



CORPORATE CLIENT APPLICATION FORM

Before completing this application form, please ensure that you have obtained and read the information regarding the products and services provided by Saxo Capital Markets UK Ltd ("SCML") and all relevant terms and policies made available, and updated from time to time on our website (www.saxomarkets.co.uk). Once completed, this form and any supporting documents should be sent to Saxo Capital Markets UK Ltd at the business address below or alternatively please email a scanned copy to privatesalesuk@saxomarkets.com or fax the completed application to +44 (0) 2071512001

PLEASE COMPLETE THE FORM IN BLOCK LETTERS AND IN BLACK OR BLUE INK. ALL ITEMS MARKED WITH * MUST BE PROVIDED.

Initial list of documents to be provided with this application form:

- Memorandum & Article of Association;
- Certificate of Incorporation;
- Register of Directors;
- Register of Members / Shareholders;
- Latest Financial Statements;
- Group Structure diagram (for entity within a complex group structure only)
- Completed W-8BEN Form

It may be necessary for us to request further documentation and information in order to complete the due diligence process. The form must be signed by at least two directors unless the company has a sole director.

To comply with the Foreign Account Tax Compliance Act (FATCA), Saxo Capital Markets UK Limited is required to obtain a US tax certificate (W-8 or W-9 series as appropriate) from all clients. Without the appropriate tax certificate in place we will not be able to provide an account.

For most clients the W-8BEN-E form will be appropriate however for an overview of all available forms Saxo Capital Markets UK Limited strongly recommends that you visit the IRS website or consult your external tax advisor.

Saxo Capital Markets UK Ltd, 40 Bank Street, Canary Wharf, London E14 5DA, United Kingdom
Company registered in England & Wales No.: 7413871
Authorised and regulated by the Financial Conduct Authority



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ALL ITEMS WITH * MUST BE PROVIDED.

Part 1 | Corporate Details

*Full Corporate Name:

*Registered Office Address:

*Postcode:

*Country:

Business Address (*if different from registered address)

*Postcode:

*Country:

*Is your company regulated by a financial services regulator, such as the Financial Conduct Authority or equivalent?

Legal Entity Identifier (LEI)

In accordance with the European Markets Infrastructure Regulation (EMIR), all corporate entities operating in the EEA entering into derivative transactions are required to have a valid LEI in order to comply with the reporting obligations.

Please tick all criteria that apply to your company?

*Please indicate how many trades the company has undertaken in each of the following products on an execution-only basis during the last 12 months?

Please indicate all sources of funds for the account:

Please state the expected amount of initial funding in the account

*Corporate registration No.:

*Country of incorporation:

*Nature of business:

*Countries of residence for Tax Purposes for the Company:

Do you operate from any place of business in the US?: No ☐ Yes ☐

Please provide VAT No.: (mandatory for companies registered in the EU)

Website address:

*Contact E-mail address:

*Contact telephone No.:

*Is the company listed on a regulated stock exchange?

No ☐ Yes ☐

Name of the exchange:

No ☐ Yes ☐

Name of the regulator:

☐ Balance sheet total of at least EUR 20,000,000 or equivalent

☐ Net turnover of at least EUR 40,000,000 or equivalent

☐ Own funds of at least EUR 2,000,000 or equivalent

☐ The size of the financial instrument portfolio (cash deposits and financial instruments) held by the company exceeds EUR 500,000 or equivalent

PRODUCTS

NO. OF TRADES

FX Rolling Spot:

Options & Futures:

CFDs:

Financial Spread Bets:

Shares:

ETFs & ETCs:

Gilts & Bonds:

☐ Share capital

☐ Trading income

☐ Investment proceeds & income

Others, please detail:

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Please provide details of directors of the company. If there are more than four directors please continue on a separate sheet.

Director 1

Director 2

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Director 3

*Title: Mr Mrs Miss Ms Dr

Other (please specify):

*Full Name:

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Contact No:

*Email address:

*Date of birth: / /

*Country of birth:

*Nationality:

Do you hold multiple nationality? If so please list:

*Which countries are you resident in for tax purposes?
(Please list all)

*UK National Insurance No.:

*US Tax Identification No (TIN):

Tax Identification No. (any non UK/US):

Director 4

*Title: Mr Mrs Miss Ms Dr

Other (please specify):

*Full Name:

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Contact No:

*Email address:

*Date of birth: / /

*Country of birth:

*Nationality:

Do you hold multiple nationality? If so please list:

*Which countries are you resident in for tax purposes?
(Please list all)

