

APPLICATION TO OPEN A CDS SECURITIES ACCOUNT

(To be submitted in duplicate and delivered to the Manager Domestic Markets)

Manager Domestic Markets Bank of Tanzania P.O. Box 2939 Date: Dar es Salaam I / We hereby apply to open a CDS securities account with the following details which I/We confirm to be correct.														
1. A	APPLICANTS DETAILS													
<u>N</u>	MINOR ACCOUNT DETAILS													
BT A F	ME OF ACCOUNT													
	S ID (if exists)													
	<u> </u>		1		1					1		l	1	
Dat	e of Birth <i>(DD-MM-YYYY)</i>													
GU	ARDIAN DETAILS													
A	Name													
В	Relationship													
С	Postal Address													
D	Physical Address													
E	Fax													
F	E-mail													
G	TIN# & Place of Issue													
H	Nationality													
I	Residence													
J	CDS ID (if exists)													
K	Tax Status (If exempted pro	vide				Not	Exe	mpt	ed			Exe	mp	ted
	evidence)													
	Passport # & Place of Issue													
L M	Expiry Date (DD-MM-YYYY) Voter ID #													
N	Driving License #													
0	National ID #													
P	Occupation													
Q	Employer													
R	Employment ID #													
S	Date of Birth (DD-MM-YYYY)													
T	Mobile No.										1			
	2. SETTLEMENT BANK DETAILS													

BA	BANK DETAILS				
A	Bank Name				
В	Branch Name				
C	Account No.*				
D	Name of Account*				
E	Address				
F	Telephone				
G	Fax				
Н	E-mail				

^{*}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 (SPECIMEN SIGNATURE		
	Surname	First name	Middle name	
A				
В				
C				
D				

4. CATEGORY OF THE CDS SECURIT Please use the category of the account holder if form 2) that best describes the applicant to contain the containing of the containing the containing of the co	indicated as annex of this application (annex to CDS
Category of Account Holder	Class
5. MANDATE FOR OPERATING CDS S	SECURITY ACCOUNT
Central Depository System Dealing Agreem	es account in accordance with the rules prescribed in the nent and the Central Depository System Rules and onor any instructions bearing signature(s) provided above
Authorized Signature	Authorized Signature

Annex to CDS Form 2 Account Holder Categories Information Sheet

Ca	tegory of Account holder	Class		
1.	Bank of Tanzania	BOT Open Market Operations		
		BOT Special Funds		
2.	Government Agencies	Central Government		
	S S	Government of Zanzibar		
		Local Governments		
		Parastatals		
3.	Banks	Non-Banks Financial Institution		
		Regional Banks		
		Community Banks		
		Deposit Money Banks		
4.	Trust Companies	Pensions Funds		
''	1	Provident Funds		
		Unit Trust		
		Social Security Regulatory Authority		
5.	Insurance Companies	Commissioner of Insurance		
0.	modrance companies	Insurance Company		
		Insurance Broker		
6.	Other Financial Institutions	Credit Institution		
0.		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		
	J			



Attachment to CDS Form 02 SPECIMEN SIGNATURE CARD

SPECIMEN SIGNATURE CARD(To be submitted in duplicate and delivered to the Manager Domestic Markets)

AFFIX PHOTOGRAPH 1 HERE	Manager Domestic Markets Bank of Tanzania I the undersigned hereby request to op name	
AFFIX PHOTOGRAPH 2 HERE	Address Telephone Fax Email I/ We hereunder agree to conform to the account within the Central Depository The specimen signature(s) for person(sign on my behalf are:	ne rules governing the CDS securities System Dealing Service.
AFFIX PHOTOGRAPH 3 HERE	SIGNATORIES: FULL NAME 1. 2. 3. 4. The specimen card is returned herewith securities account indicated on CDS Formula CDS For	
AFFIX PHOTOGRAPH 4 HERE	Yours faithfully ,	

For Central Depository Partic	ipant Official Use O	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:						