

BUSINESS ACCOUNT APPLICATION

Please complete ALL sections of this form.

Any sections which do not apply to you should be marked with “N/A” to indicate that the relevant question has been considered by you. Leaving sections blank may cause delays in your account application process.

ADS Securities LLC (“ADSS”) will assess whether it is appropriate for us to provide Services to you, based on the information provided on this Application Form. For this reason, it is essential that you immediately inform ADSS in writing of any changes in the information which you have provided.

ADSS requires the following documentation in addition to a completed Application Form:

Your application must be accompanied by legible certified (true) copies of ALL documentation from Section A. Please refer to Sections B and C for proof of identity and proof of residential address documentation accepted.

SECTION A (Provide ALL of the following)

- Certificate of Incorporation, Formation or Organization
- Articles of Association, Formation, Organization or Incorporation
- Share Certificate or Official Document outlining the complete ownership structure identifying the beneficial owners with 5% or more ownership in the company
- Proof of identity and residential address for all controlling officers
- Proof of identity and residential address for all beneficial owners with 5% or more ownership in the company
- Proof of registration with a government regulatory agency (if applicable)
- Trade License (if applicable)
- Certified Board Resolution – see page 5 of this application

*If you are an entity which is regulated by a government agency which maintains this information publically, you do not need to submit the requested documentation.

SECTION B (Provide ONE of the following)

- Passport
 - MUST be within validity period
- Government Issued ID
 - MUST be accompanied by an attestation that you do not hold a valid passport
 - MUST be within validity period – not more than 10 years from date of issue
 - MUST show legal name, date of birth, nationality & registered ID number

SECTION C (Provide ONE of the following)

- Utility Bill
 - MUST state your current residential address as listed on the application form
 - MUST have been issued within the last 3 calendar months
- Bank Statement
 - MUST state your current residential address as listed on the application form
 - MUST have been issued within the last 3 calendar months
 - MUST be issued from the financial institution * an online PDF is acceptable; online screen shots are not acceptable
- Lease / Tenancy Agreement
 - MUST state your current residential address as listed on the application form
 - MUST be within the lease term

CERTIFYING YOUR DOCUMENTS

For the copies of your documents to be considered certified, they must be signed by ONE of the following:

- An ADS Securities employee can certify your documents upon seeing the ORIGINALS
- A registered lawyer
- A registered notary
- A chartered accountant
- A government ministry
- A designated bank official
- A designated postal official
- A designated police official
- An embassy or consulate

ACCOUNT INFORMATION

Account Type (Choose One): MT4 ADSS Trader

Introduced By (for Introduced Accounts Only): _____

Managed By (for Managed Accounts Only): _____

If your account will be a managed account, please contact your money manager to obtain a copy of a Limited Power of Attorney which you need to complete and sign and provide to ADSS.

ENTITY INFORMATION

Registered Business Name: _____

Registered Address: _____

Building Name/Number/Floor: _____ Suite/Apt#: _____

City: _____ State/Province: _____ Postal Code: _____

Country: _____

Mailing Address (If different from above): _____

P.O. Box: _____ Country: _____

Country of Formation, Organization, Incorporation: _____

Regulatory Agency: _____ Registration Number: _____

Does the entity have a place of business in the United States: _____

Primary Email (for delivery of electronic statements): _____

AUTHORIZED SIGNER/PRIMARY CONTACT PERSON

Legal First Name: _____ Middle Name: _____

Legal Last Name (Surname): _____

Country of Residence: _____ Country of Citizenship: _____

Date of Birth (MM/DD/YYYY): _____ Telephone #: _____

Primary Email: _____

Title: _____ % of Ownership _____

AUTHORIZED SIGNER/SECONDARY CONTACT PERSON (IF APPLICABLE)

Legal First Name: _____ Middle Name: _____

Legal Last Name (Surname): _____

Country of Residence: _____ Country of Citizenship: _____

Date of Birth (MM/DD/YYYY): _____ Telephone #: _____

Primary Email: _____

Title: _____ % of Ownership _____

BENEFICIAL OWNERS AND CONTROLLING OFFICERS

Legal First Name: _____ Middle Name: _____
 Legal Last Name (Surname): _____
 Country of Residence: _____ Country of Citizenship: _____
 Date of Birth (MM/DD/YYYY): _____
 Title: _____ % of Ownership _____

