

01 Limited

Customer Account Information Form

Please complete all details in CAPITAL letters and Tick the appropriate box. Please fill all names correctly. All communication shall be sent only to the First Named Account Holder's correspondence address

Type of Account	Category of Account	Type of Client
<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Margin	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> ITS	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Joint Holder <input type="checkbox"/> Company

1. First Applicant

Name of Account Holder : MR. MD. KAISER RAIHAN
Father's / Husband's Name :MD. GOLAM RABBANI
Mother's Name : MORSHEDA BEGUM
Present/Contact Address : HOUSE- 11, ROAD -1, LANE- 3, BLOCK- H, HALISHAHAR
Permanent Address :ABDUL KADER MISTIRIR BARI, WEST MITHANALA, MIRSHARAI
Date of Birth (DD/MM/YYYY) : 01/04/1995 Sex : MALE
Nationality :BANGLADESH Occupation(30Characters): SERVICE
ID Type : NID Telephone : 01810031212
NID: 6435912511

Officer/Director of any Stock Exchange/Listed Company : No
If yes, Name of the Stock Exchange/Listed Company :

6.Joint Applicant (Second Account Holder)

Name of Account Holder :
Father's / Husband's Name :
Mother's Name :
Present/Contact Address :
Permanent Address :
Date of Birth (DD/MM/YYYY) : Sex :
Nationality : Telephone :
Occupation:

Officer/Director of any Stock Exchange/Listed Company : No
If yes, Name of the Stock Exchange/Listed Company :

Authorized Person, if applicable

Name :
Address:
Date of Birth (DD/MM/YYYY):
Special instruction, if any :

Mode of Operation

☒ Either or Survivor ☐ Any one Can operate ☐ Any two will operate jointly ☐ Anyone of the Others

Bank Details

Bank Name:THE CITY BANK LTD. Branch Name :HALISHAHAR Account No:2401764438001

Introducer

Introducer's Name : MOHAMMED KAMRUL ISLAM

Account ID: 1204150073952838

Address : HOSSAIN PARK STREET, FLAT - A1, B1, HOUSE NO - 93, EAST NASIRABAD CHITTAGONG.

Internal Ref. No. : 28



.....
(Signature of Introducer)

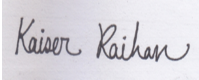
11. Photograph



Others Information

Internal Ref. No (To be filled in by CDBL Participant): 28

Signature

Applicants	Name of applicants / Authorized signatories in case of ltd Co.	Signature with Date	
First Applicant	MD. KAISER RAIHAN		
Second Applicant			

Signature of the Member/Member's Partner/Director/Officer/Manager accepting the account



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Terms & Conditions

"BROKER" means 01 LIMITED

"SELLER" means the person or persons or company who intends to buy securities for him/her/their through the BROKER.

"Securities Account" means the account opened by the SELLER/BUYER with the BROKER to sell/buy securities.

"Settlement day" means the days declared by the Stock Exchange. On which transactions carried out by the BROKER on behalf of the SELLER/BUYER at the Stock Exchange are settled/cleared with the stock exchange.

"CDBL" means Central Depository Bangladesh Limited incorporated on 20th August 2000 in Bangladesh. Under Central Depository Act.

SALE ORDER

The SELLER shall deliver to the Broker valid and negotiable documents, i.e.' transfers documents duly completed and signed by the SELLER together with relative securities certificates with valid title, prior to the placing a sale order.

If for any reason whatsoever securities documents delivered by the SELLER turns out to be forged, invalid, worn out, torn or defaced, the defaulting SELLER shall be liable to his BROKER for any loss or damage sustained or incurred. The defaulting SELLER shall be liable to replace such securities along with all benefits attributable to such securities within two days of reporting to the SELLER by the BROKER. If for any reason the defaulting SELLER fails to replace such securities along with the benefits attributable to such securities within two days of reporting in writing to the SELLER by the BROKER, the BROKER shall have the absolute discretion, to square-up the transaction commencing from the market day after the stipulated period (as above) at the SELLER risk and the SELLER shall be liable to the BROKER to any loss or damage sustained or incurred.

PAYMENT TO SELLER

The BROKER shall make payment to the SELLER on the settlement day, subject to the over all case balance of the SELLER'S "Securities Account".

PURCHASE ORDER

The BUYER shall pay his BROKER total value of the PURCHASE order in the BUYER'S Securities Account" prior to the placing a PURCHASE order.

PAYMENT BY ORDER

The BUYER shall pay his BROER on or before the settlement day balance amount (if any), including charges of all securities purchased by him during the period of dealing for that settlement. If the BUYER defaults for whatever reason, he shall be liable to his BROKER for all loss or damage sustained or incurred. In addition to adjust the outstanding amount the buying BROKER shall have the absolute discretion, to the buying for any loss or damage sustained or incurred.

SETTLEMENT THROUGH CDBL

If the CDBL is involved in the settlement process, client should follow the under mention rules Client must maintain a Beneficiary owner account with any depository participant, and client must inform the broker his B.O. account no with authentic document.

Before place any sell order client must transfer his shares from his B.O. account to broker clearing account with related instruction. Client will pay the charges or CDBL. If necessary to transfer the shares from client B.O. account to broker clearing account and clearing account to B.O. account

GOVERNING LAW

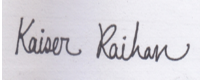
All the transactions shall be subjected to the Rules and Regulations of the Securities and Exchange Commotion / Dhaka Stock Exchange Ltd./ Chittagong Stock Exchange Ltd. And other prevailing law and regulations of Bangladesh and in particular the authority herein after granted by the client to the BROKER.

AUTHORITY TO THE BROKER


Broker reserves the absolute right for sale/buy/make/adjustment/transfer for any Securities at Client's risk in order to set off all losses damages and debit amount/shares/securities of the "Client Account"

Client shall be bound to pay % (in word the rate of Brokerages charges) charges as brokerage to broker for buy and sell and broker can change time to time. Client shall be bound to furnish such other particulars, documents and/ or information that may reasonable required from time to time.

Broker shall have the right to change/modify any terms and conditions when may deem necessary without any notice to the client. We hereby accept your above terms and conditions and we declare that the information given is true and correct.

Applicants	Name of applicants / Authorized signatories in case of ltd Co.	Signature with Date
First Applicant	MD. KAISER RAIHAN	
Second Applicant		

Witnesses	Name & Address of Witnesses	Signature with Date
Witness 1		
Witness 2		

For Office Use Only	Name	Signature with Date
Introduced By	MOHAMMED KAMRUL ISLAM	
Approved By		

28

Internal Ref. No. : 28

DEED OF AGREEMENT FOR MARGIN ACCOUNT

Under Margin Rules 1999

THIS AGREEMENT is made on the day of

BETWEEN

01 LIMITED private limited company incorporated in Bangladesh under the laws of Bangladesh registrar of joint stock companies and Firms & Chittagong Stock Exchange Ltd.(Member # 027), doing business as stock dealer/ stock broker under stock dealer/ stock broker registration# issued by Securities Exchange Commission (SEC). Having its office at C&F TOWER , 9th floor, 1222 SK Mujib Road, Agrabad, Chittagong. Hereafter referred to as the Broker of the ONE PART.

TERMS AND CONDITIONS

DEFINITIONS

"SECURITIES ACCOUNT" shall mean the account opened by the CLIENT with the BROKER to deposit/sell/buy securities with the Broker.

"APPROVER SECURITIES" shall mean the securities purchased into the SECURITIES ACCOUNT.

"PORTFOLIO VALUE" means total market value of all the stocks in the SECURITIES ACCOUNT.

"MARGIN CALL" shall mean to request the "CLIENT" to deposit money or share or bring the Debit balance below 50% of the portfolio value within 24 hours.

"DEBIT BALANCE" shall mean the total value of cash owed by the CLIENT together with any interest to the BROKER in the SECURITIES ACCOUNT for securities purchased into the account.

TERMS AND CONDITIONS

1. This will strictly be a short-term facility and valid up to---

2. The "broker" will have absolute discretion to accept or decline any security, against which credit facility is granted and shall reserve the right to make changes their list of "approved securities" at any given moment.

3. using the credit facility the client may purchase quoted securities through the Broker in to the "Securities Account" to a maximum value of 50% of the "portfolio value" or Tk. 2,500,000 whichever ever is lower. The client shall at all times be responsible to maintain strictly the maximum limit of the "debit Balance" at any given time>

If debit balance goes above 60% of portfolio value due to fluctuation in the market or any other event will issue a "Margin Call" to the client margin call could be writing or via telephone call.

4. In the case of "Broker" omitting a particular security/ securities from the list of "approved securities" the client shall accordingly adjust the "portfolio value" or the "Debit Balance" within two market days.

5. If client does not response to Margin call, in that case sell out whatever shares as the Broker see fit to regularize the "Debit Balance" to 50% of the portfolio value." +/-5% deviation is accepted in case of adjustment.)

6. If the "Debit Balance" reach to 65% of portfolio value due to a sudden fall in the market or any other event then in such a case without any notice in that trading day or next day, will sell out shares of any company what so ever as it sees fit to make the Debit Balance nil. Any residual shares will remain in the account and will be available to client.

7. If the client exceeds the value of the "Debit Balance" above the stipulated limit and/ or violates any other terms and conditions/rules/ requirements as laid down by the "Broker" or any regulatory authority from time to time the Broker shall have absolute discretion at the "Client's" risk to sell/buy any or all shares or securities of any company whatsoever in the Client's Securities Account without any consent of any form from the Client order to adjust the Debit Balance or Securities Account . In the event the portfolio value of the "Securities Account" becomes inadequate to realize the "Debit Balance" the Client shall be under obligation to make cash payment to settle any shortfall.

8. The Client shall pay brokerage commission for all transaction i.e. buy and sell , in the "Securities Account". The Client shall also pay brokerage commission for all transactions carried out in order to regularize the "Securities Account". Rate of brokerage will be fixed by the Broker and can change from time to time.

9. In the "Securities Account" if client enjoy margin facilities, in that case, highest limit to buy a single is Tk. 1,000,000.00 or 40% of the portfolio value which ever is lower.

10. "Broker" shall have the authority to give notice to the client to adjust the debit balance in "Securities Account" within 20 trading days for what ever reason which "Broker" reserve the right to divulge to client. If client doesn't respond to such notice "Broker" shall have absolute discretion at the client's risk to sell/buy any or all shares or securities in any company whatsoever in the Clients "Securities Account" without any consent of the "Securities Account"

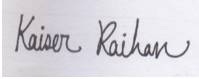
11. "Broker" will charge---% P.A. interest on the clients account for any debit amount, calculated on the daily basis. 01 Limited reserve the right to increase/decrease the interest rate by giving 7 trading days notice to client.

12. The "Securities Account" will be fully operated (All Buy/Sell decisions) by the client at all times other than in the instance of "Broker" regularizing the account which is explain in the clause 5,6,7,10.


13. The "Broker" shall have the right to change, rectify, include any terms and conditions in addition to the above at any time with due notice to the client.

NOMINEE

In the event of the death of one of the joint account holder, the survivor: and on the death of the sole account holder the nominee or successor shall be the beneficiary of the transactions.

Applicants	Name of applicants / Authorized signatories in case of ltd Co.	Signature with Date	
First Applicant	MD. KAISER RAIHAN		
Second Applicant			
Third Signatory (Ltd Co. only)			

Witnesses	Name & Address of Witnesses	Signature with Date
Witness 1		
Witness 2		

For Office Use Only	Name	Signature with Date
Introduced By	MOHAMMED KAMRUL ISLAM	
Approved By		

28

Internal Ref. No. : 28

01 LIMITED

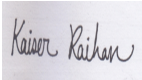
Golden Plaza (5th Floor), 1692 CDA Avenue, GEC Circle, Chittagong, Bangladesh
Contact No.: +88 096 7878 1212,+88 018 1003 1200 Email : support@01.Limited

Schedule of Charges

01 ID Creation	Free
BO Opening Fee (One time Only)	Tk. 500
Brokerage Fee	0.40 % on Trade Amount (Minimum Brokerage Tk 5 only)
Annual BO Maintenance Fee	Tk. 450 (At Actual as per CDBL)
Annual Service Charge	Tk. 100 (To be charged on January)
Share Transfer (Transmission)	Tk. 200
CDBL Fee / Custodian Fee	Free
BO Account Closing Fee	Tk. 200

I agree with the above charges.

Internal Ref. ID.:28



MD. KAISER RAIHAN

BO Account Opening Form
(Bye Law 7.3.3 (b))

Please complete all details in CAPITAL letters. Please fill all names correctly. All communication shall be sent only to the First Named Account Holder's correspondence address.

Application No :

Date (DD/MM/YYYY) :

Please Tick whichever is applicable

BO Category: ☒ Regular ☐ Omnibus ☐ Clearing **BO Type:** ☒ Individual ☐ Joint Holder ☐ Company

Name of CDBL Participant (Up to 99 Characters) :

CDBL Participant ID	BO ID	Date Account Opened (DD/MM/YYYY)
41800	1 2 0 4 1 5 0 0 7 3 9 3 8 7 0 7	18/08/2021

I / We request you to open a Depository Account in my / our name as per the following details:

1. First Applicant

Name in Full of Account Holder (Up to 99 Characters) : MD. KAISER RAIHAN

Short Name of Account Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e. Mr. /Mrs. /Ms. /Dr.

M R . M D . K A I S E R R A I H A N

M R .

(In case of a Company/Firm/Statutory Body) Name of Contact Person :

Occupation (30Characters) : SERVICE

Father's / Husband's Name :MD. GOLAM RABBANI

Mother's Name :MORSHEDA BEGUM

2. Contact Details:

Address: HOUSE- 11, ROAD -1, LANE- 3, BLOCK- H, HALISHAHAR

City: CHITTAGONG. Post Code: 4214 State / Division : CHITTAGONG Country : BANGLADESH Telephone :01810031212

Mobile Phone: 01810031212 Fax : E-mail : rahikaiser@live.com

3. Passport Details:

Passport No : . Issuing Authority : Issue Date : Expiry :

4. Bank Details:

Bank Name : THE CITY BANK LTD. Branch Name :HALISHAHAR Account No. : 2401764438001

Electronic Dividend Credit: ☒ Yes ☐ No Tax Exemption if any: ☒ Yes ☐ No TIN / Tax ID : 894420392534

5. Others Information:

Residency: ☒ Resident ☐ Non Resident Nationality : BANGLADESH Date of Birth (DD/MM/YYYY) : 01/04/1995

Statement Cycle Code : ☒ Daily ☐ Weekly ☐ Fortnightly ☐ No ☐ Other (Please Specify)

Internal Ref. No (To be filled in by CDBL Participant) : 28

National ID Card Number :6435912511

In Case of Company:

Registration No : Date of Registration (DD/MM/YYYY) :

6. Joint Applicant (Second Account Holder):

Name in Full (Up to 99 Characters) :

Short Name of Account Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e. Mr. /Mrs. /Ms. /Dr.

7. Account Link Request:

Would you like to create a link to your existing Depository Account ? : ☒ Yes ☐ No

If yes, then please provide the Depository BO Account Code (8 Digits):

8. Nominees/ Heirs:

If account holder(s) wish to nominate person(s) who will be entitled to receive securities outstanding in the account in the event of the death of the sole account holder / all the joint account holders, a separate nomination Form - 23 must be filled up and signed by all account holders and the nominees giving names of nominees , relationship with first account holder, percentage distribution and contact details. If any nominee is a minor, guardian's name, address, relationship with nominee has also to be provided.

9. Power of Attorney (POA)

If account holder(s) wish to give a Power of Attorney (POA) to someone to operate the account, a separate Form - 20 must be filled up and signed by all account holders giving the name, contact details etc. of the POA holder and a POA document lodged with the form.

10. To be filled in by the Stock Broker / Stock Exchange in case the application is for opening a Clearing Account

Exchange Name : ☐ DSE Trading ID ☒ CSE Trading ID

11. Photograph



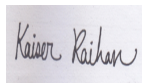
12. Standing Instructions

I/We authorize you to receive facsimile (fax) transfer instructions for delivery.

☐ Yes☐ No

13. DECLARATION

The rules and regulations of the Depository and CDBL Participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/We also declare that the particulars given by me/us are true to the best of my/our knowledge as on the date of making such application. I/We further agree that any false/misleading information given by me/us or suppression of any material fact will render my/our account liable for termination and further action.

Applicants	Name of applicants / Authorized signatories in case of Ltd Co.	Signature with Date	
First Applicant	MD. KAISER RAIHAN		
Second Applicant			
Third Signatory (Ltd Co. only)			

14. Special Instructions on operation of Joint Account

☒ EITHER OR SURVIVOR ☐ ANYONE CAN OPERATE ☐ ANY TWO WILL OPERATE ☐ ACCOUNT WILL BE OPERATE BY ANYONE OF THE OTHERS

15. Introduction

Introduction by an existing account holder of 01 Limited
I confirm the identity, occupation and address of the applicant(s) :

MR. MD. KAISER RAIHAN


Introducer's Name : MOHAMMED KAMRUL ISLAM

Account ID : 1204150073952838

(Signature of Introducer):

Internal Ref. No. : 28

Please complete all details in CAPITAL letters. Please fill all names correctly. All communications shall be sent to the correspondence address of only the First Named Account Holder as specified in BO Account Opening Form -02.

Application No :

Date (DD/MM/YYYY) :

Name of CDBL Participant (Up to 99 Characters): 01 Limited

Account holder's BO ID : 1 2 0 4 1 5 0 0 7 3 9 3 8 7 0 7

CDBL Participant ID : 4 1 8 0 0

Short Name of Account Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters) : Title i.e. Mr. /Mrs. /Ms. /Dr.

M R . M D . K A I S E R R A I H A N

M R .

Power of Attorney Holder's Details

Name in Full :

Short Name of Power of Attorney Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters) : Title i.e. Mr. /Mrs. /Ms. /Dr.

1. Power of Attorney Holder's Contact Details:

Address :

City : Post Code: State / Division : CHITTAGONG Country : BANGLADESH

Mobile Phone : Fax: E-mail : Telephone :

2. Power of Attorney Holder's Passport Details:

Passport No : Issue Date: Issue Place: Expiry:

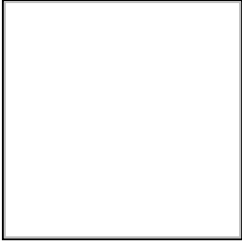
3. Others Information of Power of Attorney Holder:

Residency : ☒ Resident ☐ Non Resident Nationality :BANGLADESH Date of Birth (DD/MM/YYYY) :

Power of Attorney Effective From : 08/03/2021 To

Remarks (Insert reference to POA document i.e. Specific POA or General POA etc.)

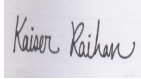
4. Photograph of Power of Attorney Holder



5. DECLARATION

CDBL Bye Laws

The rules and regulations of the Depository and CDBL Participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/We also declare that the particulars given by me/us are true to the best of my/our knowledge as on the date of making such application. I/We further agree that any false/misleading information given by me/us or suppression of any material fact will render my/our account liable for termination and further action.

Applicants	Name of applicants / Authorized signatories in case of Ltd Co.	Signature with Date	
POA Holder			
First Applicant	MR. MD. KAISER RAIHAN		
Second Applicant			
Third Signatory (Ltd Co.only)			

28

Internal Ref. No. : 28

Central Depository Bangladesh Limited (CDBL)
Depository Account (BO Account) opened with CDBL Participant
Terms & Conditions – Bye Laws 7.3.3(c)

01 Limited
 Golden Plaza (5th Floor), 1692 CDA Avenue, GEC Circle,
 Chittagong, Bangladesh, Bangladesh

Dear Sir,

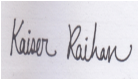
Please open a Depository account (BO Account) in my/our names(s) on the terms and conditions set out below. In consideration of **01 Limited** (the “CDBL Participant”) opening the account providing depository account facilities to me/us, I/we have signed the BO Account Opening Form as a token of acceptance of the terms and conditions set out below.

1. I/we agree to be bound by The Depositories Act, 1999, Depositories Regulations, 2000, The Depository (User) Regulations 2003, and abide by the Bye Laws and Operating Instructions issued from time to time by CDBL.
2. CDBL shall allocate a unique identification number to me/us (Account Holder BO ID) for the CDBL Participant to maintain a separate Account for me/us, unless the I/we instructs the CDBL Participant to keep the securities in an Omnibus Account of the CDBL Participant. The CDBL Participant shall however ensure that my/our securities shall not be mixed with the CDBL Participant's own securities.
3. I/we agree to pay such fees, charges and deposits to the CDBL Participant, as may be mutually agreed upon, for the purpose of opening and maintaining my/our account, for carrying out the instructions and for rendering such other services as are incidental or consequential to my/our holding securities in and transacting through the said depository account with the CDBL Participant.
4. I/we shall be responsible for: (a) The veracity of all statements and particulars set out in the account opening form, supporting or accompanying documents; (b) The authenticity and genuineness of all certificates and/or documents submitted to the CDBL Participant along with or in support of the account opening form or subsequently for dematerialization; (c) Title to the securities submitted to the CDBL Participant from time to time for dematerialization; (d) Ensuring at all times that the securities to the credit of my/our account are sufficient to meet the instructions issued to the CDBL Participant for effecting any transaction / transfer; (e) Informing the CDBL Participant at the earliest of any changes in my/our account particulars such as address, bank details, status, authorizations, mandates, nomination, signature, etc.; (f) Furnishing accurate identification details whilst subscribing to any issue of securities.
5. I/we shall notify the CDBL Participant of any change in the particulars set out in the application form submitted to the CDBL Participant at the time of opening the account or furnished to the CDBL Participant from time to time at the earliest. The CDBL Participant shall not be liable or responsible for any loss that may be caused to me/us by reason of my/our failure to intimate such change to the CDBL Participant at the earliest.
6. Where I/we have executed a BO Account Nomination Form a) In the event of my/our death, the nominee shall receive/draw the securities held in my/our account b) In the event, the nominee so authorised remains a minor at the time of my/our death, the legal guardian is authorised to receive/draw the securities held in my/our account. c) The nominee so authorised, shall be entitled to all my/our account to the exclusion of all other persons i.e., my/our heirs, executors and administrators and all other persons claiming through or under me/us and delivery of securities to the nominee in pursuance of this authority shall be binding on all other persons.
7. I/we may at any time call upon the CDBL Participant to close my/our account with the CDBL Participant provided no instructions remain pending or unexecuted and no fees or charges remain payable by me/us to the CDBL Participant. In such event I/we may close my/our account by executing the Account Closing Form if no balances are standing to my/our credit in the account. In case any balances of securities exist in the account the account may be closed by me/us in one of the following ways: (a) By rematerialization of all existing balances in my/our account; Internal Ref. No. : 79553 (b) By transfer of all existing balances in my/our account to one or more of my/our other account(s) held with any other CDBL Participant(s); (c) By rematerialization of a part of the existing balances in my/our account and by transferring the rest to one or more of my /our other account(s) with any other CDBL Participant(s);

8. CDBL Participant covenants that it shall a) act only on the instructions or mandate of the Account Holder or that of such person(s) as may have been duly authorized by the Account Holder in that behalf . b) not effect any debit or credit to and from the account of the Account Holder without appropriate instructions from the Account Holder. c) maintain adequate audit trail of the execution of the instructions of the Account Holder. d) not honour or act upon any instructions for effecting any debit to the account of the Account Holder in respect of any securities unless: (i) Such instructions are issued by the Account Holder under his signature or that of his/its constituted attorney duly authorized in that behalf; (ii) The CDBL Participant is satisfied that the signature of the Account Holder under which instructions are issued matches with the specimen of the Account Holder or his / its constituted attorney available on the records of the CDBL Participant; (iii) The balance of clear securities available in the Account Holder's account are sufficient to honour the Account Holder's instructions. e) furnish to the Account Holder a statement of account at the end of every month if there has been even a single entry or transaction during that month, and in any event once at the end of each financial year. The CDBL Participant shall furnish such statements at such shorter periods as may be required by the Account Holder on payment of such charges by the Account Holder as may be specified by the CDBL Participant. The Account Holder shall scrutinize every statement of account received from the CDBL Participant for the accuracy and veracity thereof and shall promptly bring to the notice of the CDBL Participant any mistakes, inaccuracies or discrepancies in such statements. f) promptly attend to all grievances / complaints of the Account Holder and shall resolve all such grievances / complaints as it relate to matters exclusively within the domain of the CDBL Participant within one month of the same being brought to the notice of the CDBL Participant and shall forthwith forward to and follow up with CDBL all other grievances / complaints of the Account Holder on the same being brought to the notice of the CDBL Participant and shall endeavour to resolve the same at the earliest.

9. The CDBL Participant shall be entitled to terminate the account relationship in the event of the Account Holder: (a) Failing to pay the fees or charges as may be mutually agreed upon within a period of one month from the date of demand made in that behalf; (b) Submitting for dematerialization any certificates or other documents of title which are forged, fabricated, counterfeit or stolen or have been obtained by forgery or the transfer whereof is restrained or prohibited by any direction, order or decree of any court or the Securities and Exchange Commission; (c) Commits or participates in any fraud or other act of moral turpitude in his / its dealings with the CDBL Participant; (d) Otherwise misconducts himself in any manner.

10. Declaration and Signature I/we hereby acknowledge that I/we have read and understood the aforesaid terms and conditions for operating Depository Account (BO Account) with CDBL Participant and agree to comply with them.