*UK National Insurance No.:

*US Tax Identification No (TIN):

Tax Identification No. (any non UK/US):

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Part 3 | Details of Beneficial Owners / Shareholders

(not applicable to publicly listed companies if listed on a recognised exchange)

Please provide details of beneficial owners / shareholders of the company's shares. If there are more than four beneficial owners/shareholders, please continue on a separate sheet.

| | | | | | | | | | |
|--------------------|-------------------------------|----|-----|------|----|----|---|---|---|
| Beneficial Owner 1 | *Title: | Mr | Mrs | Miss | Ms | Dr | *Date of birth: | / | / |
| | Other (please specify): | | | | | | *Country of birth: | | |
| | *Full Name: | | | | | | *Nationality: | | |
| | | | | | | | Do you hold multiple nationality? If so please list: | | |
| | | | | | | | | | |
| | *Occupation: | | | | | | *Which countries are you resident in for tax purposes? (Please list all) | | |
| | *Current residential address: | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | *Postcode: | | | | | | | | |
| Beneficial Owner 2 | *Country: | | | | | | *UK National Insurance No.: | | |
| | *Contact No: | | | | | | *US Tax Identification No (TIN): | | |
| | *Email address: | | | | | | Tax Identification No. (any non UK/US): | | |

| | | | | | | | | | |
|--------------------|-------------------------------|----|-----|------|----|----|---|---|---|
| Beneficial Owner 2 | *Title: | Mr | Mrs | Miss | Ms | Dr | *Date of birth: | / | / |
| | Other (please specify): | | | | | | *Country of birth: | | |
| | *Full Name: | | | | | | *Nationality: | | |
| | | | | | | | Do you hold multiple nationality? If so please list: | | |
| | | | | | | | | | |
| | *Occupation: | | | | | | *Which countries are you resident in for tax purposes? (Please list all) | | |
| | *Current residential address: | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | *Postcode: | | | | | | | | |
| Beneficial Owner 3 | *Country: | | | | | | *UK National Insurance No.: | | |
| | *Contact No: | | | | | | *US Tax Identification No (TIN): | | |
| | *Email address: | | | | | | Tax Identification No. (any non UK/US): | | |

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Beneficial Owner 3

*Title: Mr Mrs Miss Ms Dr

Other (please specify):

*Full Name:

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Contact No:

*Email address:

*Date of birth: / /

*Country of birth:

*Nationality:

Do you hold multiple nationality? If so please list:

*Which countries are you resident in for tax purposes?
(Please list all)

*UK National Insurance No.:

*US Tax Identification No (TIN):

Tax Identification No. (any non UK/US):

Beneficial Owner 4

*Title: Mr Mrs Miss Ms Dr

Other (please specify):

*Full Name:

*Occupation:

*Current residential address:

*Postcode:

*Country:

*Contact No:

*Email address:

*Date of birth: / /

*Country of birth:

*Nationality:

Do you hold multiple nationality? If so please list:

*Which countries are you resident in for tax purposes?
(Please list all)

*UK National Insurance No.:

*US Tax Identification No (TIN):

Tax Identification No. (any non UK/US):

ALL ITEMS WITH * MUST BE PROVIDED.

Person 1

| | | | | | | | | |
|-------------------------------|----|-----|------|----|----|---|---|---|
| *Title: | Mr | Mrs | Miss | Ms | Dr | *Date of birth: | / | / |
| Other (please specify): | | | | | | *Country of birth: | | |
| *Full Name: | | | | | | *Nationality: | | |
| | | | | | | Do you hold multiple nationality? If so please list: | | |
| | | | | | | | | |
| *Occupation: | | | | | | *Which countries are you resident in for tax purposes? (Please list all) | | |
| *Current residential address: | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| *Postcode: | | | | | | | | |
| | | | | | | | | |
| *Country: | | | | | | *UK National Insurance No.: | | |
| | | | | | | | | |
| *Contact No: | | | | | | *US Tax Identification No (TIN): | | |
| | | | | | | | | |
| *Email address: | | | | | | Tax Identification No. (any non UK/US): | | |

Person 2

| | | | | | | | | |
|--------------------------------------|----|-----|------|----|----|---|---|---|
| *Title: | Mr | Mrs | Miss | Ms | Dr | *Date of birth: | / | / |
| Other (please specify): | | | | | | *Country of birth: | | |
| *Full Name: | | | | | | *Nationality: | | |
| | | | | | | Do you hold multiple nationality? If so please list: | | |
| | | | | | | | | |
| *Occupation: | | | | | | *Which countries are you resident in for tax purposes? | | |
| *Current residential address: | | | | | | (Please list all) | | |
| | | | | | | | | |
| | | | | | | | | |
| *Postcode: | | | | | | | | |
| *Country: | | | | | | *UK National Insurance No.: | | |
| *Contact No: | | | | | | *US Tax Identification No (TIN): | | |
| *Email address: | | | | | | Tax Identification No. (any non UK/US): | | |

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Person 3

Person 4

Part 5 | Authorised Dealers

The following persons are employees of the above mentioned company and are hereby authorised by the above mentioned company to execute trades on our behalf.

