

RECORD UPDATE FORM (CORPORATE)



SECTION 1 – GENERAL INFORMATION

Date:

Account Manager:

Control No. (Internal):

Please tick the box to select any ARM Company that services you

- ARM Pensions ARM Life
 Mixta Nigeria ARM Securities
 ARM Investment Managers

ARM Trustees

Others (Please specify)

PORTFOLIO CODE

SECTION 2 – CUSTOMER INFORMATION

LEGAL NAME OF COMPANY

Company Name

Date of Incorporation

Registration Number

REGISTERED OFFICE ADDRESS:

Town/City

State

Country

MAILING ADDRESS:

Town/City

State

Country

CORPORATE TELEPHONE NUMBER

Email Address

NEPC Number (for export customers only)

Nature of Business (please specify)

TAX Identification Number (TIN)

Sector (private/ public)/ Industry Classification

AUTHORISED SIGNATORY 1

Name

Permanent Residence Address

City/State

Country

Email

Phone Number

Phone (Outside Nigeria)

Signature Specimen:

Date:

TIN (Nigeria)

TIN (Other countries. Please state country)

Nationality

Other Nationality(ies)

Social Security Number

Other Contact Address, In-Care-Of Address or Hold-Mail Address

City/State

Country

AUTHORISED SIGNATORY 2

Name

Permanent Residence Address

City/State

Country

Email

Phone Number

Phone (Outside Nigeria)

Signature Specimen:

Date:

TIN (Nigeria)

TIN (Other countries. Please state country)

Nationality

Other Nationality(ies)

Social Security Number

Other Contact Address, In-Care-Of Address or Hold-Mail Address

City/State

Country

