

Account Opening Form for Corporate Customer

version 02.11.2015



ACCOUNT OPENING FORM (FOR CORPORATE CLIENTS)

| FOR BANK USE ONLY | | | | |
|--|--|--|--|--|
| | | | | |
| Customer code: | | | | |
| Account number: | | | | |
| Assigned CDD profile: | □ Low □ Medium □ High | | | |
| Relationship manager: | | | | |
| CDD completed (signature and date): | | | | |
| FOR CUSTOMER USE | | | | |
| Please duly fill in and sign th | ne present Form and any relevant forms as indicated herein and present to us along with this documentation: | | | |
| Certified copies of valid identification document (passport/ID card) for <i>all</i> Beneficial Owners and Authorised Signatories | | | | |
| Proof of Residential Address for all Beneficial Owners and Authorised Signatories (not older than 6 months) | | | | |
| Certificate of Incorporation or Extract from the local Commerce register (not older than 6 months) | | | | |
| Signed and Certif | ied Memorandum & Articles of Association | | | |
| Register of Share | holders | | | |
| Register of Direct | Register of Directors of the Company, or equivalent document | | | |
| Document listing Authorized Signatories of the Company and defining capacities | | | | |
| Minutes/Power of | Minutes/Power of Attorney authorizing opening of the account with PPB, signing this Form and related documentation | | | |
| Copy of recent fir | Copy of recent financial statement or audited statement (if mandatory) | | | |
| Ownership struct | ure explaining control of the Company (if complicated) | | | |

NB! If you are unable to file your application and documents in person (providing originals), we will require all documents to be certified by the practising Lawyer acceptable to the bank or a Notary Public.

To ensure prompt processing of your application, please return the completed Form and the above documents to Pacific Private Bank Limited:

- To our premises: 278 Kumul Highway, Govant Building, Port Vila, Vanuatu
- By fax: Fax a copy of the Form and required documents to: +678 24 501
- By e-mail: Scan the Form and required documents, and send them to: info@pacificprivatebank.com
- By post: Pacific Private Bank To the attention of: Compliance Officer, Pacific Private Bank, PO Box #278, Port Vila, Vanuatu

For any questions regarding this Form or documents to be returned, please contact us at +678 24 500 or at info@pacificprivatebank.com

- Throughout this Form, Pacific Private Bank Limited can be referred to as "the Bank" and the "Customer" in the singular may refer to owners of a joint account (if applicable). In that case each of the owners of the account shall separately fill in this Form and sign Account Agreement.
- This Account Opening Form together with the Account Opening Terms and General Terms & Conditions of the Bank constitute the Account Agreement entered into by the Bank and the Customer.



| | | | CUSTO | OMER INFORMATI | ON | |
|--|---|-----------|---|---------------------------------|---------|---|
| Full entity name (a | s registered): | | | | | |
| Legal entity code (i | f applicable): | | | | | |
| Registration date: | | | | | | |
| Address of register | ed office: | Street | , house: | | | |
| City: | | Count | ry of residence: | Postal code: | | Postal code: |
| Correspondence ac | ddress: | Street | , house: | | | |
| City: | | Count | ry/State: | | | Postal code: |
| Contact phone: | | I | | Mobile phone: | | |
| E-mail: | | | | Website: | | |
| Contact person: | | | | | | |
| Director or authori | zed person repr | esentin | g the Customer1: | | | |
| First name, last name: | , | | | Personal code or Date of Birth: | | |
| Passport Number: | | | | Country of residence: | | |
| If representative is | a company ² : | | | | | |
| Company name: | | | | Comp | oany co | ode: |
| Country of residence Is this person a PEP | | | ☐ Yes ☐ No | | | |
| is this person a r Er | • | | | , | | |
| Notices to be sent and received by: | | : | □ secured website/internet banking ⁴ □ alternative electronic channels ⁵ □ provided in person at the Bank | | | |
| | | | INFORMATIO | ON ON BUSINESS | ACTIV | /ITY |
| Main economic activity (source of funds): □ Society, non – profit association, foundation or other public organization; □ Money services provider (currency exchange, transfer services) □ Legal services (advocate, notary office, law enforcement office) | | | | | | |
| ☐ Intermediation in transactions with real estate ☐ Reinsurance services | | | | | | |
| ☐ Gambling and lottery arrangement (including online business) ☐ Trading in arms and ammunition | | | | | | |
| \square Trading in preci | ☐ Trading in precious metals and precious stones, antiques or art | | | | | |
| \square Provision of cas | sh collection serv | vices | | | | |
| \square Investment | | | | | | |
| ☐ other (please s | pecify): | | | | | |
| Does the passive in | ncome (dividend | ls, inter | est, royalties) of the | Customer consist n | nore th | han 50 % of the entity's annual gross income? |
| \square No \square Yes | | | | | | |
| | | | | | | |