Legal First Name: _____ Middle Name: _____
 Legal Last Name (Surname): _____
 Country of Residence: _____ Country of Citizenship: _____
 Date of Birth (MM/DD/YYYY): _____
 Title: _____ % of Ownership _____

Legal First Name: _____ Middle Name: _____
 Legal Last Name (Surname): _____
 Country of Residence: _____ Country of Citizenship: _____
 Date of Birth (MM/DD/YYYY): _____
 Title: _____ % of Ownership _____

BANK INFORMATION

Note that in accordance with ADSS’s policies, ADSS can only send and receive funds from two bank accounts. Whichever accounts you list below are the only two accounts which ADSS can send and receive funds from throughout your relationship with ADSS, unless you were to close one or both of the accounts, then proof of account closure would be required to amend your bank account details.

ORIGIN OF FUNDS - ACCOUNT 1

Accountholder’s Name: _____
 Bank Name: _____
 Bank Address: _____
 Account or IBAN Number: _____ Swift Code/ABA (Routing Number): _____

ORIGIN OF FUNDS - ACCOUNT 2

Accountholder’s Name: _____
 Bank Name: _____
 Bank Address: _____
 Account or IBAN Number: _____ Swift Code/ABA (Routing Number): _____

FINANCIAL & CUSTOMER INFORMATION

1. What is the entity’s estimated annual income?

- | | | |
|--|--|--|
| <input type="checkbox"/> Under \$25,000 | <input type="checkbox"/> \$25,000-\$49,999 | <input type="checkbox"/> \$50,000-\$99,999 |
| <input type="checkbox"/> \$100,000-\$249,999 | <input type="checkbox"/> \$250,000-\$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

2. What is the entity’s Net Worth (assets minus liabilities)?

- | | | |
|--|--|--|
| <input type="checkbox"/> Under \$25,000 | <input type="checkbox"/> \$25,000-\$49,999 | <input type="checkbox"/> \$50,000-\$99,999 |
| <input type="checkbox"/> \$100,000-\$249,999 | <input type="checkbox"/> \$250,000-\$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

3. What is the origin of wealth? _____
4. Initial Deposit: \$ _____
5. Has the business or any of its principals, beneficial owners, or controlling persons ever been licensed or authorized with any regulatory authority? Yes No
If yes, indicate which regulator and provide the ID number: _____
6. In the business or any of its principals, beneficial owners, or controlling persons required to be registered with any other regulatory agency? Yes No
If yes, indicate which regulator: _____

TRADING INFORMATION

1. Have you had experience trading the following instruments: (please check all which apply)
 Exchange Traded Derivatives OTC Derivatives Securities
2. If yes, please check one of the below:
 Less than 1 year 1-5 years 5 or more years

REFERRAL

How did you hear about ADSS Securities?

- | | | | |
|------------------------------------|------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Magazine | <input type="checkbox"/> Online Ad | <input type="checkbox"/> Friend | <input type="checkbox"/> Forum |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Seminar | <input type="checkbox"/> Search Engine | <input type="checkbox"/> Other _____ |

YOU SHOULD NOT SIGN THE APPLICATION FORM IF YOU ARE UNSURE AS TO THE NATURE OF THE RISKS INVOLVED IN TRADING USING THE ADSS SERVICES.

MARGINED TRANSACTIONS CARRY A HIGH LEVEL OF RISK TO YOUR CAPITAL. IT IS POSSIBLE TO LOSE MORE THAN YOUR INITIAL INVESTMENT. BEFORE SUBMITTING THIS APPLICATION FORM, FOR YOUR OWN BENEFIT AND PROTECTION YOU SHOULD CAREFULLY READ THE INFORMATION NOTICE, RISK DISCLOSURES, THE ORDER EXECUTION POLICY AND THE TERMS OF BUSINESS.

