

Professional Individuals

Instructions for completion

Before completing the form, please ensure you have read and understood all information regarding your ADS Securities LLC (ADSS) trading account, including the Terms of Business (which includes additional information such as a risk disclosure statement on complex products) and any other terms and conditions provided to you with this form.

PLEASE COMPLETE ALL SECTIONS IN ENGLISH WITH AS MUCH INFORMATION AS POSSIBLE IN BLOCK CAPITALS. USE BLACK OR BLUE INK.

1. Identity documents

In order to comply with anti-money laundering regulations ADSS is required by law and regulation to obtain the documentation set out below. ADSS reserves the right to request further documentation at any time during the approval process. To obtain the most up-to-date requirements applicable to you please contact us. In each case original documents should be provided or, where this is not possible, certified true copies of the original documents, authenticated by an attorney/lawyer, chartered accountant or at your local police station by an authorised official.

- Proof of identity
- Proof of residential address
- Proof of identity and residential address of each beneficial owner of assets deposited by the client

Please note that all parties listed on the application form need to provide the above identity documents.

2. Client classification & client objectives

Client classification

ADSS has elected to categorise clients in accordance with internationally recognised standards. ADSS has a policy of only transacting with clients whom ADSS considers in their sole discretion would be deemed to be Professional Clients pursuant to internationally recognised standards. ADSS shall be entitled to request further information in order to determine whether you are a Professional Client.

In order for ADSS to treat you as a Professional Client and provide you with services, please tick the relevant boxes indicating you can satisfy two of the following three criteria to comply with internationally recognised regulations:

Applicant 1	Applicant 2	Requirement
<input type="checkbox"/>	<input type="checkbox"/>	You have carried out transactions of significant size, on the relevant market at an average frequency of 10 per quarter over the previous 4 quarters
<input type="checkbox"/>	<input type="checkbox"/>	The size of your financial instrument portfolio, including cash deposits and financial instruments, exceeds US\$ 700,000
<input type="checkbox"/>	<input type="checkbox"/>	You work or have worked in the financial sector for at least one year in a professional position, which requires knowledge of the transactions or services envisaged

Client Investment Intention and Experience

In order to comply with international best practice in relation to money laundering regulations, ADSS requires information in relation to the purpose and scope of the client relationship. Please complete the following sections accordingly:

Investments

Please indicate the approximate value of your investment:

Cash deposits US\$	Traded shares US\$
Bonds/trusts US\$	Collective investments funds US\$
Other investments US\$	Property (excluding home) US\$

Sources of Income

Please indicate your annual sources of income:

Ordinary trading income US\$	Rental income US\$
Investment income US\$	Salary US\$
Other (please specify) US\$	

Material Financial Commitments

Annual dividend payments US\$	Annual debt payments US\$
Other (please specify) US\$	

Trading Experience

1. How many trades have you executed in the last years?

2. What is the average size of your transaction?

3. In what capacity have you dealt?

- ☐ Execution only
- ☐ Advisory
- ☐ Managed/discretionary

4. Which banks, brokers or counterparties have you dealt with in the past?

5. What instruments have you traded?

3. Accounts you wish to operate

Please tick the boxes which apply to your application.

Please open a: ☐ Margin or ☐ Investment account in multi currencies to trade the following products:

<input type="checkbox"/> Foreign Exchange (cash)	<input type="checkbox"/> Futures	<input type="checkbox"/> Foreign Exchange Derivatives	<input type="checkbox"/> Commodities
<input type="checkbox"/> CFDs	<input type="checkbox"/> Bonds/Fixed Income	<input type="checkbox"/> Equities	<input type="checkbox"/> Precious Metals
<input type="checkbox"/> Options	<input type="checkbox"/> Other (please specify)		

4. Personal information required

Applicant 1

Title:	First name:	Last name:
Marital Status:	Gender:	National ID number:
Date of birth:	Place of birth:	Country of residence:
Home address:		
P.O. Box:		

Employment Details

Status: Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Self-employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Retired <input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation:	Duration at current employment:	
Employer's name:	Employer's contact tel.no.:	
Nature of business:		
Email:		
Home phone:	Office phone:	Mobile:
Are you a resident of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Applicant 2 (for joint accounts only)

Title:	First name:	Last name:
Marital Status:	Gender:	National ID number:
Date of birth:	Place of birth:	Country of residence:
Home address:		
P.O. Box:		

Employment Details

Status: Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Self-employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Retired <input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation:	Duration at current employment:	
Employer's name:	Employer's contact tel.no.:	
Nature of business:		
Email:		
Home phone:	Office phone:	Mobile:
Are you a resident of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		

5. Beneficial ownership declaration

I/We hereby declare that the client is the beneficial owner of all the assets to be deposited with ADSS and acts in its own name and not on behalf of any third party in respect of all matters related to this client relationship and accordingly all funds to be deposited and traded on account with ADSS are its own funds.

If the client is not able to make this declaration, ADSS may elect not to accept the client as a client of ADSS and/or may request further documentation which may include a beneficial ownership declaration form and supplementary documentation from each beneficial owner.

6. Bank account details and initial deposit

Account name:

Name of bank/building society:

Address of bank/building society:

Bank location, country and city:

Account number:

IBAN or BIC number:

SWIFT/ABA:

How much will the initial deposit with ADS Securities be?

7. Joint applicant

By completing this form, we agree to be jointly and severally liable to ADSS for all obligations and other liabilities incurred by any or all of us in favour of ADSS or any third party, pursuant to this form.

8. Other information

I/We declare by my/our signature:

- that I/we have received, read, understood and agreed to the Terms of Business including, without limitations, the risk disclosure statement on complex products included in the Terms of Business;
- that we consent to having our orders executed and transactions effected, where necessary, outside a Multilateral Trading Facility (as that term is defined in the Markets in Financial Instruments Directive 2004/39/EC) or a regulated market.
- that all information supplied on this form and the accompanying documentation is current and accurate to the best of my/our knowledge and I/we undertake to inform ADSS without delay and in writing should any of the information change; and
- I/we acknowledge that ADSS may communicate with me/us electronically via the email addresses listed in section 4 of this form and may make information such as transaction reporting and account information available to us by electronic means. I/we consent to this means of communication and agree that it constitutes a durable medium as permitted under internationally recognised regulations. I/we confirm that the email addresses provided above in connection with this application are accessible only by persons duly authorised to operate the Client's account with ADSS.

Account holders signature(s)

	Print name	Signature	Date
1.			
2.			