



**SECURITIES AND EXCHANGE
COMMISSION, NIGERIA**

**APPLICATION FORM FOR REGISTRATION OF SECURITIES
EXCHANGE THEREOF UNDER THE INVESTMENTS AND SECURITIES
ACT 2007**

1. Name of Company:

2. Registered Address:

3. Present address (if different from (2) above):

4. Branch (es):

5. Date of Incorporation:

6 Previous name if different from that given in (1):

7. State reasons for the change in name:

8. State main statute(s) governing your business:

9. State the name(s) and address(es) of subsidiaries/Associated companies types of

business and percentage holding:

10. Share capital:

Authorized N_____ (..... shares of N..... each)

Issued N_____ (..... shares of N..... each)

Paid up N_____ (..... shares of N..... each)

11. State the name(s) and address(es) of subsidiaries/Associated companies, type of business and percentage holding: _____

12. Name(s) and Address (es) of Members/Partners holding 5% or more of the capital of the firms/company:

Serial No	Name and Address	Amount (N)	% Held
	(a) Nigerian		
	(b) Foreign		

13. Particulars of Director(s) /Partner(s)

Name and Address	Qualification(s) and Experience	Previous Employment and Date (if any)	Reason(s) for Leaving

14. Particular(s) of Executive and Senior Staff

Name	Qualification with Date	Designation

15. State Nominal and Market Values of your Investments in Securities as at the Date of this Application

Securities	Nominal Value(N)	Market Value (N)
Ordinary Shares:		
Preference Shares:		
Debentures:		
Government Bonds:		
Other Fixed Interest:		
Bearing Securities:		
Mutual Funds:		
(Open-ended)		
Others		

16. MEMBERSHIP

(a) State briefly requirements as to qualification for membership:

(b) (i) State present number of members (state categories)_____

(ii) No. of Stockbroking members_____

(iii) No. of Sub- brokers affiliated to or sponsored by stockbrokers_____

(iv) No. of other corporate members_____

(v) No. of individuals in membership_____

(c) State criteria for eligibility of members of Council Office

(d) Is there any undertaking in force by members serving on the Council of the Exchange and who are also directors of companies quoted on the Exchange to avoid conflict of interest in such dual capacity? If so, give details _____

17. MARKET INFORMATION FACILITIES

(a) Indicate what facilities are provided by ticking where applicable below and also adding the remarks "available" or "to be provided" as the case may be:

(i) Trading floor(s) _____

(ii) Work Stations _____

(iii) Telephones _____

(iv) Quotation Board _____

(v) Stock Price Electronic Display Device _____

(vi) Stock Printers _____

(vii) Inquiry Display Equipment _____

(viii) Circuit Breaker

(ix) Other facilities

(b) Describe briefly how the information gathering and distribution system employed by the Exchange for the market as a whole

18. BRANCHES

(a) Addresses of Branches:

1.

2.

3.

4.

5.

6.

(b) Briefly describe the dealing links available among the trading floors in your branch network:

19. (1) INSPECTION OF MEMBERS ACTIVITIES

a) Do you perform inspectorate duties over your members?

b) How often is the inspection done yearly on average?

c) State briefly the purpose of inspection:

d) Has any of your dealing members within the past 5 years received any form of
reprehension arising from your inspectorate findings? If so, give
details_____

(2) (a) Is the Exchange operating any Compensation Fund for assuaging the public for failure of its dealing members? If so give details _____

(b) If not, what plans do you have to establish one? _____

20. COUNCIL OFFICIALS

Name	Age	Title	Position occupied	Date employed	Terms of employments

21. *PRINCIPAL/EXECUTIVE OFFICERS

Name	Age	Title	Position occupied	Date employed	Terms of employments

• Principal Officers include Chief Executive, Deputy and Departmental Heads.

AFFIRMATION (To be completed under the Exchange Seal)

We hereby affirm that the statements furnished in 1 – 13 above together with attachments (if any), are to the best of our knowledge and belief true and correct.

Countersigned:

Signed:

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CHAIRMAN/PRESIDENT OF COUNCIL

CHIEF EXECUTIVE OFFICER

NOTE:

1. In addition to the information expressly required, please furnish also any further material information necessary to make the information supplied above not misleading.
2. Where spaces provided in this form are not adequate, information required may be supplied on additional sheet duly certified.
3. The completed form should be accompanied by:
 - (a) Two copies of Memorandum and Articles of Association of the Capital Trade point certified by the Corporate Affairs commission.
 - (b) up-to date requirements;

- (c) Rules and regulation of the Capital Trade Point;
- (d) Instruction and inspection manual of members activities;
- (e) Code of conduct / ethics for members and staff;
- (f) Latest copy of audited accounts or statement of affairs signed by its auditors;
- (g) Profile of the CTP including the organizational structure, members of governing council and Principal / Executive Officers of the CTP promoters;
- (h) Completed application forms for the registration of at least three (3) Principal / Executive Officers of the Exchange of the CTP. Two of whom must be knowledgeable in capital market