

Employment: Annual Income: Less than N3m

Business

## **CEDRUS TUTELAGE TRUST FORM**



SETTLOR (1) DETAILS						
Title: Name:						
	(Surname)		(Firstname)			(Othernames)
Marital status:		Maiden Name	If applicable	)		
Mother's Maiden Name:		Gender:			Date of	Birth:
Country of Birth:	Religion:			National	lity:	
State of Origin/LGA:	Phone	Number:		Co	untry of F	Residence:
E-mail Address:						
Contact Address:						
Nearest Landmark:						
Means of Identification: (specify):			Place of	Issue:		
ID Number:	Issue Dat	:e:		Expiry D	ate:	
Employment Status: Full time Part tim	e 🔲	Self-employed		Retired		Others:
Employer/Business Name:						
Employer/Business Address						
Linployer/business Address	••••••	••••••	••••••	•••••	••••••	
SETTLOR (2) DETAILS - Spouse		Joint Applicant				
Title: Name:						
	(Surname)		(Firstname)			(Othernames)
Marital status:				)		
Mother's Maiden Name:		Gender:				Birth:
Country of Birth:						
State of Origin/LGA:						
E-mail Address:						
Contact Address:						
Nearest Landmark:						
Means of Identification: (specify):			Place of	Issue:		
ID Number:	Issue Dat	:e:		Expiry D	ate:	
Employment Status: Full time Part tim	e	Self-employed		Retired		Others:
Employer/Business Name:						
Employer/Business Address						
SOURCES OF INCOME						

N3m - N10m N10m - N50m

Other: .....

N50m & above

## **TRUST BENEFICIARIES**

form received by CTL.

Name	Date of Birth	Gender	Duration of Trust	Relationship	%	
						_
						_
FUNDING FREQUENCY						
Lump sum Mon	thly Qua	rterly Semi Ar	inually	Annually O	thers:	
Amount:Am	ount in Words:					
Duration:						
Funding Mode (Tick as A	ppropriate)					
Bank Transfer	Cheques Cash	n	Others:			
BANK ACCOUNT DETAILS	S					
Bank Name:		. Account	: Name:			
Account No:		BVN:				
ADDITIONAL INFORMAT	ION					
1.Are you currently a pol 2.Have you ever been a p 3.Name:	politally exposed pe	erson (PEP)? ` Positio	n Held			
I/We hereby undertake and information. I/We also agre this declaration shall be the in accordance with the pro above in the event of any broad the state of the event of the e	e to give notice to CE basis under which CE vision of the trust dea	DRUS TRUSTEE EDRUS TRUSTEE ed. Inconclusio	S LIMITED in the event of S LIMITED shall provide in I/We, agree that I/We	any change in the in me/us with the servic shall cease to enjoy t	formation given. I/We te(s) offered by comple	further agree that ting this form and
Authorized Signatory (Settlor 1)/Date  Authorized Signatory (Settlor 2)/Date						
EMAIL INDEMNITY						
I/We						
upon my/our all comr respect of any instruct in accordance with the	nunication includ ion which CTL wo	ing but not uld normally	limited to electronic accept if the Instru	mail and other	electronic devices	instructions in
By signing this indemn	ity, I/we acknowl	edge and ag	ree as follows:			
a. All email instructions emanating from my/our designated email shall be treated as having been given by me/us in the						

b. CTL shall not be liable for any loss (consequential or otherwise) incurred by the Settlor(s) because of CTL acting or declining to act (wholly or in part) on instructions which CTL believes to have been given in conformity with the above, whether or not such instructions have been so given. The fact that any instruction may later be shown to be in any way false, incomplete, inaccurate, delayed, erroneous, unauthorized, or otherwise not authentic, should not be an impediment to the rights of CTL hereunder.

- c. CTL cannot verify the authenticity of all email messages that claim to originate from me/us.
- d. CTL may, notwithstanding this indemnity, require that any instruction given by a Settlor(s) be given in accordance with the signature mandate of the Trust, and CTL may at its sole discretion request a written or any other form of confirmation of any instruction received from the Settlor(s).
- e. That I/we consent to fully indemnify and hold CTL harmless against any losses whatsoever against any losses, actions, proceedings, claims, demands, damages, costs and expenses that may be suffered or incurred as a result of CTL acting on instructions from the designated email or emails originating from me/us irrespective of whether such communication is fraudulent or erroneous provided that CTL has exercised all reasonable and professional care in dealing with such electronic mail.
- f. That all electronic communication originating from me/us to CTL shall be legally binding on me/us for all intent and purposes.
- g. This email indemnity shall remain in force until all actual or potential liability against the Company shall be extinguished in its entirety. The indemnity is also subject to changes by CTL from time to time.

Authorized Signatory/Date (Settlor 1)	Authorized Signatory/Date (Settlor 2)

## **ACCOUNT OPENING REQUIREMENTS**

S/N	DESCRIPTION	CHECKED	DEFFERED	WAVED
1	Duly Completed Account Opening Form			
2	Acceptable means of identification (Valid driver's license/ International Passport/National ID, Voter's card) bearing the identity of the account holder.			
3	Proof of Address (PHCN, Telephone bill, Water Corporation bill, Waste bill e.t.c.) not exceeding a period of 3 months.			
4	2 recent passport photographs for the Applicant (s) & Beneficiaries			
5	Acceptable means of identification of the Beneficiaries (Birth Certificate or International Passport for Minors only)			
6	Resident Permit (Foreigners Only)			

## FOR OFFICIAL USE ONLY

Product Code:	Account Officer/Date:
Approval By/Date:	Compliance/Date