

(Broker's Logo)/Member in the Palestine Bourse

Trading Account Opening Application Form- Legal Entities

Legal Entity Name:.....

Investor's Type:

<input type="checkbox"/> Legal Entities (Companies) - C (Foundation /Company/Bank/Insurance/ Charity /Pension or Investment Fund/Governmental, Public & local Authorities	<input type="checkbox"/> Related Party (Annex 1) -R
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Legal Entity's Information

Registration No.:	Trading Account No:	Investor No:
Place of Establishment:	Establishment Date:	Citizenship:
Legal Form:	Tax Registration No:	Business Headquarter:
Annual Income	Less than 50,000 \$	Country of Operations:
	50,000 – 100,000 \$	Type: <input type="checkbox"/> Exempt <input type="checkbox"/> Small <input type="checkbox"/> Ordinary
	100,000 – 500,000 \$	Type of work: <input type="checkbox"/> Public <input type="checkbox"/> Private
	More than 500,000 \$	Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Paid in Share Capital:	
	Nature of Economic Activity:	
	Official Commercial Register:	
	Commercial Name:	

Address:

Building Name:	Building Number:	Street:	Quarter:
Telephone:	Mobile:	Facsimile:	P O Box:
Postal Code:	Town:	City:	Country:
Website:	Electronic Mail:		

Banks where the legal entity has bank accounts locally and abroad that can be verified:

Bank Name & Branch:	Account No.:	*IBAN :
Bank Name & Branch:	Account No.:	*IBAN :
Bank Name & Branch:	Account No.:	*IBAN :
Bank Name & Branch:	Account No.:	*IBAN :

Authorized signature / signatures for the account: (please follow the annex number 6)

Contact Person:	ID No:	Citizenship:	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No
Position:	Place of Birth:	Birth Date:	Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No

Management in charge Person:	ID No:	Citizenship:	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No
Position:	Place of Birth:	Birth Date:	Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No
Scope of Authorization: <input type="checkbox"/> Give Sell and Buy Orders <input type="checkbox"/> Give Sell Orders Only <input type="checkbox"/> Give Buy Orders Only			
<input type="checkbox"/> Receive and deliver securities and money <input type="checkbox"/> Authorizations Restrictions (specify):			

Legal entity managers:	ID No:	Position:	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No
Legal entity managers:	ID No:	Position:	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No
Legal entity managers:	ID No:	Position:	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No
Legal entity managers:	ID No:	Position:	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No

Information of accounts opened through power of attorneys:

The account was opened through a power of attorney ☐ Yes ☐ No (if the answer were in the affirmative, please fill out Annex 5)

Authorized Signature/s	Representative Signature /s	Date / / 20
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- The Broker certifies all pages of this Agreement
- All data and fields are considered mandatory except those marked with (*), and the trading account will not be activated if the information is not provided, otherwise please write (not applicable).
- The Agreement and Annexes are part of the Application to open the legal entity Account.
- The Broker shall supply certified and legalized copies of the following required documents (True Copy of Original shall be stamped): Articles of Incorporation / Bylaws/ Certificate of Registration / power of attorney on behalf of the company/ Personal Identification of the authorized signatories / Board of Directors resolution or party related to the authorized signatories.

Requirements for KYC:

Chairman of BOD:	ID No:	Citizenship:	Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No
General Manager:	ID No:	Citizenship:	Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No	PEPs: <input type="checkbox"/> Yes <input type="checkbox"/> No

Share holders and / or owners of 10% and more	Name	Identification Number	Ownership Percentage	Citizenship	Residence Address	Phone	PEPs
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

Board of Directors Members	Name	Identification Number	Ownership Percentage	Citizenship	Residence Address	Phone	PEPs
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

Method of notifying the client by the broker: <input type="checkbox"/> Telephone <input type="checkbox"/> Facsimile <input type="checkbox"/> Electronic Mail <input type="checkbox"/> By Hand	
Management in charge Person knowledge in investment of securities: <input type="checkbox"/> None <input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Expert	
Authorized Signatory Person knowledge in investment of securities: <input type="checkbox"/> None <input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Expert	
Purpose of account opening and investment objectives: <input type="checkbox"/> Transfers <input type="checkbox"/> Long Term <input type="checkbox"/> Speculation <input type="checkbox"/> Other (specify)	
*Volume of anticipated transactions and period of time:	
Management of Investments in foreign currencies rather than local currency (JOD/USD/NIS): <input type="checkbox"/> Yes(specify): <input type="checkbox"/> No	
Sources for recharging the account: <input type="checkbox"/> Legal entity operations <input type="checkbox"/> Other (specify):	Account Statement Dispatch: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
Potential sources for incoming wires per country:	Potential destinations for outgoing wires per country:

Has another account been opened with another broker? <input type="checkbox"/> Yes <input type="checkbox"/> No
If the answer were in the affirmative, has another certificate of registration been used? <input type="checkbox"/> Yes <input type="checkbox"/> No (if yes specify the certificate of registration: Provide no:

Trading via internet: <input type="checkbox"/> Yes <input type="checkbox"/> No (If Investor wishes, electronic registration is required through established procedures)
Account balance inquiry via internet: <input type="checkbox"/> Yes <input type="checkbox"/> No (If Investor wishes, electronic registration is required through established procedures)
SMS services offered by the broker : <input type="checkbox"/> Yes <input type="checkbox"/> No If Investor wishes, electronic registration is required through established procedures)

Recognition and Undertaking:

I/ We, the undersigned, attest to the truth and veracity of the foregoing information provided in this document regarding that securities that are owned by the legal entity and that the legal entity is the true and only beneficiary of the all transactions made relative to this account and shall bear liability for cash deposits and incoming wires received into the broker's account I/We further undertake to disclose all transactions related to my work or my relationship to the broker in accordance with the prevailing Securities Law and its Regulations. I/We further state that have read, understood, and signed the Account Opening Form and undertake to abide by its content; I/We further read all the terms and conditions related to the account opening and abide by them; and I/We further undertake to provide the broker with changes to the information and data provided above without any liability to the broker as a result of these changes or if the information were inaccurate.

Authorized Signature/s	Representative Signature /s	Date / / 20
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For Broker's Use

Name and Signature of Designated Employee:	Seal of the Broker	Date / / 20
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Annexes:

- In the event that the Investor or the authorized signatory or authorized manager of the account or any board of directors member or related person of the first degree or a person in charge deemed a related party or owner of more than 10% of the shares in a listed company, please fill out Annex (1).

- In the event that the authorized signatory or authorized manager of the account or any relative of the first degree were employed or authorized before the broker, PEX, or CMA, please fill out Annex (2).
- In the event that the authorized signatory or authorized manager of the account was a political exposed person, please fill out Annex (3).
- In the event the Investor were a US citizen, resident of the USA or subject in any manner to pay taxes in the USA, please fill out Annex (4).
- In the event this Agreement was signed by someone having a duly notarized power of attorney, please fill out Annex (5).
- Annex (6) shall be filled out by the persons authorized to sign on behalf of the legal entity.