



Opticom Finance Limited

Funds Investment Form COMPANY/BUSINESS

Please fill all relevant sections in **CAPITAL LETTERS**, sign and date the form.
Do not use correction fluid on any errors. If you need to correct a mistake, please cross-out and initial any changes.

1. BUSINESS INFORMATION

COMPANY/BUSINESS	RC No.	TIN No.
<input type="text"/>	<input type="text"/>	<input type="text"/>
TYPES OF ORGANIZATION (Pls tick)		
<input type="checkbox"/> LIMITED COMPANY <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> STATEOWNED <input type="checkbox"/> ASSOCIATION		
REGISTERED OFFICE ADDRESS		
<input type="text"/>		
TELEPHONE		
<input type="text"/>		
EMAIL ADDRESS		
<input type="text"/>		

2. NAME(S) AND ADDRESS(ES) OF SIGNATORIES

NAME:	NAME:.....
ADDRESS:	ADDRESS:
DATE:	DATE:.....
SIGNATURE:	SIGNATURE:

3. BANK ACCOUNT DETAILS

We hereby instruct Opticom Finance Limited to arrange for payments to be made directly to our Bank, as detailed below

BANK NAME

BANK BRANCH

ADDRESS OF BANK BRANCH

NAME OF ACCOUNT HOLDER(S)

ACCOUNT NUMBER

BANK SORT CODE

