DASFADS Surveys Nig. Ltd
RC 1061094 · SURVEYING · MAPPING · GEOSPATIAL CONSULTANCY

FORM
DAS-FRM-02 · v1.0

APPLIES TO
Individuals and organisations

SENT TO
DASFADS Client Portal, securely

▲ CLIENT DUE DILIGENCE

Know Your Customer (KYC) form

We confirm who our clients are before we survey, document or advise on land.

Why we ask

Land and property work carries a real risk of fraud and impersonation. Knowing our clients protects you, the true owners of land and our company. It lets us confirm that the person instructing us has the right to do so, meet our legal and professional obligations, and keep reliable records of who we work for.

How to use this form

1. Type into the boxes in any PDF reader (Adobe Acrobat Reader, Edge, Chrome, Preview), or print it and write in block capitals. Complete Part 2 if you are an individual, or Parts 3 to 5 for an organisation.
2. Sign in Part 9: digitally in your PDF reader, or by hand on a printed copy.
3. Email the completed form with your documents to dasfads@dasfads.com. Or complete it online at dasfads.com/kyc.html.

1 Who is completing this form

APPLICANT TYPE*

◯ Individual ◯ Company or business name ◯ Government body ◯ NGO, church, mosque or institution

YOUR RELATIONSHIP TO THE LAND OR PROJECT

☐ Owner ☐ Prospective buyer ☐ Developer ☐ Agent or attorney for the owner

☐ Legal practitioner ☐ Tenant or occupier ☐ Contractor or consultant ☐ Other

2 Individual details

INDIVIDUALS ONLY

TITLE | SURNAME * | FIRST NAME * | OTHER NAMES

Mr, Mrs, Dr...

DATE OF BIRTH * | NATIONALITY * | OCCUPATION

RESIDENTIAL ADDRESS *

EMAIL ADDRESS * | TELEPHONE *

We send your copy, and later your portal invitation, here.

IDENTITY DOCUMENT*

◯ NIN slip or card ◯ International passport ◯ Driver's licence ◯ Permanent voter's card

DOCUMENT NUMBER * | ISSUE DATE | EXPIRY DATE

3 Organisation details

ORGANISATIONS ONLY

REGISTERED NAME *

REGISTRATION TYPE

CAC REGISTRATION NUMBER *

DATE OF REGISTRATION

TAX IDENTIFICATION NUMBER (TIN)

REGISTERED OFFICE ADDRESS *

OPERATING ADDRESS (IF DIFFERENT)

NATURE OF BUSINESS

WEBSITE

EMAIL ADDRESS *

TELEPHONE *

We send your copy, and later the portal invitation, here.

4 Directors and persons with significant control

ORGANISATIONS ONLY

List every director, and every person who owns or controls 5% or more of the organisation directly or indirectly (as recorded with the Corporate Affairs Commission). If there are more than four, attach a list in Part 8.

FULL NAME *	ROLE	% HELD	NATIONALITY	ID & NUMBER
FULL NAME	ROLE	% HELD	NATIONALITY	ID & NUMBER
FULL NAME	ROLE	% HELD	NATIONALITY	ID & NUMBER
FULL NAME	ROLE	% HELD	NATIONALITY	ID & NUMBER

5 Authorised representative

Complete this if someone other than the applicant will instruct us, sign documents or receive deliverables.

FULL NAME

POSITION OR CAPACITY

EMAIL ADDRESS

TELEPHONE

EVIDENCE OF AUTHORITY

- ☐ Letter of authority
- ☐ Board resolution
- ☐ Power of attorney
- ☐ Other

6 Politically exposed persons

A politically exposed person (PEP) holds, or has held in the last five years, a prominent public function (for example a minister, legislator, senior judge, senior military officer, head of a government agency or state-owned company, or senior political party official), or is a close family member or associate of one.

DECLARATION*

◯ No, neither I nor any person listed in Part 4 is a PEP

◯ Yes (give details below)

DETAILS (IF YES)

7 Payment

WHO WILL PAY

◯ I / the organisation will pay

◯ A third party will pay

THIRD PARTY NAME

RELATIONSHIP TO YOU

8 Documents

Clear photos or scans

Individuals

- Valid identity document (Part 2)
- Proof of address, not older than 3 months
- Title or interest documents for the land

Organisations

- Certificate of incorporation or registration
- CAC status report (directors and shareholders)
- TIN certificate
- Board resolution or letter of authority
- ID of each person in Part 4 and of the representative
- Title or interest documents for the land

Proof of address: utility bill, bank statement or tenancy agreement in your name. Title or interest documents: for example Certificate of Occupancy, deed of assignment, Governor's consent, allocation letter or contract of sale.

Attach copies of your documents when you email this form to dasfads@dasfads.com.

▲ DATA PROTECTION NOTICE

How we handle your KYC information

What and why. Identity, contact, ownership and authority details, to confirm who we act for, prevent fraud and impersonation, perform our contract with you and meet legal obligations.

Legal basis. Performance of a contract, compliance with legal obligations and our legitimate interest in preventing fraud (Nigeria Data Protection Act 2023, section 25).

Who sees it. Authorised DASFADS staff only. We never sell it. We share it only where the law requires, for example with a regulator or the police.

How long and your rights. Kept with your client records for the periods in our Privacy Policy, stored securely, then deleted. You may access, correct or ask about it at dasfads@dasfads.com.

9 Declaration and signature

I declare that the information in this form and the attached documents is true, complete and current. I will tell DASFADS Surveys Nig. Ltd promptly if it changes. I understand that DASFADS may verify it with the issuing authorities or other reliable sources, may decline or stop work if it cannot be verified, and may keep it as described in the notice above.

SIGNATURE OF APPLICANT OR AUTHORISED SIGNATORY*

Sign here, or add your digital signature in your PDF reader

FULL NAME OF SIGNATORY *

POSITION (ORGANISATIONS)

PLACE

DATE

- [ ] I confirm the declaration above. *
- [ ] I consent to DASFADS creating my client profile from this form and sending the Client Portal invitation (account activation link) to the email address I gave in Part 2 or Part 3. *
- [ ] Send me occasional news from DASFADS (optional; you can unsubscribe at any time).