

1. Application Form

Please complete this form in full using BLOCK Capitals, in blue/back pen, sign and submit the form, to:

PM Financials Ltd
The Cyberati Lounge, Ground Floor,
The Catalyst, Silicon Avenue,
40 Cybercity, 72201 Ebène,
Republic of Mauritius.

No question should be left unanswered. Where the Applicant believes that a question does not apply, the Applicant should write "Not Applicable" or "N/A".

2. Required Documentation:

Please refer to **Annexure A** for List of Customer Due Diligence Document required for Corporate Application form.

Please refer to Annexure B for Sample Board Resolution, that the board of your company must hold a meeting and pass resolution to enable your company to you open an account with PM Financials Ltd.

Mandatory fields are shown with *. Please call **+230 4672000** or email **info@pmfinancials.mu** if you have any questions.

3. Base Currency

USD EUR

4. Company Information

Corporate Details		
Business Name*:		
Registration Number*:	Date of Incorporation*:	
Country of Incorporation*:	Trading Name*:	
Nature of Business*:		
Registered Address Line 1*:		
Registered Address Line 2*:		
Registered Address Line 3*:		
Town*:	City*:	Post code*:
Is your Company regulated by a Financial Services Regulator, such as Financial Services Commission, Mauritius or equivalent?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, Name of the Financial Services Regulator?		
Primary phone number*: (incl country and area codes)	Secondary phone number*: (incl country and area codes)	

5. Details of Directors

Sole Director/Director 1		
First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address* :
Primary phone number* : (incl country and area codes)		Secondary phone number* : (incl country and area codes)

Director 2		
First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address* :
Primary phone number* : (incl country and area codes)		Secondary phone number* : (incl country and area codes)

Director 3

First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:	Email Address*:	
Primary phone number*: (incl country and area codes)	Secondary phone number*: (incl country and area codes)	

Director 4

First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:	Email Address*:	
Primary phone number*: (incl country and area codes)	Secondary phone number*: (incl country and area codes)	

6. Details of Shareholders/Ultimate Beneficial Owner (UBO) (Please list everyone with a holding of 10% or above)

Sole Shareholder/UBO/Shareholder/UBO 1		
First Name*:	Surname*:	
Date of Birth*:	Nationality*:	
Passport/ID Number*:	Passport/ID Expiry Date*:	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1*:		
Residential Address Line 2*:		
Residential Address Line 3*:		
Town*:	City*:	Post code*:
Country of Residence:		Email Address*:
Primary phone number*: (incl country and area codes)		Secondary phone number*: (incl country and area codes)

Shareholder/UBO 2		
First Name*:	Surname*:	
Date of Birth*:	Nationality*:	
Passport/ID Number*:	Passport/ID Expiry Date*:	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1*:		
Residential Address Line 2*:		
Residential Address Line 3*:		
Town*:	City*:	Post code*:
Country of Residence:		Email Address*:
Primary phone number*: (incl country and area codes)		Secondary phone number*: (incl country and area codes)

Shareholder/UBO 3

First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address*:
Primary phone number*: (incl country and area codes)		Secondary phone number*: (incl country and area codes)

Shareholder/UBO 4

First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address*:
Primary phone number*: (incl country and area codes)		Secondary phone number*: (incl country and area codes)

7. Details of Person(s) Authorised to operate the Account.

Sole Authorised Person 1/Authorised Person 1		
First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address* :
Primary phone number* : <small>(incl country and area codes)</small>		Secondary phone number* : <small>(incl country and area codes)</small>

Authorised Person 2		
First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address* :
Primary phone number* : <small>(incl country and area codes)</small>		Secondary phone number* : <small>(incl country and area codes)</small>

Authorised Person 3		
First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address* :
Primary phone number* : (incl country and area codes)		Secondary phone number* : (incl country and area codes)

