

CUSTOMER'S E-BUSINESS ACCESS FORM Individual



Dear Customer,
Kindly Complete this form to enable us serve you better.

ACCOUNT NAME:

CSCS ACCOUNT NUMBER:

CHN NUMBER:

ACCOUNT CODE\ USER'S LOGIN:

1. TITLE:

2. SURNAME:

3. FIRST NAME:

4. OTHER NAMES:

5. MOBILE NUMBER:

6. E-MAIL ADDRESS:

Preferred Means of Communication: SMS E-mail Courier Posting

7. DATE OF BIRTH: DD MM YY sex:

8. OCCUPATION:

9. PLACE OF WORK:

10. RESIDENTIAL ADDRESS:

S\No	NEXT OF KIN	PHONE No
1.		
2.		

Please Take Note:

Your Personal Identification Number (PIN) is strictly confidential and should be guarded. Skye Stockbrokers Limited shall not be liable for any loss arising from mishandling of such privileged Information.

I, _____ hereby agreed with the above exemption clause and subscribe to your E-business suite.

Client Signature

Date _____ / _____ / _____

OFFICE USE

_____ NAME OF ACCOUNT OFFICER	_____ SIGNATURE AND DATE
_____ AUTHORISED SIGNATORY	_____ DATE
_____ APPROVED SIGNATORY	_____ DATE