¹ Please indicate the person filling and signing this Form on behalf of the Customer. For other authorized signatories please fill in "Authorized Signatories" form.

 $^{^{2}}$ In case Customer is represented by other company, please indicate the representative of the company in fields above.

³ PEP or Politically Exposed Person is a private individual who is or has been entrusted with prominent public functions, including heads of any state or government, senior politicians, senior government, judicial or military officials, senior executives of publicly owned corporations or international organizations and important political party officials. The term also includes the immediate family members or persons known to be close associates of such persons. Close family members are: the spouse, the person with whom partnership has been registered (hereinafter called cohabitant), the parents, brothers, sisters, grandparents, grandchildren, children and children's spouse, children's cohabitants. Close associates are: a natural person together with whom the person who is or have been entrusted with prominent public function are or have been participating in the same legal person or maintaining other business relations or who is the only owner of legal person incorporated and acting de facto in the interest of person who is or have been entrusted with prominent public function.

⁴ Please fill in "Internet banking" form.

⁵ Please fill in "Alternative electronic channels" form.

PACIFIC PRIVATE BANK

| Name of regulatory authority [in case of yes above]: Are the company's securities publicly listed: No Yes Name of stock exchange and country (in case of yes above): Are bearer shares permitted by your statutes: No Yes Number of Previous year turnover (equivalent in EUR): Main business partners (customers, suppliers): Company name Country of residence Business relationship | | | | |
|--|--|--|--|--|
| Are the company's securities publicly listed: | | | | |
| Name of stock exchange and country (in case of yes above): Are bearer shares permitted by your statutes: No Yes Number of Previous year turnover Planned year turnover (equivalent in EUR): Main business partners (customers, suppliers): | | | | |
| Are bearer shares permitted by your statutes: No Yes Number of Previous year turnover (equivalent in EUR): Main business partners (customers, suppliers): | | | | |
| Are bearer shares permitted by your statutes: No Yes Number of Previous year turnover (equivalent in EUR): (equivalent in EUR): Main business partners (customers, suppliers): | | | | |
| Number of Previous year turnover (equivalent in EUR): Planned year turnover (equivalent in EUR): Main business partners (customers, suppliers): | | | | |
| employees: (equivalent in EUR): (equivalent in EUR): Main business partners (customers, suppliers): | | | | |
| Main business partners (customers, suppliers): | | | | |
| | | | | |
| Company name Country of residence Business relationship | | | | |
| Company name Country of residence Dusiness relationship | | | | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Customer's accounts with other banks from which the funds will be transferred: | | | | |
| | | | | |
| Name, country of the bank Amount, currency | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Planned monthly account turnover (equivalent in EUR): | | | | |
| | | | | |
| Currencies planned to be used: | | | | |
| Planned services with the Bank: | | | | |
| \square wire transfers | | | | |
| □ deposits | | | | |
| □ internet banking ⁶ | | | | |
| □ card services | | | | |
| □ lombard loans | | | | |
| ☐ foreign exchange | | | | |
| □ online securities trading ⁷ | | | | |
| ☐ discretionary portfolio management ⁸ | | | | |
| \square investment advise ⁹ \square other (please specify): | | | | |
| | | | | |
| The ultimate beneficial owner(s) of the Customer is/are ¹⁰ : Is the Customer/beneficial owner a citizen or resident of the USA or other U.S. person for the purposes of U.S. tax law ¹¹ : | | | | |
| \square Yes ¹² \square No ¹³ | | | | |
| | | | | |

⁶ Please fill in "Internet banking" form

⁷ Please fill in "Online trading" form.

 $^{^{8}}$ and 9 Please fill in "Asset management" form.

