



KYC Form for Legal Person (Entities)

Date:

Type: New Update

(In Case of Updation, Please Update Only Changed Information).

Corporate Entity Information:

Legal Name of the Entity:Date of Incorporation:.....

Date of Commencement of Business: Country of Incorporation/Formation:

Registered Office Address/Place of Business:

City/Town: Province/ Emirate: Country:

P.O. Box: Postal code:

Tel No. Cellphone No. Fax No.

Email:

The Legal Form of The Business:

Sole Proprietorship Civil Company Limited Liability Company (LLC) Partnership

Private Share Holding Company Public Share Holding Company

Branch of Foreign Companies/Representative Office Branch of GCC companies

Branch of Free zone company Branch of Dubai based companies

Branch of UAE based companies

Nationality: Type of ID: Trading License/CR Trading Register Certificate Other

.....ID No.Expiry Date:

Authorized Signatories' Names and Capacities/Designations:

1. Name: Capacity/Designation:

2. Name: Capacity/Designation:

3. Name: Capacity/Designation:

This Authorization is Given as Per to: Trading License/CR Trading Register Certificate

Bylaw/Article of Incorporation Article of Associations

Resolution Issued by The General Assembly or Board of Directors

Authorized Signatory 1

Identification Document Type of the Authorized signatory:

ID Passport Family Book Other (Please Specify)

Client's Authorized Signatory Sign.





- ID Document No.
- Issuance Place: Expiry Date:
- Tel No. Cellphone No. Email:

Authorized Signatory 2

Identification Document Type of the Authorized Signatory:

- ID passport family book other (please specify)

- ID document No.
- Issuance place: Expiry date:

Tel No. Cellphone No. Email:

Authorized Signatory 3

Identification Document Type of the Authorized Signatory:

- ID passport family book other (please specify)

- ID document No.
- Issuance Place: Expiry Date:

Tel No. Cellphone No. Email:

Mode of Communication to Receive Reports: Mail E-mail Fax By hand/Personal Receipt SMS

Mode of Communication to Receive Notifications: Mail E-mail Fax By hand/Personal Receipt SMS

Mode of Orders giving: In Person Mail E-Mail Fax Phone

Sector the Entity Belongs to:

- Banks Industry Services Insurance Real Estate Investment And Financial Services Communication Transportation Consumer Commodities others, please specify

Other Information:

- Is the client, chairman or a director, general manager, executive manager or an employee has occupied a position which within his responsibilities and duties would be an insider information person at a public listed company in the state or one of his relatives up to the second degree?

Yes Noif you answer yes, print the company's nameCapacity
 Relativity..... Name of the relative

- Does the client, chairman or a director, general manager, executive manager or an employee occupies a position of chairman or a director, general manager, executive manager or an employee at a licensed brokerage firm by UAE Securities & Commodities Authority (SCA) or one of his/her relatives up to the 2nd degree: Yes No

Client's Authorized Signatory Sign.





(1st degree includes father, mother, son, daughter and spouse. 2nd degree includes: grandfather, grandmother, sibling, Grandsons).

- Is there commercial partnership between you and one of company's director or anyone relates to one of them?

Yes No if yes, please define this partnership

I hereby acknowledge to inform you in writing of any change would occur to my status or relationship with any listed companies in the state within 7 working days of occurrence of such change, Al Sahel Shares Center holds no responsibility due to any damage or fines would be caused due to failure to notify us properly and timely in writing of such change, I take full responsibility for any possible consequences or fines.

For legal person, is there commercial partnership between you and any of the company's director or anyone relates to one of them? Yes No if yes, please explain it

- Do you have more than 5% in any public listed company, Yes No. if yes, please provide name of the company
- Reasons for and the purpose of opening account.....

Clients' Financial Information:

- Annual Turnover (in AED Currency):
 Less than 100,000 100,000 – 500,000 +500,000 – 2,500,000 More than 2,500,000
- Bank information (which will be used to transfer dividends):
 - Bank name:Country:Branch:
 - Account No.IBAN No.
- Allocated amount of money designated for investment (in AED. Approximately) :
- Source of Income/Funds:
- Do you have financial obligations/loans: Yes No , if yes, please explain
- Do you have a trading account at other brokerage firm: Yes No.....please name it/them

Client's Investment Information:

- Investment Experience in Capital Markets (Equities): None Limited (less than 1 year) Moderate (from 1 to 3 years) Experienced (more than 3 years)
- Investment Strategy: Long term Short term Speculation (you can choose more than one choice).
- Preferred Sector: Banks Industry Services Insurance Real Estate Investment and Financial Services Communication Transportation Consumer Commodities All of them
- Are there specific companies you prefer to invest in? Yes No ...if yes, please list them below:
 1. 2. 3.
 4. 5. 6.
- Risk Tolerance: Low Medium High (Please read explanation below).

Client's Authorized Signatory Sign.



It means the client's ability to tolerate total loss of the principal amount taking into consideration the following factors:

- The positive relationship between risk and return, if required return increase, risk will increase too.
 - Client's degree of dependence on the principal invested amount to meet his/her household needs.
 - How do the client classify himself/herself as to risk acceptance level, preservative, risk-taker
 - Client's experience in equities investment.
- General Investment Objectives: Capital Protection Capital Growth/Appreciation Income Balanced (Income with Capital Appreciation)
 - Do you have any commercial activity with any internationally sanctioned countries Yes No. if yes, please explain this activity

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Client Name: Designation:.....

Signature:Date:

FOR OFFICE USE ONLY

1. KYC verification carried out by (against attached list of required documentation)

Customer Service Dept.: Emp. Name:Date:Signature:.....

2. KYC review carried out by:

Compliance /AML Dept.: Emp. Name:Date: Signature:.....

3. KYC approval carried out by:

Operations Dept.: Emp. Name: Date: Signature:.....

Required Documentation for Opening Trading Account:

1. Trading account opening agreement properly completed/filled in and signed by two parties.
2. Copy of the valid C.R issued by a competent authority and stamped by the company's seal.
3. Copy of the article of association/bylaw/memorandum of association and any amendments thereafter and stamped by the company's seal.
4. In charge person(s) copy of valid ID properly stamped by the company's seal.
5. Copy of the Article of association/bylaw or memorandum of association or board's or partner's decision which should clearly stipulate that the company is allowed to invest in securities.
6. Copy of the Board's decision approving the opening of the trading account and granting the powers to the authorized person(s) to sign, manage, give orders and operate the trading account in the name and for the company's account (buy and sale orders, and transfer of shares inside and outside).
7. A list of the names of the persons authorized to manage and operate the trading account following what is stated in the commercial register, the memorandum of association, the company's articles of association

Client's Authorized Signatory Sign.





- or the decision of the board, as the case may be, and copy of valid ID for each of them (properly stamped by the company's seal).
8. copy of the valid ID of the owners whose names are mentioned in the memorandum of association/articles of association, as per the most updated one. (Properly stamped with the company's seal).
 9. Any professional licenses issued by a competent authority to conduct certain activities.
 10. List of person(s) who will be receiving end of the day trading transactions confirmation and names of person(s) trading and any contact person you would like to designate.
 11. Bank account No. message (should be properly stamped by the bank's seal or has bank's logo and IBAN No. which will be designated for receiving dividends.