Authorised Person 4		
First Name* :	Surname* :	
Date of Birth* :	Nationality* :	
Passport/ID Number* :	Passport/ID Expiry Date* :	
Are you a USA citizen, Green Card holder or USA resident for tax purpose? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a Politically Exposed Person (PEP) or related to a PEP? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Residential Address Line 1* :		
Residential Address Line 2* :		
Residential Address Line 3* :		
Town* :	City* :	Post code* :
Country of Residence:		Email Address* :
Primary phone number* : (incl country and area codes)		Secondary phone number* : (incl country and area codes)

8. Banking Details

Name of Account Holder*:	
Bank Name*:	
Bank Address*:	
Account Number*:	IBAN Number*:
SWIFT or BIC Code*:	Sort Code (if applicable):
Corresponding Bank Name:	
Corresponding Bank Account Number:	
Corresponding Bank Swift Code:	

9. Income Information

Annual Turnover (approx. USD) *:
Estimated total balance-sheet assets (USD)*:
Funds available for trading with PM Financials Ltd? (USD)*:
Date of Latest, Audited Financial Statement:

10. Trading Experience and Knowledge

Do you understand the risks of trading margined/leverage products*?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
What is your trading experience trading Securities*?	<input type="checkbox"/> 1 year	<input type="checkbox"/> > 1 to 3 years	<input type="checkbox"/> More than 3 years	
Frequency of trades*?	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Yearly
What is your trading experience trading Derivatives*?	<input type="checkbox"/> 1 year	<input type="checkbox"/> > 1 to 3 years	<input type="checkbox"/> More than 3 years	
Frequency of trades*?	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Yearly
What is your trading experience trading CFDs*?	<input type="checkbox"/> 1 year	<input type="checkbox"/> > 1 to 3 years	<input type="checkbox"/> More than 3 years	
Frequency of trades*?	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Yearly

11. Source of funds* (Please tick the most relevant answer)

Commercial Activities: <input type="checkbox"/>	Third Party funds: <input type="checkbox"/>	
Investment held at another brokerage firm: <input type="checkbox"/>	Loan/credit: <input type="checkbox"/>	Others: <input type="checkbox"/>
Other Details:		

12. General Disclosure

This question relates to the Company and its officers (Directors, UBO's, and Authorised Signatories) of the Company. If a question does not apply, you should leave it blank.	
Is there any outstanding or upcoming civil or criminal litigation against you or any company of which you are an officer; or are there any current proceedings issued by you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you, in any capacity, ever had a formal warning or been censured, disciplined, or publicly criticized by any Court of Law or by any officially appointed enquiry, whether in your home country or elsewhere or by any professional or regulatory body or any trade association to which you have? belonged or do belong, or been the subject of a regulatory order or direction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you at any time been convicted of any criminal offence by any court? (Road Traffic offences should not be listed).	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been subject to any penalty or enforcement action by any other government agency (e.g., Tax Authority, Financial Intelligence Unit, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have the company and/or the officers ever been subject of any justified complaint relating to regulated activities?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does any third party have any controlling interest where financial or otherwise, in respect of any trading undertaken on this account?	<input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE ANSWER TO ANY OF ABOVE QUESTIONS IS 'YES' PLEASE PROVIDE DETAILS.

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13. Declarations

<input type="checkbox"/> I/We, jointly and severally, declare that:
<ol style="list-style-type: none"> That the information provided by us and inserted in this form is correct and that I/We acknowledge that I/We shall be obliged to inform PM Financials Ltd immediately in case of any changes to this information; That the investment amount has been chosen by us taking our total financial circumstances into consideration and is by us considered reasonable under such circumstances; That the funds deposited now or at any time in the future to PM Financials Ltd are/will not be derived from or otherwise relate to any activity which is illegal or unlawful. I/We will provide the required evidence of the source of funds if required doing so in future; and To have received satisfactory answers to all our questions regarding the terms, conditions and other issues relating to the relevant products.
<input type="checkbox"/> I/We acknowledge and consent to personal information submitted by us to PM Financials Ltd:

1. Acknowledges, understands, and agrees that PM Financials Ltd shall, for the performance of its obligations hereunder, collect and, where necessary or required, process, personal information which the Investor hereby voluntarily discloses to it (the "Personal Data").
2. When PM Financials Ltd is required to carry out electronic verification, data may be used to undertake a search with the third-party authentication service provider. A record of the search and verification will be maintained for 7 years; and
3. Maybe disclosed to other group companies of the PM Financials Ltd.
4. I/We hereby agree that PM Financials Ltd may contact us to give information about their product and services via email.