 $^{^{\}rm 10}$ Please fill in "Beneficial Ownership Questionnaire" for each beneficial owner.

 $^{^{11}}$ A legal entity is considered a U.S. resident if, inter alia, it is a partnership, company or corporation registered in or established under the laws of the USA, any state, or the District of Columbia. An individual may be considered a U.S. resident if, inter alia, he / she is a U.S. citizen (by virtue of place of birth or naturalization, notwithstanding belonging to any other country), an individual holds a permanent residence permit in the USA (Green Card), an individual physically presents in the USA for ≥31 days during the current calendar year and ≥183 days during the last 3 years. Please visit www.irs.aov for detailed definition of U.S. person for U.S. tax reasons.

¹² Please fill in W-9 form.

¹³ Please fill in W-8BEN-E form.



CUSTOMER'S REPRESENTATIONS

By signing below I hereby confirm that:

- 1. I am duly authorized to fill in and sign this questionnaire in the name and for the account of the Customer and that the information provided in this questionnaire is true and correct and hereby undertake to immediately inform the Bank in writing of any changes in the information provided;
- 2. I shall use the services of the Bank only for legitimate purposes;
- 3. It is my responsibility at all times to remain in compliance with all tax laws applicable to myself according my tax residency jurisdiction and I shall fulfill all my tax obligations, including but not limited to income declarations and reporting to the relevant tax authorities;
- 4. I agree with the Bank's entitlement to process my personal data and the data of the related persons (as defined in the General Terms & Conditions) in accordance with provisions of Vanuatu normative acts and the General Terms & Conditions; I was also informed about my right not to consent to processing by the Bank of my personal data;
- 5. I have carefully read and hereby accept the conditions of Account Opening Terms as well as General Terms & Conditions of the Bank, together with this Account Opening Form constituting the integral part of the Account Agreement.

| SIGNATURE OF DIRECTOR OR AUTHORISED PERSON | | | |
|--|--|---------------|--|
| | | | |
| First name, last name: | | Signature and | |
| | | Seal (if | |
| Position held: | | applicable): | |
| | | | |
| Company name (if representative is | | | |
| the company): | | | |
| | | | |
| Date: | | | |
| | | | |
| Location: | | | |
| | | | |

ACCOUNT OPENING TERMS

ACCOUNT AGREEMENT

- 1. These Account Opening Terms together with General Terms & Conditions (hereinafter referred to as "the Terms") and Account Opening Form (including all additional forms filled in by the Customer in the account opening process) shall form an integral Account Agreement entered into by the Parties. All the definitions used herein match the definitions described in the Terms and/or Account Opening Form accordingly.
- 2. The Account Agreement (hereinafter referred to as the "Agreement") establishes the conditions, procedure of opening, operating and closing of the bank account (hereinafter referred to as the "account"), rights and obligations of the Bank and the Customer and other matters concerning the handling of Customer's account with the Bank.

ACCOUNT OPENING

- 3. After having evaluated and verified the information provided by the Customer in the Account Opening Form and provided that subject to the Bank's procedures a decision to accept the Customer has been made and on the basis of the present Agreement, the Bank shall open the account for the Customer.
- 4. The account shall be deemed opened and this Agreement enters into force upon the Bank's Notice sent to the Customer informing the Customer of the account being opened and indicating the account number assigned to the Customer. For the avoidance of doubt, this Agreement does not constitute the obligation for the Bank to open the Account and the Bank shall have the right to refuse opening an account for the Customer based on confidential information available to the Bank. This being the case, the Bank shall not be obliged to explain the reasons for rejection to the Customer.
- 5. After the first account has been opened with the Bank by the Customer, the Customer may apply for subsequent accounts to be opened with different IBAN. Application is to be made in writing and is subject to the approval procedure established by the Bank. All subsequent accounts opened in the name of the Customer are subject to the conditions of this Agreement.

ACCOUNT OPERATION

- 6. The Bank shall further credit the funds received in the name of the Customer to the account of the Customer under the procedure set by the Bank. The funds shall be credited to the account according to the account number.
- 7. The Bank shall fulfil orders of the Customer regarding the funds kept in his account, perform other account handling operations in accordance with the Agreement, the Terms, other regulations of the Bank and laws of Vanuatu.
- 8. The Bank shall submit account statements in the delivery method indicated by the Customer in the Account Opening Form; the Bank may apply a Fee for preparation and sending of any Notices as requested by the Customer.
- 9. The Bank is authorised by the Customer, yet not required, to accept all instructions that the Customer or his appointed representative will give by the means agreed between the Bank and the Customer.
- 10. The Customer shall perform payment operations with funds kept in the account following conditions and procedure set by the Bank and shall pay the respective Fees and Charges for the account maintenance and any operations within. Fees and Charges are available on the Bank's website at www.pacificprivatebank.com and are subject to change according the procedure defined in the Terms.
- 11. The terms and procedures applicable to payments shall be established by the Bank and made available to the Customer publicly on the Bank's website at www.pacificprivatebank.com as integral part of the Terms and consequently this Agreement.
- 12. Unless agreed otherwise between the Parties, debit transactions are exclusively made upon the express condition that sufficient funds including amounts needed to pay relative Bank's Fees and Charges are available in the account.
- 13. Transactions executed by the Customer or on his behalf are recorded by the Bank on the account.
- 14. The Customer has the right to authorize third parties acting separately or several persons acting jointly to dispose the funds on Customer's accounts following the procedure established by the Bank. The Customer remains responsible and personally liable to the Bank for all the transactions made on his account by such authorized person.
- 15. The Bank reserves the right to refuse Transactions, whatever their nature, without any further justifications, subject to this Agreement, the Terms, any other regulation or procedures of the Bank or legal acts of Vanuatu.
- 16. The Bank shall not reimburse the Customer for losses if the Customer has performed unlawful acts or violated some of the provisions of this Agreement intentionally (deliberately) or due to gross negligence, and also in cases where the Customer was able or should have been able to anticipate losses, but failed to ensure security of the funds held in the account, inter alia, to set limits on the Transactions or to apply for blocking of the accounts.

INTEREST

- 17. The Bank may pay interest on the balance in the Account of the Customer in case it is provided so in the Fees and Charges. In such case the interest on the balance of funds in the Account for one day shall be calculated based on the actual number of days in the year (365 days or 366 days in a leap year accordingly) and shall be paid for each day on the amount of funds in the Account as at the end of the respective day (Actual/Actual).
- 18. The Bank shall pay the Customer interest on the balance of funds in the Current Account once per month by crediting this interest to the Customer's Current Account.

ACCOUNT CLOSING

19. The account shall be closed as per conditions and procedure established in the Terms.

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MISCELLANEOUS

- 20. The Agreement shall come into effect on the date of its signature by both Parties and shall continue in full force and effect for a term of unlimited duration.
- 21. The Agreement may be amended or terminated in writing by the consent of both Parties or else according the conditions and procedure defined in General Terms & Conditions.
- 22. Upon termination of the Agreement the account shall be closed and the funds kept therein shall be released to the Customer under the procedure set in the General Terms & Conditions.
- 23. The Agreement is made in two equally binding counterparts, the Bank and the Customer to be delivered one counterpart each.

| SIGNATURE OF DIRECTOR OR AUTHORISED PERSON | | | |
|--|--|---|--|
| First name, last name: | | Signature and Seal (if applicable): | |
| Position held: | | аррисавіе). | |
| Company name (if representative is the company): | | | |
| Date: | | | |
| Location: | | | |



ALTERNATIVE ELECTRONIC CHANNELS FORM

By signing below the Customer hereby chooses and requests the Bank to accept and send any kind of orders (including payment orders), applications, instructions, notices, complaints, requests, account statements and other information arising out of any Transaction between the Parties (hereinafter referred to as the Notice) sent by the Customer or any of his authorized representatives to the Bank and vice versa in any one of the unsecure electronic channels if made by these specific fax No. / email ids (addresses)/ Skype names indicated below:

| | By e-mail: | |
|-----|---------------|---------------|
| | E-mail 1: | E-mail 4: |
| | E-mail 2: | E-mail 5: |
| | E-mail 3: | E-mail 6: |
| | | |
| □ E | By fax: | |
| | Fax No. 1: | Fax No. 2: |
| □ E | By SKYPE: | |
| | Skype name 1: | Skype name 4: |
| | Skype name 2: | Skype name 5: |
| | Skype name 3: | Skype name 6: |

- 2. The Customer hereby confirms that the above fax No. / email ids / Skype names belong to the Customer only and the Customer will ensure the security and secrecy of the Customer's log in details and will not make these available to any unauthorized third persons.
- 3. By requesting the above the Customer hereby acknowledges that he is informed, understands and agrees that:
 - 3.1. any of the above ways of communication is not a secure or error-free medium of communication for delivering Notices to the Bank or receiving Customer's information from the Bank and more secure alternatives exist;
 - 3.2. such communication may be interfered with including but not limited to interception, viewing by unauthorized third parties, or unauthorized alteration;
 - 3.3. the Bank will have no obligation to additionally verify the authenticity or accuracy of any Notice received via any of the given channels of communication and shall have the right to identify the Customer by solely matching Customer's fax No. / email ids / Skype names and/or other Customer identifying data contained within the Notice (if any) with the ones provided herein;
 - 3.4. the Bank shall deem all Notices received through any of the alternative channels specified above as duly sent by the Customer himself or his duly authorized representative and may act on any directions contained in such Notice regardless of by whom in fact the Notice were transmitted and notwithstanding that such Notice may have been initiated; the possibility that the Notice was transmitted in error or fraudulently, or altered or distorted prior to or in the course of transmission is known and stays with the Customer:
 - 3.5. the Bank may, in its absolute discretion, defer action in accordance with the whole or any part of such Notice pending further enquiry to or confirmation by the Customer but the Bank will not be under any obligation to so defer in any case;
 - 3.6. the Bank is released from any liability and the Customer indemnifies the Bank against all claims, losses, damages, costs and expenses howsoever arising in consequence of, or in any way related to the Bank having acted in accordance with the whole or any part of any such Notices or the exercise of the discretion conferred upon the Bank as indicated in clause 5 above;
 - 3.7. each of such Notice sent to the Bank may not deemed received until the Customer has received a return confirming Notice from the Bank acknowledging receipt of such Notice.

| SIGNATURE OF DIRECTOR OR AUTHORISED PERSON | | | | |
|--|--|---------------------------|--|--|
| First name, last name: | | Signature and Seal (if | | |
| Position held: | | applicable): | | |
| Company name (if representative is | | | | |
| the company): | | | | |
| Date: | | | | |
| Location: | | | | |



AUTHORISED SIGNATORIES FORM Customer's full name: Entity / personal code: The Customer hereby authorises the persons indicated in this power of attorney below (hereinafter the "Signatories") to act on behalf of the Customer and at their own discretion as the Customer's representatives in relationships with the Bank. The Signatories are entitled to enter into any kind of Transactions with the Bank on behalf of the Customer, including but not limited, disposing of funds on the accounts with the Bank and/or securities and/or other financial assets held by the Bank, provide and receive information on behalf of the Customer, sign any required documentation and otherwise engage in necessary activities in connection with exercising of the authorities described herein. By way of example and without limitation the Signatories are entitled to deposit, acquire, sell, convert, or withdraw securities of any kind, to make and receive payments or withdraw assets in any form available at the Bank, to give discharge, issue orders for transfers and sales, to sign, issue, accept, endorse or give discharge to mandates, to use credit lines or other kinds of financing, to open and close accounts/custody accounts, to request the delivery of account statements, securities statements, annual statements or other correspondence, to make use of the Bank's electronic services and to carry out any other act or to exercise any other right that they consider appropriate or necessary in the Customer's name. The Signatories are not entitled to pass the rights granted by this power of attorney to any other person. STATUS OF POWER OF ATTORNEY (please tick one) NEW VERSION. This power of attorney defines the new list of authorised persons and overrules all previous power of attorneys (if any) granted and presented by the Customer to the Bank in connection with the transactions indicated herein. ADDENDUM. This power of attorney is granted in addition to currently valid power of attorney (-s) granted and presented by the Customer to the Bank earlier in connection with the transactions indicated herein. The list of authorised persons indicated herein supplements the list of authorised persons indicated in former valid Customer's power of attorney (-s). In case this power of attorney defines different signing authority and/or extent of rights to compare with former power of attorney (-s), the new signing authority and rights indicated in this addendum shall apply both to the newly authorised persons indicated herein and to previously authorised persons. SIGNING AUTHORITY (please tick one) Any to sign. Any one of the authorised signatories can act/sign on behalf of the Customer. All to sign. All of the authorised signatories are required to act/sign together. П Any two to sign. Any two of the authorised signatories are required to act/sign on behalf of the Customer. Other: Authorised Signatory Details - Natural Person (1 Last name, Signature first name: sample: Date of birth: Nationality:

Passport number:

PACIFIC PRIVATE BANK

| Authorised Signato | ry Details - Na <u>tur</u> | al Person (2) | | | | | |
|---|----------------------------|-----------------------|-------------|--------------------------|-----|--|--|
| Last name, | | | | nature | | | |
| first name: | | | san | nple: | | | |
| Date of birth: | | | | | | | |
| Nationality: | | | | | | | |
| Passport | | | | | | | |
| number: | | | | | | | |
| A all a de al Cierrata | Data'la Nata | -1.0 (2) | | | | | |
| Authorised Signato Last name, | ry Details - Natur | al Person (3) | Sign | nature | | | |
| first name: | | | | nple: | | | |
| Date of birth: | | | | iipie. | | | |
| Nationality: | | | | | | | |
| Passport number: | | | | | | | |
| number: | | | | | | | |
| Authorised Signato | ry Details - Corpo | ration (1) | | | | | |
| Company | | | | nature | | | |
| name: | | | | nple and | | | |
| | | | | poration | | | |
| Country of | | | Sea | ıl sample: | | | |
| registration: | | | | | | | |
| Director of the | | | | | | | |
| Company: | | | | | | | |
| This power of attorney shall remain valid until the Bank is notified in writing of it's revocation or until the respective new version of power of attorney is submitted to replace this and is accepted by the Bank. I the undersigned hereby confirm that I have full power to solely act on behalf of the Customer and have the right to authorise third persons to act on behalf of the Customer in the capacities indicated above | | | | | | | |
| | | SIGNATURE OF DIRECTOR | OR AUTHORIS | | | | |
| First name, last nar | ne: | | | Signature and Seal (i | if | | |
| Position held: | | | | applicable | 2): | | |
| Company name (if the company): | representative is | | | = | | | |
| Date: | | | | | | | |
| Location: | | | | | | | |



| AUTHORISED VIE | WERS FORM | |
|---|--|--|
| | | |
| Customer's full nar | ne: | |
| Entity / personal co | ode: | |
| view and/or receive a not limited account Bank from its banking therefore confirms ar secrecy applicable to | all banking information and docu statements, balances, Transaction g secrecy obligation with respect and agrees that the implementation | ed in this power of attorney below (hereinafter the "Designated Persons") to uments concerning the Customer's accounts and Transactions (including but ons performed, substantiating documents etc.). The Customer releases the to the Designated Persons within the framework of this authorization and on of these instructions will not constitute a violation of the laws on banking es that the Bank shall not be obliged to inform the Customer when the horization. |
| | | consequences arising from this authorization and acknowledges that the Bank signated Persons or a third parties may make thereof. |
| any mean such as tel | | Designated Persons access to information related to Customer's account via ecific application which the Bank will put at the Designated Person's disposal nees thereof. |
| The Designated Perso | ns are not entitled to pass the rig | ghts granted by this power of attorney to any other person. |
| STATUS OF POWE | R OF ATTORNEY (please tick one | |
| | | es the new list of Designated Persons and overrules all previous power of the Customer to the Bank in connection with the authorisations indicated |
| by the Custom indicated here case this pow description of | ner to the Bank earlier in connect ein supplements the list of Design ver of attorney defines different | d in addition to currently valid power of attorney (-s) granted and presented tion with the authorisations indicated herein. The list of Designated Persons nated Persons indicated in former valid Customer's power of attorney (-s). In extent of rights to compare with former power of attorney (-s), the new m shall apply both to the newly Designated Persons indicated herein and to |
| Designated Person | (1) Details | |
| | | |
| Last name, first name: | | |
| Date of birth: | | |
| E-mail address: | | |
| Mobile phone number: | | |
| Designated Person | (2) Details | |
| Last name, first name: | | |
| Date of birth: | | |
| E-mail address: | | |
| Mobile phone | | |

number:



| Designated Person (3) De | ails |
|--|---|
| Last name, first name: | |
| Date of birth: | |
| E-mail address: | |
| Mobile phone number: | |
| Designated Person (4) De | ails |
| Last name, first name: | |
| Date of birth: | |
| E-mail address: | |
| Mobile phone number: | |
| Designated Person (5) De | ails |
| Last name, first name: | |
| Date of birth: | |
| E-mail address: | |
| Mobile phone number: | |
| | remain valid until the Bank is notified in writing of it's revocation or until the respective new version of ted to replace this and is accepted by the Bank. |
| I the undersigned hereby co | nfirm that I have full power to solely act on behalf of the Customer and have the right to authorise third the Customer in the capacities indicated above |
| | SIGNATURE OF DIRECTOR OR AUTHORISED PERSON |
| First name, last name: | Signature and Seal (if |
| Position held: | applicable): |
| Company name (if representative is the compa | ny): |
| Date: | |
| Location: | |



BENEFICIAL OWNERSHIP QUESTIONNAIRE

The ultimate beneficial owner is an individual, who is either:

- holding, or directly or indirectly controlling at least 10 percent of a fixed capital, or voting shares, or controlling the
 operations of a Customer in other way, or
- holding, directly or indirectly, title to the property of a legal entity other than a Customer, or controlling at least 10 percent of the property of such legal entity, or
- an individual for the benefit of which the Bank account is opened.

If the Customer is part of the group of entities, please enclose illustrative chart disclosing full ownership structure of the Customer.

| Customer's full name: | | | | | |
|---|------------------------|------------------------|--|-----------------|--|
| Entity / personal code: | | | | | |
| Is the Customer owner | by other legal entity | y (-ies): 🗆 Yes¹ 🔻 🗀 I | No | | |
| | INFORM | MATION OF THE ULTIMA | TE BENEFICIA | AL OWNER (UBO) | |
| First name, last name: | | | | | |
| Citizenship (s): | | Date of birth: | | ID code: | |
| Place of birth: | | | | | |
| ID document (indicate): | | | Country o | f issue: | |
| No. | | Date of issue: | | Valid until: | |
| Permanent residence ad | ldress | | | | |
| City: | | Country: | | Postal code: | |
| Percentage of shares, vo | oting rights held/cont | rolled (%) | | | |
| Is this person a PEP ² : | ☐ Yes ☐ No | | | | |
| Is this person a citizen or resident of the USA for the purposes of U.S. tax law³: ☐ Yes⁴ ☐ No | | | | | |
| By signing below I hereby confirm that I am duly authorized to fill in this questionnaire in the name and for the account of the Customer and that the information provided in this questionnaire is true and correct. I hereby undertake to immediately inform Pacific Private Bank Limited in writing of any changes in the information provided. | | | | | |
| | SIGNATU | RE OF THE CUSTOMER'S | AUTHORISE | D PERSON OR UBO | |
| First name, last name, position held: Company name (if representative is a company): | | a | ignature nd Seal (if pplicable): | | |
| Date: | | | | | |
| Location: | | | | | |

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 $^{^{1}\,}$ Please enclose chart disclosing and explaining full ownership structure of the Customer.

² PEP or Politically Exposed Person is a private individual who is or has been entrusted with prominent public functions, including heads of any state or government, senior politicians, senior government, judicial or military officials, senior executives of publicly owned corporations or international organizations and important political party officials. The term also includes the immediate family members or persons known to be close associates of such persons. Close family members are: the spouse, the person with whom partnership has been registered (hereinafter called cohabitant), the parents, brothers, sisters, grandparents, grandchildren, children and children's spouse, children's cohabitants. Close associates are: a natural person together with whom the person who is or have been entrusted with prominent public function are or have been participating in the same legal person or maintaining other business relations or who is the only owner of legal person incorporated and acting de facto in the interest of person who is or have been entrusted with prominent public function.

³ A legal entity is considered a U.S. resident if, inter alia, it is a partnership, company or corporation registered in or established under the laws of the USA, any state, or the District of Columbia. An individual may be considered a U.S. resident if, inter alia, he / she is a U.S. citizen (by virtue of place of birth or naturalization, notwithstanding belonging to any other country), an individual holds a permanent residence permit in the USA (Green Card), an individual physically presents in the USA for ≥31 days during the current calendar year and ≥183 days during the last 3 years.

