

PERSONAL FQIP INVESTMENT FORM



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PERSONAL FQIP INVESTMENT FORM

Date

D	D	/	M	M	/	Y	Y
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1. PERSONAL DETAILS

Mr. Mrs. Ms. Miss. Dr. Prof. Other (Please Specify)

Surname First Name(s) and Other Name(s)

In Trust For (ITF)

Date of Birth

D	D	/	M	M	/	Y	Y
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 Age Place of Birth Occupation

Nationality Marital Status Single Divorced Widowed Married

Current Residential Address Contact Number - Mobile

Email Address Contact Number - Employer

Name of Employer

Address of Employer

Religion Christian Islam Traditional Other (Please Specify)

Place of Worship

Type of ID Card Passport Voter ID Driver Licence Other (Please Specify)

ID Number Date of Issue

D	D	/	M	M	/	Y	Y
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 Date of Expiry

D	D	/	M	M	/	Y	Y
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2. DETAILS OF INVESTMENT

Investment Tenor: One (1) Year Two (2) Years Three (3) Years Other (Please Specify)

Amount Deposited (In Figures):

Amount Deposited (In Words):

Mode Of Deposit Bankers Draft Transfer Cash Cheque

Bank/Cheque No.: Interest Rate:

Source of funds

3. PAYMENT PLAN

BI-Weekly Weekly Monthly Other (Please Specify)

4. PAYMENT MODE

Post-Dated Cheque Standing Order Direct Debit Cash Mobile Transfer Deducted At Source

5. CLIENT'S BANK ACCOUNT

Name of Bank: Branch:
Account Name: Account Number:

6. NEXT OF KIN/BENEFICIARY INFORMATION

(A)

Surname First Name(s) and Other Name(s)
Date of Birth Occupation Contact Number
Address
ID Type Relationship to Client
ID Number Share Percentage(%)

(B)

Surname First Name(s) and Other Name(s)
Date of Birth Occupation Contact Number
Address
ID Type Relationship to Client
ID Number Share Percentage(%)

7. DECLARATION OF APPLICANT(S)

I/We _____ hereby declare that I/we have read, understood and agreed to the terms and conditions set out in this document. Signature _____ Date:

2nd Signature (Joint Account Only) _____ Date:

8. TERMS AND CONDITIONS

- Minimum start-up amount is GHS50.00 for Individuals.
- Minimum investment period is one (1) year.
- Interest on funds is pegged at prevailing Government T-Bill rate plus 2 but credited at the end of the year.
- Quarterly statement on your investment will be posted via email.
- Client can withdraw funds up to 3 times in a year after investing for at least one year.

PLEASE NOTE: IN THE ABSENCE OF ANY CONTRARY INSTRUCTIONS, MATURED INVESTMENT WILL BE ROLLED OVER AT THE PREVAILING INTEREST RATE ON MATURITY

9. FOR OFFICIAL USE ONLY

Authorised by Relationship Manager:

Approved by Head, Business Development:

Verified by Finance Officer:

Name: _____

Name: _____

Name: _____

Signature: _____

Signature: _____

Signature: _____



**FORMS
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