CDS/FORM/02C

APPLICATION TO OPEN A CDS SECURITIES ACCOUNT

(To be submitted and delivered to the Central Depository Participant)

Date…….

I / We hereby apply to open a CDS securities account with the following details which I/We confirm to be correct.

1. APPLICANTS DETAILS

MINOR ACCOUNT DETAILS

NAME OF ACCOUNT										
CDS ID (if any)										
Date of Birth ***(DD-MM-YYYY)***										

GUARDIAN DETAILS					
A	Name				
B	Relationship				
C	Address				
D	E-mail				
E	TIN# & Place of Issue				
F	Nationality				
G	Residence				
H	CDS ID *(if any)*				
I	Tax Status *(If **exempted** provide evidence)*		**Not Exempted**		**Exempted**
J	National ID # *				
K	Passport # & Place of Issue Expiry Date ***(DD-MM-YYYY)*** *				
L	Voter ID #				
M	Driving License #				
N	Occupation				

For Tanzanian's NIDA is mandatory; Others Passport is mandatory

O	Employer	
P	Employment ID #	
Q	Date of Birth ***(DD-MM-YYYY)***	
R	Mobile No.	

2. SETTLEMENT BANK DETAILS

BANK DETAILS		
A	Bank Name	
B	Account No.	
C	Name of Account*	

NB: The Account Number and Account Name shall be that of the Minor and shall correspond.

3. PERSONS AUTHORIZED TO OPERATE THE CDS SECURITIES ACCOUNT

	NAME OF AUTHORIZED SIGNATORY			**SPECIMEN SIGNATURE**
	Surname	**First name**	**Middle name**	
A				
B				
C				
D				

4. CATEGORY OF THE CDS SECURITIES ACCOUNT HOLDER

Please use the category of the account holder indicated as annex of this application (annex to CDS form 2) that best describes the applicant to complete this section.

Category of Account Holder	**Class**

5. MANDATE FOR OPERATING CDS SECURITY ACCOUNT

I / We hereby agree to operate a CDS securities account in accordance with the rules prescribed in the Central Depository System Dealing Agreement and the Central Depository System Rules and Operational Guidelines; and request you to honor any instructions bearing signature(s) provided above (and on your specimen signature cards).

Authorized Signature	**Authorized Signature**

Annex to CDS Form 2C
Account Holder Categories Information Sheet

Category of Account holder		Class
1.	Bank of Tanzania	BOT Open Market Operations
		BOT Special Funds
2.	Government Agencies	Central Government
		Government of Zanzibar
		Local Governments
		Parastatals
3.	Banks	Non-Banks Financial Institution
		Regional Banks
		Community Banks
		Deposit Money Banks
4.	Trust Companies	Pensions Funds
		Provident Funds
		Unit Trust
		Social Security Regulatory Authority
5.	Insurance Companies	Commissioner of Insurance
		Insurance Company
		Insurance Broker
6.	Other Financial Institutions	Credit Institution
		Bureau De Change
7.	Market Intermediaries	Authorized Dealer
		Capital Markets and Securities Authority
		Dar es salaam Stock Exchange
		Mortgage Finance Company
		Broker
8.	Individuals	Individual
		Joint
		Minor
9.	Others	Manufacturing Firm
		Commercial Enterprise
		Non-Government Organization (NGO)
		Social Group
		Religious Group
		Educational Group
		Micro-Finance Institution
		Co-operative
		Other Official Entities
		Medical Health Schemes
		Professional Organization
		Health Institution

Attachment to CDS Form 2C
SPECIMEN SIGNATURE CARD
(To be submitted and delivered to the Director Financial Markets)

AFFIX PHOTOGRAPH 1 HERE AFFIX PHOTOGRAPH 2 HERE AFFIX PHOTOGRAPH 3 HERE AFFIX PHOTOGRAPH 4 HERE	**Director Financial Markets** **Bank of Tanzania** **Date: ……..** I the undersigned hereby request to open a CDS securities account in the name…….. Address…… Telephone…….. Email…….. I/ We hereunder agree to conform to the rules governing the CDS securities account within the Central Depository System Dealing Service. The specimen signature(s) for person(s) who may be given the mandate to sign on my behalf are: **SIGNATORIES:** **FULL NAME** **SIGNATURE** 1. 2. 3. 4. The specimen card is returned herewith by the applicant of the CDS securities account indicated on **CDS Form 02** Yours faithfully ,…… (Full Name) … …… (Signature)

For Central Depository Participant Official Use Only

Originated By:_____ **Sign** _____ **Date**_____

Verified By: _____ **Sign** _____ **Date**_____

Approved By: _____ **Sign** _____ **Date**_____

Central Depository Participant CDS ID: ……

Central Depository Participant CDS SEC. A/C: ……

Remarks: ……