I/We declare by our signature:

1. To have carefully and understood and agree to be bound by the PM Financials Ltd; (a) Corporate Client Agreement (b) Privacy Policy (c) Best Execution Policy (e) Regulations for Non-Trading Operations (f) Complaints Handling Policy (g) Risk Disclosure Policy and any other document(s) (as amended from time to time) that may apply to our entire trading relationship with PM Financials Ltd;
2. To have received, read, and understood the product information material relating to the relevant products;
3. To have understood that the trading service provided by PM Financials Ltd carries a high level of risk and can result in losses that exceed the balance of cash held on our account at any time.

Signature:	Date:
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For and behalf of:

Signature:

Name of Director:	Date:
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14. Annexure A**Required Documentation;**

The following **certified true copy documents** must accompany PM Financials Ltd Corporate Application Form:

1. Memorandum and Articles of Incorporation;
2. Certificate of Incorporation;
3. Proof of address of the Corporate Investor, e.g., bank statement / utility bill;
4. Original Certificate of Good Standing;
5. Board of Directors' Resolution (such board resolution confirming the investment & acceptance of Prospectus terms);
6. Register of Director;
7. Register of Shareholder;
8. Register of Authorised signatories. (Please provide a board resolution confirming the appointment of authorised signatories on behalf of the Corporate Investor.)
9. All Director, authorised signatories & All beneficial Owners of 10% or more to provide documents as listed below:

a) Proof of Identification;

1. Valid Passport (identification and signature page required); or
2. Valid Driver's License; or
3. Valid National Identity Card.

b) Proof of address;

This acceptable document must be recent (less than 3 months old), valid showing client's full name and current residential address.

Types of acceptable documents;

1. Utility bills; or
2. Fixed line telephone bills; or
3. Bank statement; or
4. Tenancy contract; or
5. Local authority tax declaration/bill.

- Please be aware that the same document cannot be used as proof of identity and proof of address. Two separate documents must be provided.
- PM Financials Ltd reserves the right to request for additional Enhance Due Diligence.

15. Annexure B**Sample Board Resolution**

I/We (Name): _____ / _____ / _____

Director of (Name of Company): _____ (the "Company) certify that the following resolutions were duly passed by the Directors of the Company at a meeting held on

Date: _____.

IT WAS RESOLVED AS FOLLOWS:

1. That account(s) (the 'Account(s)') be opened with PM Financials Ltd in the name of the Company for the purpose of entering into Contracts for Differences (CFDs) and any transactions related or ancillary to any of the contracts.
2. That a Corporate Client agreement be entered into with PM Financials Ltd in connection with the opening of the Corporate Account(s) and that all transactions entered by the Company will be subject to the terms of the Corporate Client Agreement as amended from time to time.
3. That each of the persons whose names appear in the Corporate Application Form as the 'Authorised Signatories' shall be and are hereby jointly and severally authorised to sign any document in connection with the opening or operation of the Account(s), and to give any oral or written instructions to PM Financials Ltd with respect to the Account(s) including (but without limitation) instructions to effect or otherwise enter into transactions with or on behalf of the Company.
4. That any transactions of any description whatsoever previously entered into by the Company with or through PM Financials Ltd be and are hereby ratified and approved.
5. That these Resolutions be communicated to PM Financials Ltd and shall remain in force and that PM Financials Ltd shall be entitled to rely on the same until an amending resolution shall be passed and a copy certified by an officer of the Company shall have been received by PM Financials Ltd.

I/We further certify that there is no legal or other reason why the Company should not conduct this business.

Signature of Director(s):

Date: