

Licensed under the Financial Services Act 2010
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SYCAMORE WEALTH LIMITED

Individual Client Account Opening & KYC Form

Licensed under the Financial Services Act, 2010

SECTION 1: ACCOUNT INFORMATION

Account Purpose

Purpose of Account Relationship:

Investment Mandate

- ☐ Wealth Management
- ☐ Investment Account
- ☐ Fixed Income Investments
- ☐ Treasury Products
- ☐ Other _____

Beneficial Ownership

Are you the beneficial owner of the investments?

- ☐ Yes
- ☐ No

If No, provide details below:

Beneficial Owner Name Address Relationship

SECTION 2: PERSONAL INFORMATION

Identity Details

Information	Details
Title	☐ Mr ☐ Mrs ☐ Miss ☐ Dr ☐ Prof ☐ Other
Surname	
First Name(s)	
Previous Name(s)	
Gender	☐ Male ☐ Female
Date of Birth	
Nationality	
Country of Residence	
Tax Identification Number (TIN)	

Identification

Information	Details
ID Type	
ID Number	
Expiry Date	
Permit Type (if applicable)	

SECTION 3: CONTACT INFORMATION

Information	Details
Postal Address	_____
Residential Address	_____
District	_____
Village / Area	_____
Traditional Authority	_____
Mobile Number	_____
Alternative Number	_____
Email Address	_____

Residence Status

- ☐ Owner Occupied
- ☐ Rented
- ☐ Family Residence
- ☐ Other _____

SECTION 4: EMPLOYMENT & FINANCIAL PROFILE

Employment Information

Information	Details
Employment Status	☐ Salaried ☐ Self-Employed ☐ Retired ☐ Unemployed ☐ Other
Employer / Business Name	_____
Position Held	_____
Nature of Business	_____

Information**Details**

Years in Occupation

Employer Address

Employer Telephone

Financial Information**Information****Details**

Gross Annual Income (MWK)

Estimated Net Worth (MWK)

Source of Funds☐ Salary☐ Business Income☐ Dividends☐ Commission☐ Inheritance☐ Gift☐ Savings☐ Other

SECTION 5: FAMILY INFORMATION**Information****Details**

Marital Status

☐ Single ☐ Married ☐ Divorced ☐ Widowed

Spouse Name

Spouse Nationality

Information	Details
Spouse ID Number	
Spouse Occupation	
Spouse Contact Number	
Spouse Email Address	
Number of Dependents	

Additional Information

Do you have a valid Will?

☐ Yes ☐ No

Have you ever been declared insolvent or bankrupt?

☐ Yes ☐ No

If Yes, provide details:

SECTION 6: EXISTING INVESTMENT / BANK ACCOUNTS

Institution	Account Number	Account Name	Account Type
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SECTION 7: POLITICALLY EXPOSED PERSONS (PEPs)

Are you, a family member, or close associate a Politically Exposed Person?

☐ Yes ☐ No

If Yes, complete below:

Name	Position Held	Country	Relationship	Source of Wealth
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SECTION 8: REFERENCES

Reference 1	Reference 2
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Name	Name
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Profession	Profession
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Address	Address
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Phone	Phone
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Email	Email
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SECTION 9: EXPECTED ACCOUNT ACTIVITY

Transaction Type	Monthly Frequency	Estimated Monthly Value (MWK)
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Deposits		
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Withdrawals		
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Investments		
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Redemptions		
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SECTION 10: DOCUMENT CHECKLIST

Please attach:

☐ National ID / Passport

☐ Proof of Residential Address

☐ Proof of Income

☐ Recent Bank Statements (3 Months)

☐ Source of Funds Documentation

☐ Business Registration Documents (where applicable)

☐ Tax Identification Certificate

SECTION 11: CLIENT DECLARATION

I declare that all information provided in this application is true, complete and accurate. I confirm that all funds invested originate from lawful sources and agree to be bound by the Terms and Conditions of Sycamore Wealth Limited.

Client Name:

Signature:

Date:

FOR OFFICIAL USE ONLY**Compliance Review Details**

KYC Documents Verified ☐ Yes ☐ No

Screening Completed ☐ Yes ☐ No

PEP Approval Required ☐ Yes ☐ No

Account Approved ☐ Yes ☐ No

Compliance Officer

Signature

Date
