

FUND TYPE

Fidelity Money Market Trust

CATEGORY OF BUSINESS

Sole Proprietorship

Partnership

Limited Liability Company

Associations

Charities / NGOs

Other

If Other, Please Specify

COMPANY DETAILS

Company / Business Name:

Certificate of Incorporation Number:

Certificate to Commence Business Number:

Date of Incorporation / Registration:

D

D

M

M

Y

Y

Y

Y

Jurisdiction of Incorporation / Registration:

Parent Company's Country of Incorporation (if any):

Type / Nature of Business:

Sector / Industry:

Principal Place of Business:

Company Postal Address:

Digital Address (GhanaPost GPS):

Email Address:

Website Address (if any):

TIN:

Contact Number 1:

0

Contact Number 2:

0

MONTHLY TURNOVER

GHS 0 - 9,999

GHS 10,000 - 49,999

GHS 50,000 - 99,999

GHS 100,000 and above

ACCOUNT SERVICES REQUIRED

Statement Preference:Email☐Collection☐

Statement Frequency:Quarterly☐Bi-Annual☐Annual☐

EXPECTED ACCOUNT ACTIVITY

Source of Funds:Proceeds from business☐Other☐

If Other, please specify:

Initial Investment Amount:

Anticipated Account Activity:

Topups:Monthly☐Quarterly☐Bi-Annually☐Annually☐

Withdrawals:Quarterly☐Bi-Annually☐Annually☐

Anticipated Investment Amount:

Regular Topup Amount (Expected):Regular Withdrawal Amount (Expected):

KEY CONTACT PERSON

Surname:

First Name:

Other Name(s):

Date of Birth:

D

D

M

M

Y

Y

Y

Y

Gender:Male☐Female☐

Residential Status:

Resident Ghanaian☐Non-Resident Ghanaian☐Resident Foreigner☐Non-Resident Foreigner☐

If country of origin is not Ghana, please provide the following:

Resident Permit Number

Permit Issue Date

Place of Issue

Permit Expiry Date

ID Type:

Passport☐

Voters ID☐

Drivers License☐

SSNIT Card☐

National ID☐

Job Title:

Email Address:

Contact Number 1:

0

Contact Number 2:

0

ACCOUNT SIGNATORY DETAILS 1

Surname:

First Name:

Other Name(s):

Date of Birth:

D

D

M

M

Y

Y

Y

Y

Gender:

Male

Female

Residential Status:

Resident Ghanaian

Non-Resident Ghanaian

Resident Foreigner

Non-Resident Foreigner

If country of origin is not Ghana, please provide the following:

Resident Permit Number

Permit Issue Date

Place of Issue

Permit Expiry Date

ID Type:

Passport

Voters ID

Drivers License

SSNIT Card

National ID

Job Title:

Email Address:

Contact Number 1:

0

Contact Number 2:

0

ACCOUNT SIGNATORY DETAILS 2

Surname:

First Name:

Other Name(s):

Date of Birth:

D

D

M

M

Y

Y

Y

Y

Gender:

Male

Female

Residential Status:

Resident Ghanaian

Non-Resident Ghanaian

Resident Foreigner

Non-Resident Foreigner

If country of origin is not Ghana, please provide the following:

Resident Permit Number

Permit Issue Date

Place of Issue

Permit Expiry Date

ID Type:

Passport

Voters ID

Drivers License

SSNIT Card

National ID

Job Title:

Email Address:

Contact Number 1:

0

Contact Number 2:

0

ACCOUNT SIGNATORY DETAILS 3

Surname:

First Name:

Other Name(s):

Date of Birth:

D

D

M

M

Y

Y

Y

Y

Gender:

Male

Female

Residential Status:

Resident Ghanaian

Non-Resident Ghanaian

Resident Foreigner

Non-Resident Foreigner

If country of origin is not Ghana, please provide the following:

Resident Permit Number

Permit Issue Date

Place of Issue

Permit Expiry Date

ID Type:

Passport

Voters ID

Drivers License

SSNIT Card

National ID

Job Title:

Email Address:

Contact Number 1:

0

Contact Number 2:

0

DIRECTORS / EXECUTIVE / TRUSTEE / PROMOTER / ADMIN

Name	ID Type / ID Number	Status	Contact Number

ACCOUNT OPENING FORM - CORPORATE

BANK ACCOUNT DETAILS

Bank Name	Account Name	Account Number	Bank Branch

EMAIL / FAX INDEMNITY

I hereby declare that transactions on my account would ordinarily be authorized by me in person or in writing with my original signature and ID. I however reserve the right to issue instructions for transactions on my account by fax, email or telephone call at the discretion of Fidelity Securities. I further wish to state that I am aware that fax, email and telephone authorizations are insecure and can be tampered with. By signing this form, I agree to indemnify or absolve Fidelity Securities Limited and all the companies in the Fidelity Group from any losses and all other liabilities that may result from electronic authorisations.

Signature:		Signature:	
Date:	D D M M Y Y Y Y	Date:	D D M M Y Y Y Y

ACCOUNT MANDATE

Name of Signatory	Signature Specimen
One to sign ☐	Both to sign ☐

TERMS AND CONDITIONS

Fidelity Money Market Trust is a low-risk unit trust that serves as an investment alternative to a savings account to help you meet your short-term financial needs. Returns are not guaranteed as returns can be in form of gains or losses. Clients receive proceeds of their disinvestments within five (4) working days

DECLARATION

I/We hereby declare that all information given in respect of this account opening is correct and the funds deposited with Fidelity Securities Limited are from a legitimate source and not from an activity prohibited by law. I further undertake to indemnify Fidelity Securities Limited for any loss suffered as a result of any false information or error in the information provided.

Name:		Name:	
Signature:		Signature:	
Date:	D D M M Y Y Y Y	Date:	D D M M Y Y Y Y

OFFICIAL USE ONLY

Referral Code

CUSTOMER RISK PROFILE

Client Screening:

Indicate platform or media through which client ID and Name was screened

Level of Risk:

Low

☐

Medium

☐

High

☐

Nature of High Risk Exposure:

Indicate category of high risk

APPROVALS

**Accounts of High Risk Nature must be jointly approved by Executive / CEO and Compliance Officer*

EXECUTIVE / CEO

Name:

Signature:

Date:

Comments:

COMPLIANCE OFFICER

Name:

Signature:

Date:

Comments:

CHECKLIST

SN.	Documents Required	Checked
1	Account opening form duly completed	☐
2	Specimen signature card duly completed	☐
3	Copy of Certificate of Incorporation and Certificate to Commence Business	☐
4	Board resolution to open account and nomination of signatories	☐
5	Copy of Memorandum and Articles of Association (Forms A, 3, 17)	☐
6	TIN Number	☐
7	Partnership Deed (where applicable)	☐
8	Constitution if unregistered association	☐

CHECKLIST

SN.	Documents Required	Checked
9	Act / Gazette for Government Agency (where applicable)	☐
10	One passport-sized photograph of each signatory	☐
11	Resident / Work Permit (<i>for Non-Ghanaians</i>)	☐
12	Evidence of registration with other Government Agencies	☐
13	Power of Attorney (where applicable)	☐
14	Letter of Indemnity	☐
15	Proof of Company Address	☐
16	Proof of Identity of all signatories and representatives	☐