:						
Landmark:	Mailing Address:						
Years at present residence:	Residence Type: Rented Owned Staying with Family Others						
Work Phone Number:	Mobile Number:						
E-mail Address:							
Position Held:	Shareholding Percentage:						
Means of Identification							
National ID	International Passport Valid Driver's License Valid Voter's Card						
Identification Number:							
Date of Issue:	D D M M Y Y Y Y  Date of Expiry:  D D M M Y Y Y Y						
Bank Verification Number:	LinkedIn Handle:						
Politically exposed persons (PEPs) status  Yes  No							
Public position held							
BANK DETAILS							
For Payment of Proceeds fron	n Investment						
Account Name							
Bank Name	Account Number						

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Investment Amount				Tenor		
Investment Frequency:	Monthly	Quarterly Bi-an	nual		Others	
TERMS & CONDITIONS						
1. Bank Verification Number (BVN	N) Operations and Watch-Lie	st for the Nigerian Banking I	ndustry an Banking In	ndustry and the Cent	ral Bank of Nigeria (CF	RN) if a fraudulent activity is
associated with the operation of	•	ot for the Migerian Banking i	ridustry ari bariking in	idustry and the Cent	rai barik or Migeria (CL	on, if a fraudulette activity is
2. Data Protection						
3. You consent to us collecting y	your Personal Information fro	m you and where lawful an	d reasonable, from pu	ublic sources for cred	lit, fraud and compliar	nce purposes, as well as th
purposes set out below.						
4. If you give us Personal Information beneficiaries), you confirm that cross-border transfer of Personal Information in the cross-border transfer of Personal Information Inform	at you are authorised to: (a) give	ve us the Personal Information	on; (b) consent on the	ir behalf to the Proces	ssing of their Personal	Information, specifically an
<ol><li>You consent to us Processing y apply;</li></ol>		•		·	<b>5</b> 1	
6. You consent to us applying resconsent to us reporting to Nige	-				•	
potential markets and trends, e		•		•	•	ind other analyses to identif
7. In countries outside the countries services are provided. Where w	try where the products or se	vices are provided. These of	countries may not have			untry where the products o
8. By sharing your Personal Information services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services to us to agree to our property of the services of the service	mation with our third-party se	ervice providers, locally and	outside the country w	•	services are provided.	. We ask people who provid
9. You will find our Processing prac	3 .	3			sites or on request.	
.0. If you are unsure about your tax	x or legal position because yo	ur Personal Information is pr	ocessed in countries o	other than where you l	ive, you should get inde	ependent advice.
.1. Marketing and Promotion		_				
Provided you have agreed to the	above Data Protection Claus	e, we may use your personal	or other information t	to snare information v	with you on new produc	cts and services that may f

12. Email or other Electronic communication indemnity

13. I/We hereby consent to the use of electronic communication (which includes communication b email or telephone or facsimile). By this consent, I/We unequivocally agree that instructions transmitted by electronic communication be binding for all purposes, including for purposes of evidence. I/We irrevocably undertakes and warrants that I/we shall not make any demand or claim, or institute any action against The Sciart Finance Company Limited should I/We suffer any loss or liability as a result of our consent to the use of electronic communication. I/ We agree to indemnify and hold The Sciart Finance Company Limited harmless against all claims, demands, actions and proceedings which may be made or instituted against The Sciart Finance Company Limited; and all liabilities, losses, damages which may be suffered by The Sciart Finance Company Limited in connection with, or arising as a result of your consent to electronic communication or The Sciart Finance Company Limited 's reliance on electronic communication issued from my/our email account or other electronic communication account indicated herein or subsequently communicated to The Sciart Finance Company Limited by the Client or or any other person I/We authorise.

of interest to you and from time to time will mail, email or SMS information to you about us, our products and services, or our partners and their products and services. If you do not wish

- 14. I/We acknowledges that there are certain risks associated with conveying instructions via electronic means, including, but not limited to the risk of delay, non-receipt (due to technical malfunction, disruption, connectivity issues, etc. of your system or The Sciart Finance Company Limited 's system or any other reason), third party interception/interference, data corruption, etc., and hereby fully waives, discharges and indemnifies The Sciart Finance Company Limited in respect of any loss or damages resulting from an of the risks identified above/ from the use of electronic communication with respect to my/our accounts
- 15. Regulatory disclosure
- 16. The Sciart Finance Company Limited is subject to the provisions of the Money Laundering (Prohibition) Act 2011, the Economic and Financial Crimes Commission (Establishment) Act 2002, the National Drug Law Enforcement Agency Act of 1995, the Consolidated SEC rules and regulations and other legislation which may be implemented from time to to combat money laundering and other financial crimes. The Sciart Finance Company Limited is required to comply with the provisions of these legislation and all similar legislation, especially those relating to disclosure and suspicious activity reporting.
- 17. Third-party payment
- 18. I/We agree that payment of proceeds of investments shall only be made to the our account. No third party payments shall be instructed as The Sciart Finance Company is not obligated to honour such requests.

## **Declarations**

- I/We here hereby declare that the I/we am/are the sole beneficial owners) of the funds to be deposited with The Sciart Finance Company Limited
- Hereby acknowledge that the funds and source of funds are legitimate and not directly or indirectly the proceeds of any unlawful activity

to continue receiving this information, you may contact us and request that we delete you information from our mailing list.

• I declare that all information and documentation provided are valid and authentic and The Sciart Finance Company is authorised to verify any or all of the information provided.

Authorized Signatory	Authorized Signatory			
Sign/Date	Sign/Date			

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