Applicants	Name of applicants / Authorized signatories in case of Ltd Co.	Signature with Date	
First Applicant	MD. KAISER RAIHAN		
Second Applicant			
Third Signatory (Ltd Co. only)			

BO Account Nomination Form

Please complete all details in CAPITAL letters. Please fill all names correctly. All communications shall be sent to the correspondence address of only the First Named Account Holder as specified in BO Account Opening Form -02.

Application No :

Date (DD/MM/YYYY) :

Name of CDBL Participant (Up to 99 Characters) :

Account holder's BO ID: 1 2 0 4 1 5 0 0 7 3 9 3 8 7 0 7

CDBL Participant ID: 4 1 8 0 0

Short Name of Account Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

M R . M D . K A I S E R R A I H A N

I / We nominate the following person(s) who is/are entitled to receive securities outstanding in my/our account in the event of the death of the sole holder / all the joint holders.

1. Nominee / Heirs Details**Nominee 1**

Name in Full: MORSHEDA BEGUM

Short Name of Nominee (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e. Mr. /Mrs. /Ms. /Dr.

M O R S H E D A B E G U M

Relationship with A/C Holder: MOTHER

Percentage (%) ...100...

Address: HOUSE- 11, ROAD -1, LANE- 3, BLOCK- H, HALISHAHAR

City: CHITTAGONG Post Code: 4214 State / Division: CHITTAGONG Country: BANGLADESH Telephone:

Mobile Phone: 01734248294 Fax: E-mail:

Passport No: Issue Place: Issue Date: Expiry:

Residency: ☒ Resident ☐ Non Resident Nationality: BANGLADESH Date of Birth (DD/MM/YYYY): 15/01/1975**Guardian's Details (if Nominee is a Minor)**

Name in Full:

Short Name of Power of Attorney Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e. Mr. /Mrs. /Ms. /Dr.

Relationship with Nominee: Date of Birth of Minor (DD/MM/YYYY): Maturity date of Minor (DD/MM/YYYY):

Address:

City: SELECT Post Code: State / Division: SELECT Country: BANGLADESH Telephone:

Mobile Phone: Fax: E-mail:

Passport No: Issue Place: Issue Date: Expiry:

Residency: ☒ Resident ☐ Non Resident Nationality: Date of Birth (DD/MM/YYYY):

Nominee 2

Name in Full:

Name of Nominee (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e. Mr. /Mrs. /Ms. /Dr.

Relationship with A/C Holder:

Percentage (%) :.....

Address:

City: SELECT Post Code: State / Division: CHITTAGONG Country: BANGLADESH Telephone:

Mobile Phone: Fax: E-mail:

Passport No: Issue Place: Issue Date: Expiry:

Residency: ☒ Resident ☐ Non Resident Nationality: BANGLADESH Date of Birth (DD/MM/YYYY):**Guardian's Details (if Nominee is a Minor)**

Name in Full:

Short Name of Power of Attorney Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e. Mr. /Mrs. /Ms. /Dr.

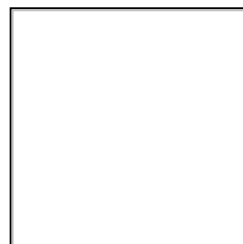
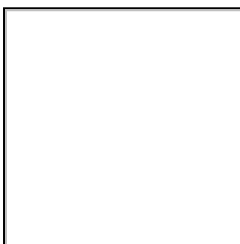
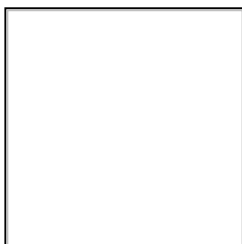
Relationship with Nominee: Date of Birth of Minor (DD/MM/YYYY): Maturity date of Minor (DD/MM/YYYY)

Address:

City: SELECT Post Code: State / Division: SELECT Country: BANGLADESH Telephone:

Mobile Phone: Fax: E-mail:

Passport No: Issue Place: Issue Date: Expiry:

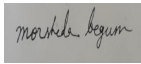
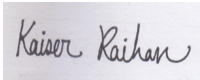
Residency: ☐ Resident ☐ Non Resident Nationality: Date of Birth (DD/MM/YYYY):**2. Photograph of Nominees / Heirs**

