

FOR OFFICE USE ONLY

Salesman Name and/or _____ Primary Person to Contact _____
Account No.: _____ Phone No. : _____
Date: _____ Email ID : _____
\$: _____ Fax No. _____

**ACCOUNT APPLICATION – Corporate/Financial Institutions/
Foundation/ Charity**

KNOW YOUR CLIENT COVERSHEET

Where ‘Client’ is a regulated financial institution or a corporation, foundation or charity.

*Affix your
recent passport
size photograph
(Do not staple)*

1. (i) Company Name: _____

(ii) Name of Signatory: _____

2. Relationship to Corporate Entity: _____

Mobile No: _____ House/Office No: _____ Fax No: _____

Address: _____

3. Introduction

Known personally to:

Yrs/Months:

Referred by:

Related to:



Solicited based on recommendation from:	
4. Bank Account details	
Bank Name:	Branch :
Date since (DDMMYY) ___/ __/ ____	A/c No.:
5. Account Type (Tick suitable)	
Regulated Financial Institution <input type="checkbox"/>	Corporation/Foundation/Charity <input type="checkbox"/>
6. Profile (Tick relevant boxes)	
Short/Long-term investment <input type="checkbox"/>	Pricing/Delivery <input type="checkbox"/>
Hedging <input type="checkbox"/>	Arbitrage <input type="checkbox"/>
Other (please describe) <input type="checkbox"/>	
7. Corporation/ Foundation/ Charity:	
Business Name:	
Type of Business:	
8. Financial Information:	
Estimated total Balance Sheet assets:	
Origin of assets deposited into account:	
Source of information:	
9. Estimated Daily Transactions	
6 contracts or less <input type="checkbox"/>	7 – 20 <input type="checkbox"/>
21 – 50 <input type="checkbox"/>	more than 50 <input type="checkbox"/>
Other information (i.e. projected future turnover):	
10. Are any of the entity's major shareholders politically exposed* person?	
*{i.e. are/were they – a senior military, government or political official of any country? A senior executive of a state-owned corporation, or an immediate family member or close associate of such a person?}	

Yes

No

Not Sure

If 'YES' or 'NOT SURE' please provide below any known details

11. Additional Information/Continuation 1 –10

Information captured by

Name

:

Signature

:

Date

:

Information supplied by

Name

:

The information supplied is correct to the best of my knowledge.

Signature

:

Name

:

Date

: