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**Company Information**

**Registered Company Name:** \_\_\_\_\_  
(Association – Charitable – Society – Private Limited-Public Limited – Trustee)

Company Number: \_\_\_\_\_ Date of Incorporation \_\_\_\_\_

Country of incorporation: \_\_\_\_\_

Business Activity: \_\_\_\_\_

Tax Compliance Number: \_\_\_\_\_ TRN/EIN/PIFI/ITIN: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Primary Source of Funding: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**General Information**

Chapter 4 Status: (PFFI, FFI etc..) \_\_\_\_\_

Indicate whether there are substantial US owners: \_\_\_\_\_

If there are substantial US owners, indicate the percentage of ownership: \_\_\_\_\_

Registered Business Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*(Include City & Country)*

Mailing Address (if different from above) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*(Include City & Country)*

Telephone (Work): \_\_\_\_\_ (Work): \_\_\_\_\_ Fax: \_\_\_\_\_  
*(Please state country code)*

Email: \_\_\_\_\_

Company's Tax Details:     Taxable                       Not Taxable

(If Taxable, provide copy of tax compliance certificate, If not taxable, provide copy of tax exemption certificate)

**Purpose of Account**

Purpose for opening the account: \_\_\_\_\_  
\_\_\_\_\_

## Source of Funds

Source of Funds used to open account:

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## Expected Turnover

Expected turnover or volume of activity in the account:

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## Banker

Primary Bank: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Number of years with Bank: \_\_\_\_\_

## Account Details

Type of Account: ( )JA Fixed Income ( )US Fixed Income ( )Equities ( )Cambio  
( )LSA ( )Other

## Authorization

We hereby authorize Cumax Wealth Management Limited to:

1. Accept any additional sum of sums of money, which we may place with you from time to time for investment in a manner to be agreed upon at such time.
2. Reinvest the funds at maturity in the same type of instrument or in any other type of instrument with or without adding the interest earned to the new investment as agreed or instructed in writing or by telephone or facsimile message followed by hard copy.
3. Special Instructions (if any):

Stipulations: -All definitions, terms and conditions are governed by the Clients' Agreement, a copy of which should be signed by you. The items below are incorporated in the Agreement:

- We unconditionally warrant and represent to you that any order given by us to you to sell, transfer or dispose of Securities shall only be given for securities which is, at the time of such order, owned by us or for which we have authority to sell and if, at any time of such sale, transfer or disposition we are unable to deliver the Securities as required by you that we will fully and completely reimburse and indemnify you for and against all expenses, cost, charges or other financial obligations incurred by you in respect thereto.
- All or any order, direction, instruction or request made by us, or in the case of a joint account by anyone of us, shall be irrevocable binding on us and my successors, assignees, and personal representatives.
- We agree to pay commissions, charges, interest, fees and penalties at your prevailing rates which may be charged from time to time, and to pay your reasonable attorney's fee in the event that we do not pay full amounts due by us to you from time to time.

In the event that we default (for whatever reason) in the payment when due of any sum payable to you (however arising) we agree that my liability shall be increased to include interest on such sum from the date when such payment was due until the actual payment such interest to be calculated at 10% per annum above the

prevailing overdraft rate at your commercial bank from time to time and such charges as you may reasonable make to cover your facilities and extra services. Such interest shall accrue from day to day.

We hereby certify that, to the best of my/our knowledge, the information given above is true and correct

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Position \_\_\_\_\_ Position \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

Cumax Representative : \_\_\_\_\_

Cumax Authorizing Officer \_\_\_\_\_

**FOR USE BY Cumax PERSONNEL ONLY :**

Client Account No: \_\_\_\_\_ Representative Code: \_\_\_\_\_

Date: \_\_\_\_\_

Client's Risk Profile: Conservative:  Moderate:  Speculative:  Aggressive: **Account Opening Documentation Checklist:**

- Articles of Incorporation
- Certificate of Incorporation Tax Compliance Certificate
- Resolution / Bank Mandate Financial Statement
- Reference Letter from prior financial institution
- Names of Board of Directors, Copy of Specimen Signatures, TRN and other ID information for each Director.