

Application to Purchase The Government of The Commonwealth of The Bahamas Registered Stock

[SECTION-1] (Mandatory) To be completed by Primary Security Holder (Name To be Represented on E-Certificate)			
Existing Holder of BRS?	PRIMARY APPLICANT: First Name	Middle Name	Last Name
Yes <input type="checkbox"/> No <input type="checkbox"/>			
ADDRESS INFORMATION			
Street & P.O. Box (#...Name)		Location/Island/Country	
Telephone [Home]	Telephone [Mobile]	Place of Employment	
Email			Date of Birth (DD-MM-YYYY)
SIGNATURE			NIB#
			Date (DD-MM-YYYY)

[SECTION-2] (Optional) To be completed if BRS is to be jointly held (more than one holder)					
REGISTRATION TYPE (CHOOSE ONLY ONE)					
<input type="checkbox"/> AND all parties required for completing transactions		<input type="checkbox"/> OR either party may complete transactions individually		<input type="checkbox"/> AND/OR parties together OR any one individually	
Existing BRS Holder?	SECONDARY APPLICANT: First Name	Middle Name	Last Name	NIB#	Signature
[1] Yes <input type="checkbox"/> No <input type="checkbox"/>					
[2] Yes <input type="checkbox"/> No <input type="checkbox"/>					
[3] Yes <input type="checkbox"/> No <input type="checkbox"/>					
In Trust For (If Applicable):					
ADDRESS, IF DIFFERENT FROM PRIMARY					
Street (#...Name)			Location/Island/Country		
Telephone [Home]	Telephone [Mobile]	Places of employment (1 per holder)			
Email 1 + Additional Contact Information		Email 2 + Additional Contact Information		Email 3 + Additional Contact Information	

[SECTION-3] (Mandatory) Security Tenors (please specify individual & total value e.g. \$100, \$2,000, Total - \$2,100)	
<input type="checkbox"/> 1Y \$ _____ <input type="checkbox"/> 3Y \$ _____ <input type="checkbox"/> 5Y \$ _____ <input type="checkbox"/> 7Y \$ _____ <input type="checkbox"/> 10Y \$ _____ <input type="checkbox"/> 20Y \$ _____ <input type="checkbox"/> 30Y \$ _____	
Total \$ _____	

[SECTION-4] (Mandatory) Payment	
Electronic Payment Made Via	Total Payment Made
BOB\$ _____ CIT\$ _____ CWB\$ _____ FCI\$ _____ FBL\$ _____ RBC\$ _____ SBL\$ _____	\$ _____

[SECTION-5] (Mandatory) Primary Applicant's Bank Information (for interest and maturity payments)		
Bank Name	Branch Name/Number	Account Number

[SECTION-6] (Mandatory) Acknowledgement of Disclaimer	
I have read, understood, and accepted the information provided on the BRS Application Disclaimer	Insert Initials Here _____