Nominee/Heir 1

Nominee/Heir 2

Guardian 1

Guardian 2

Applicants	Name	Signature with Date	
Nominee / Heir 1	MORSHEDA BEGUM		
Guardian 1			
Nominee / Heir 2			
Guardian 2			
First Account Holder	MD. KAISER RAIHAN		
Second Account Holder			

KNOW YOUR CLIENT (KYC) FORM

(Under FORM-II)

(Filled by the Stock Broker)

For Individuals

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**.**A. IDENTITY DETAILS**

1. Name of the Account Holder(s): MD. KAISER RAIHAN
2. B.O Account Number: 1204150073938707
3. Customer Account Number: 28
4. Father's/ Spouse Name: MD. GOLAM RABBANI
5. a. Gender: MALE b. Marital status: Single c. Date of birth: 01/04/1995
- 6 a. Nationality: BANGLADESH b. Status: RB
7. a. TIN: 894420392534 b. NID/PASSPORT/DRIVING LICENSE/BIRTH CERTIFICATE: NID
8. a. Specify the proof of Identity submitted: NID
9. Visa/Residential Permit and Work Permit _____

B. ADDRESS DETAILS

1. Address for correspondence:
HOUSE- 11, ROAD -1, LANE- 3, BLOCK- H, HALISHAHAR
- House/Road: 00 Post Code: 4214 City: CHITTAGONG Country: BANGLADESH
2. Contact: Tel. (Off.) _____ Tel. (Res.) _____ Mobile No.: 01810031212 Email: rahikaiser@live.com
3. Specify the proof of address submitted for correspondence address NID
4. Permanent Address (if different from above or overseas address, mandatory for Non-Resident Applicant)
ABDUL KADER MISTIRIR BARI, WEST MITHANALA, MIRSHARAI
5. Specify the proof of address submitted for permanent address NID

C. OTHER DETAILS

1. Gross Annual Income Details (please specify): Income Range per annum: Below Tk 1 Lac / 1-5 Lac / 5-10 Lac / 10-25 Lac / >25 Lacs: 5-10 Lac or _____
- Net-worth as on (date) _____ (_____) (Net worth should not be older than 1 year)
2. Occupation (please tick any one and give brief details): Private Sector/ Public Sector/ Government Service/Business/Professional/ Agriculturist/ Retired/ Housewife/ Student/ Others: SERVICE
3. Please tick, if applicable: Politically Exposed Person (PEP)/ Related to a Politically Exposed Person (PEP)
4. Any other information: _____
5. Name of MD/CEO (in Case of Company or Institution or Firm): _____
6. Nature of Business (in Case of Company or Institution or Firm): _____
- Describe in detailed as to whether the account holder (the individual/institution/company) is a director/sponsor of a listed company or he/it is a politically exposed person (PEP)/Influential Person/Member of Senior Management of an International Organization
- Source of Fund: _____
- Approximate amount of Daily/Monthly/Annual Transactions: Daily
- Describe in detailed, how source of fund was verified: _____

SI	Nature of Documents	Photocopy Obtained	Number	Applicable For
1	National ID	Yes	6435912511	Individual (if any)
2	Passport	No		Individual (if any) or NRB or NR or Foreigner
3	Visa/Residential Permit and Work Permit	No		NRB or NR or Foreigner
4	Birth Certificate	No		Individual (if any)
5	Driving License	No		Individual (if any)
6	Bank Account with supporting document	Yes	2401764438001	Individual or NRB or NR or Foreigner
7	NID/Birth Certificate/Passport	Yes	8205550752	Nominee
8	NID/Birth Certificate/Passport	No		Authorized Person
9	Registration Certificate	No		Firm/Company/Institution
10	Date Of Incorporation	No		Firm/Company/Institution
11	Memorandum Of Association	No		Company/Institution
12	Articles Of Association	No		Company/Institution
13	Trade License	No		Firm/Company/Institution
14	Tin	No		Firm/Company/Institution
15	VAT Registration	No		Firm/Company/Institution
16	Particular Of Directors	No		Company/Institution

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Date: 26/06/2022

Kaiser Raihan

Signature of the Applicant

FOR OFFICE USE ONLY

dm

Signature of Account Opening Officer with date & Seal
Date: 07/Dec/2021



dm

Signature of Authorized Officer/MD/CEO with date
Date: 07/Dec/2021



When was the information related to the Account last reviewed and updated? If any, details with comments:

Signature of the Officer performing review and update, with date
Date: 26/06/2022