Please note that the User ID will be provided by Saxo Capital Markets.

| Name | User ID | First Time Password (Min 8 characters - MUST contain letters, numbers and a special character. Example saxo1234%) | E-mail address | Phone Number |
|------|----------------------------------|--|----------------|--------------|
| | Provided by Saxo Capital Markets | | | |
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| | Provided by Saxo Capital Markets | | | |

Part 6 | Currency of the Main Account

*Please state the currency of the main account:

(The default currency will be GBP if this is left blank)

Part 7 | Data Protection

To comply with The Money Laundering Regulations, SCML is required to collect information and to undertake checks on the identity and residential address of the directors, shareholders and other authorised persons, including accessing and using information held in database or other electronic format through other agencies.

When SCML is required to carry out electronic verification, data may be required to be shared to agencies. SCML shall ensure this data is shared in a protected manner and any data not retained unless required for further verification. SCML may also request further supporting documentation to verify these details. The information may be disclosed to law enforcement agencies and other relevant organisations for crime detection and prevention purposes.

All exchanged data will be done in a secure manner and only required information will be shared. If you have any questions about how we handle your personal information, please email us at privacy@saxobank.com.

Marketing Communication

We occasionally would like to contact you to give you information about products and services offered that are similar or related to the product and services provided or previously provided to you as well as news and events.

☐ Please tick here if you would like to be kept informed of all marketing related matters by SCML.

You have the right to unsubscribe and change your preferences at any time for marketing purposes. You can do this by logging on to your account or clicking unsubscribe on any of the marketing emails we send you.

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Part 8 | Board Resolution

We certify that at a meeting of the directors of

COMPANY NAME

whose registered office is at

REGISTERED OFFICE ADDRESS

held on DD / MM / YYYY , the following resolutions were passed:

1. That Saxo Capital Markets UK Ltd ("SCML") are hereby requested and authorised to open for the company such account(s) as may now or from time to time be considered appropriate for purposes of transacting and subscribing to the services and products of SCML according to the relevant terms and conditions;
2. That the director (s) that sign the application form are hereby authorised to do so for and on behalf of the company, do all acts, execute all documents and perform and enter into all agreements necessary or convenient for the purposes of opening and/or operating the account; and
3. That the person(s) on Part 4 of this application form and any additional person(s) so indicated are hereby authorised to give instruction in relation to the account(s).

I/we consent to the Order Execution Policy

Part 9 | Declaration

I/We, jointly and severally, declare that:

- I/We hereby request and authorise you to open an account for the company;
- I/We have read and understood the nature and the risk of the product(s) that the company intends to trade in this account;
- I/We have obtained from the website (www.saxomarkets.co.uk), read and understood the following:
 - a) The General Business Terms (including the product risks disclosure detailed in Schedule 1 to these General Business Terms,
 - b) Order Execution Policy,
 - c) Conflict of Interest Policy,
 - d) General Privacy Policy
- I/We warrant that we have full power and authority to open and operate the account in accordance with the above resolutions, the company's articles & memorandum of association and any other constitutional documents and without breach of any law, restriction or obligation binding on the company;
- I/We have provided true, accurate and complete information and authorise you to make any enquiries which you may consider necessary for confirmation of such information and undertake to update SCML of any changes to the information provided without delay;
- I/We consent to the Order Execution Policy and for any orders to be executed outside a regulated market or a multilateral trading facility;
- I/We consent for any of unexecuted limit orders not to be made public;
- I/We accept and agree to be bound by the terms provided above
- I/we accept that in certain circumstances SCML will be obliged to share information with UK tax authorities, who may pass it on to other tax authorities.

*Date: _____

| | | |
|------------------|------------------|----------|
| Full Name: _____ | Signature: _____ | Director |
| Full Name: _____ | Signature: _____ | Director |
| Full Name: _____ | Signature: _____ | Director |
| Full Name: _____ | Signature: _____ | Director |