WE HIGHLY RECOMMEND THAT YOU DOWNLOAD OR PRINT A COPY OF THE RISK DISCLOSURES, THE ORDER EXECUTION POLICY AND THE TERMS OF BUSINESS AND REVIEW THEM. WE FURTHER RECOMMEND THAT YOU REGULARLY REFER TO OUR WEBSITE FOR ANY UPDATES TO THOSE DOCUMENTS.

IF THERE IS ANYTHING IN THE DOCUMENTS REFERRED TO ABOVE THAT YOU DO NOT UNDERSTAND, PLEASE CONTACT A MEMBER OF OUR PRIME SERVICES TEAM FOR MORE INFORMATION BY CALLING +971 2 652 9777. ALTERNATIVELY YOU CAN EMAIL OUR PRIME SUPPORT TEAM AT PRIMESUPPORT@ADS-SECURITIES.COM

CUSTOMER ACKNOWLEDGEMENT

I/WE HEREBY REPRESENT THAT, AND BY SIGNING BELOW, THE INFORMATION PROVIDED BY ME/US ON THIS BUSINESS ACCOUNT APPLICATIONS IS TRUE AND ACCURATE. I/WE FURTHER REPRESENT THAT I/WE WILL NOTIFY ADS SECURITIES LLC (“ADSS”) OF ANY MATERIAL CHANGES TO THIS APPLICATION IN WRITING. ADSS RESERVES THE RIGHT, BUT HAS NO DUTY, TO VERIFY THE ACCURACY OF INFORMATION PROVIDED, AND TO CONTACT ANY BANKS, AGENCIES OR OTHERS REFERENCED ON THIS APPLICATION AS IT DEEMS NECESSARY.

ACKNOWLEDGED BY:

_____ OFFICER 1 – TITLE - NAME	_____ SIGNATURE	_____ DATE
_____ OFFICER 2 – TITLE - NAME	_____ SIGNATURE	_____ DATE
_____ OFFICER 3 – TITLE - NAME	_____ SIGNATURE	_____ DATE
_____ OFFICER 4 – TITLE - NAME	_____ SIGNATURE	_____ DATE

CERTIFIED BOARD RESOLUTION

I, _____ the undersigned Company Secretary, of _____ (“Company”) hereby certify that a meeting of the Board of Directors of said Company was held on _____ and the following resolutions were duly passed by the Board of Directors.

It was resolved as follows:

1. That an account(s) (“Account”) be opened with ADS Securities LLC (“ADSS”) for the purposes of trading foreign exchange, bullion, contracts of difference and other margin instruments as offered by ADSS from time to time (“Instruments”).
2. That the following individuals, whose names and specimen signatures appear below (“Authorised Signatories”), shall be and are hereby jointly and severally authorised to undertake the following in conjunction with the Company’s account(s) held with ADSS:
 - a) To sign any document in connection with the opening and operation of the Account;
 - b) To authorise fees and commissions to be paid to ADSS or third party from the Account;
 - c) To authorise deposits to be made into and withdrawals to be made from the Account;
 - d) To receive requests and demands for additional margin, notices of intention to purchase or sell any Instrument and any other notices or demands of whatever character;
 - e) To receive and confirm the correctness of notice, confirmations, requests, demands and confirmations of every kind;
 - f) To place electronic and oral orders for Instruments with ADSS directly or through the System in the Account;
 - g) To authorise and appoint traders, Account Managers, or other persons or entities to place electronic and oral orders for instruments with ADSS directly or through the System in the Account;
 - h) To settle, compromise, adjust and give release on behalf of the Company with respect to any and all claims, disputes and complaints relating to the Account;
 - i) To perform all terms and provisions of any and all agreements executed with ADSS and to take any action relating to any of the foregoing matters.
3. That the Authorised Signatories for the Account be:

Name	Title	Signature Specimen

4. That these resolutions be communicated to ADSS and shall remain in force and that ADSS shall be entitled to rely on the same until an amending resolution shall be passed and a copy certified by an officer of the Company shall have been received by the Company.

I further certify that the Company has the power under its governing instruments and applicable law to take any action authorised herein and contemplated by the foregoing resolutions.

ACKNOWLEDGED BY:

COMPANY SECRETARY NAME

SIGNATURE

DATE