DLM FIXED INCOME ACCOUNT OPENING FORM

PLEASE FILL ALL FIELDS



PRODUCT INFORMATION						
DLM FIXED INCOME FUND	EXISTING CLIENT YES NO					
AMOUNT (\(\frac{1}{4}\) (that you want to invest)in word					
CUSTOMER INFORMATION						
FULL NAME						
Title	Surname					
First Name	Other Names					
JOINT APPLICANTS						
Surname	Other Names					
IF ADDUCANT IS A MINOR DUCASE WRITE NAME OF SPONSOR RELOW						
IF APPLICANT IS A MINOR, PLEASE WRITE NAME OF SPONSOR BELOW						
Title	Surname					
First Name	Other Names					
RESIDENTIAL ADDRESS:	ALADDRESS:					
State	Country					
Mobile Number	Email Address					
Date of Birth	Occupation					
Mother's Maiden Name	Type of IDID Number					
Next of Kin						
Next of Kin's Address						
Next of Kin's Phone No	Email Address					
Preferred mode of communication Email Telephone Letter Visit						
BANK ACCOUNT INFORMATION						
Account Name	_Account Number					
Bank Name	BVN Number					
NATIONALITY Nigerian If not Nigerian, please state Nationality						
Do you hold a senior public office (in or outside Nigeria), or have a close business or personal connection to such a person? A person who holds a senior public office includes persons who hold, or have held, political offices such as senior government officials, members of the judiciary, senior						

executives of government-owned companies, members of royal families, etc. If yes, please state the source of the assets or funds to be invested.

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	DECLARATION BY APPLICANTS						
	I am at least 18 years old.						
	I have attached a cheque, bank draft, or evidence of fund transfer payment made out to DLM Asset Management in the name of my DLM Fixed Income Fund.						
	I/We understand that as with all stock market investment, the prices of Mutual Funds (DLM Fixed Income Fund) invested in quoted securities may go down or up. I understand that past performance is not an indication of future performance.						
	I agree to comply with the minimum investment period specified for any of the Mutual Funds, failing which I accept any losses, charges or costs that may arise at the point of redemption of my investment.						
	I agree that my e-statement can be sent at my risk to the correspondence address/email address I have provided.						
	I declare that the above information is true						
	INDEMNITY FOR REDEMPTION REQUESTS/INSTRUCTIONS SENT BY DLM FIXED INCOME FUND CLIENTS THROUGH ELECTRONIC MAIL						
	I hereby authorize the Fund Manager to honor redemption requests and instructions sent by electronic mail in respect of my investment holdings in the Fund and in this regard confirm the email address captured as designated one for this purpose.						
	In consideration of the Fund Manager honoring my requests and instructions sent by electronic mail, I hereby undertake to indemnify the Fund Manager against any loss, liabilities, damages, claims, proceedings, cost or expenses of whatever nature that may be incurred by the Fund Manager as a result of any issue arising from the honoring of my redemption requests and instructions sent by electronic mail from my designated email address stated above.						
UNIT HOLDER'S SIGNATURE		DATE	UNIT HOLDER'S SIGNATURE				
I	PPLICATION CHECKLIST	_					
	Completed Application Form Means of Identification (Driver's License, Int'l Passport or Nationa			nancy Agreement, etc.)			
I —	✓ Means of Identification (Driver's License, Int'l Passport or National ID card) ✓ Recent Passport Photograph ✓ Birth Certificate (if applicant is a minor) ✓ Evidence of Initial Deposit/Transfer (copy)						
NC	NOTE:						
Kindly be advised that SEC regulations require that we return remitted funds back to the originating account if account opening documentation is not completed within			FOR FUND MANAGERS ONLY				
			Offer Price	Units Allocated			
two weeks of receipt of funds by DLM Asset Management.							