⁴ Please fill in W-9 form.



| ONLINE TRADING FORM | | | | |
|---|---|--|--|--|
| | | | | |
| | | | | |
| Customer's full name: | | | | |
| Entity / personal code: | | | | |
| Please answer the following questionnaire: | | | | |
| A. What is your Online-Trading level of experience? Basic knowledge (< 1 year) Experienced (1 - 5 years) Very experienced (> 5 years) B. What is your approximate investment capital? < 5 000 € 5 000 € - 25 000 € 25 000 € - 100 000 € 100 000 € - 500 000 € More than 500 000 € | D. How many transactions per month do you usually perform? O-5 transactions per month 5-10 transactions per month 10-50 transactions per month 50-100 transactions per month > 100 transactions per month Purpose of opening an account with the Bank: Capital protection (low risk) Investment (moderate risk) Speculation (high risk) | | | |
| C. What type(s) of instrument(s) would you like to negotiate? CFD Bonds Futures Contracts Forward Contracts Currency options FX Mutual Funds Stocks | | | | |

RISK ACKNOLEDGMENT

- 1. The Customer hereby acknowledges:
 - being fully aware of the risks inherent in trading in leveraged instruments (such as CFD or Forex) and other
 derivative financial instruments (including options, forwards, futures and other futures contracts), and in
 particular the risk of losing all of its investments being with The Bank.
 - he has read and understood General Business Terms (including the Risk Disclosure), all warnings on the website www.pacificprivatebank.com and understood the warnings about the risks inherent in trading leveraged instruments and other derivative financial instruments.
 - that The Bank has informed him/her orally or in writing, that the leverage offered including CFDs and Forex represented a significant risk and that they shall be used wisely.
 - that The Bank has encouraged him/her, orally or in writing, to get proper and sufficient training on the demonstrative trading platform before making a deposit on a real trading account.



- 2. By signing this Form, the Customer takes full responsibility for the risks inherent in or resulting from activities on financial instruments and products offered on trading platform (in particular activities said on margin or leveraged).
- 3. Moreover the Customer accepts that:
 - any transaction or contract executed or performed to open an account at The Bank shall be executed or performed between the Bank and the Customer, and not between the Customer and the online trading platform supplier;
 - he does not authorize the Bank to contract directly with the online trading platform supplier, and to tie contractually the Customer and the latter supplier;
 - the online trading platform supplier does not authorize the Bank to act as his agent;
 - he shall not use the online trading platform in such a way that could generate for the online trading platform supplier a legal obligation with third parties.
- 4. Notwithstanding any other provision of this Form, the Customer acknowledges and agrees that:
 - all trades, contract and transactions made pursuant to this Account Opening Form are made between The Bank and the Customer as principals, and not between the Customer and Saxo Capital Markets Pte. Ltd. ("Saxo Capital Markets");
 - The Bank is not authorised by the Customer to contract or transact with Saxo Capital Markets as agent of the Customer or to bind the Customer to Saxo Capital Markets in relation to any purpose, product, service, trade, contract or transaction;
 - The Bank is not authorised by Saxo Capital Markets to contract or transact with the Customer as agent of Saxo Capital Markets or to bind Saxo Capital Markets to the Customer in relation to any purpose, product, service, trade, contract or transaction; and
 - the Customer shall not use the Trading Platform or otherwise act or transact, in any manner which would create any liability or obligation on Saxo Capital Markets' part to any third party.
- 5. By signing this Form, I certify that:
 - I have read, understood and accepted the General Business Terms (including the Risk Disclosure) and all the leading documents and content available on the Bank's website www.pacificprivatebank.com (which may be modified over time), and all these documents together with this Form constitute Online trading agreement entered into between myself and the Bank;
 - I have read, understood and accepted the General Terms and Conditions of the Bank which constitute an integral part of this Online trading agreement;
 - I have received additional in-depth oral information on products and risks associated with; and I have received satisfactory answers to all my requests related to the General Conditions, Specific Conditions and the products and services offered.

| SIGNATURE OF DIRECTOR OR AUTHORISED PERSON | | | |
|--|--|---------------------------|--|
| First name, last name: | | Signature and Seal (if | |
| Position held: | | applicable): | |
| Company name (if representative is the company): | | | |
| Date: | | | |
| Location: | | | |