

First Equity Limited

CUSTOMER APPLICATION FORM

Please read this Application Form carefully.

NOTICE

The Application Form, together with our Customer Agreement and Schedule of Charges, will constitute a legal agreement between you and First Equity Limited. If you are unsure about how to complete any section of this form, please contact us.

This Form is applicable for Customers wishing to open a nominee account to be held with Global Prime Partners Ltd (GPP).

Please read this Application Form carefully. The Application Form, together with our Customer Agreement and Charges Sheet, will constitute a legal agreement between you and First Equity Limited. If you are unsure about how to complete any section of this form, please contact us.

PLEASE USE BLOCK CAPITALS TO COMPLETE THIS FORM

Please complete the following:

APPLICANT

Title	First Name	Surname
Permanent Residential Address	<i>Address 1</i>	
	<i>Address 2</i>	
	<i>Address 3</i>	
	<i>Address 4</i>	
	<i>County</i>	<i>Post Code</i>
Date of Birth	Place of Birth	
Nationalities (all)		
Daytime Tel No.	Mobile Tel No.	
Email Address		
Employer	Occupation	

Please tick one:

SERVICE LEVEL

Execution-only Dealing	Advisory Service	Discretionary Managed
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Please tick all that are required:

ACCOUNT TYPES

Stockbroking Account	ISA Account (<i>for sole applicants only</i>)
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Please provide bank details of the account to be used for settlement of your account. We can only accept payments in the name of the account holder.

BANK DETAILS FOR PAYMENT REQUESTS*

Name of Bank

Account Name**

Sort Code

Account Number

BIC (if applicable)

IBAN (if applicable)

Bank Address

Country

Post Code

* These instructions are for you, the client, in the event that you wish First Equity Limited to remit funds to you.

** Must be in the name of the applicant(s).

COUNTRY OF RESIDENCE FOR TAX PURPOSES

Please indicate all countries in which you are resident for the purpose of that country's income tax and the relevant tax identification number (TIN) or functionalequivalent.

COUNTRY

TIN (National Insurance / Tax number)

For a joint account, please provide this information for both applicants.

IDENTITY VERIFICATION

We are required by law to confirm your identity and comply with Anti-Money Laundering legislation. By submitting this application, you authorise us to make searches about you through reference agencies who will supply us with information for the purpose of verifying your identity and details to which they have access. We reserve the right to make any additional enquiries considered necessary to confirm each applicant's identity. A record of any search will be retained.

Please provide the forms of identification for the applicant(s) as outlined in APPENDIX A - Identity Verification for Individuals.

PRIVACY POLICY

The Firm's Privacy Policy referred to in the Customer Agreement can be made available and can also be found on our website, www.FirstEquitylimited.com. In order to develop and enhance our service to you we would like to be able to inform you of new products and services, including those of other organisations not connected with First Equity Limited, where we consider that they may be of interest or benefit to you. We will never pass your details on to third parties for them to contact you directly. If you consent to this, please indicate your agreement by ticking the "Yes" box below. You may of course withdraw your consent at any time by giving notice in writing to the firm.

I/we agree that you may contact me/us about your other products and services: *(Please tick if you agree)*

YOUR CONSENTS

1. I/we confirm that the information provided in this form is, to the best of my/our knowledge and belief, accurate and complete.
2. I/we confirm that I/we have read, understood, and agree to be bound by the terms and conditions of the Customer Agreement, inclusive of the GPP custody terms set out in Schedule 1 to that Agreement, and acknowledge and understand the risks contained within the Risk Warning.
3. I/we undertake to notify First Equity Limited promptly of any change in circumstances which causes the information contained herein to become incorrect or incomplete and to provide an updated declaration of such a change in circumstances.
4. I/we am/are aware that in certain circumstances First Equity Limited may be obliged to share this information with UK tax authorities who may pass it on to other tax authorities.

Client

Signature(s)

Name(s)

Date

To be signed by both applicants in the case of a joint account.

INFORMATION REQUIRED ABOUT YOU

PLEASE COMPLETE ALL OF THE FOLLOWING SECTIONS

Gross Annual Income £

Quoted Equity / Bond Investments £

Cash / Savings £

For approximately how long have you dealt in the stock market? years

What is the usual size and frequency of dealing? Usual Size £ Frequency trades per month

Where did you hear about us?

JOINT ACCOUNT APPLICATION

Please complete the following for the second applicant if opening a joint account:

APPLICANT 2

Title First Name Surname

Permanent Residential Address

Address 1

Address 2

Address 3

Address 4

County

Post Code

Date of Birth

Place of Birth

Nationalities (all)

Daytime Tel No.

Mobile Tel No.

Email Address

Employer

Occupation

APPENDIX A

Identity Verification for Individuals

We are required by law to confirm your identity, address and source of funds for Anti-Money Laundering purposes prior the account opening. The following documents are acceptable from the below list:

ONE of the following government-issued identification documents:

- Valid passport
- Valid photo-card driving license (full or provisional with full address).

ONE from the following original or certified documents for address verification dated within 3 months of the application:

- Current council tax demand letter, or statement (most recent in fiscal year)
- Current bank statement (internet statement not accepted)
- Utility or phone bill or statement – e.g. Gas, Water, Electricity or telephone (not mobile).

Further verification information and documents may be requested.

In the event that we require a certified copy of a document, the table below sets out acceptable certifiers for identification documentation:

Director, Officer or Manager of a regulated financial services business
Approved Financial Professional
Member of Parliament (MP)
Magistrate

Local Councillor
Lawyer
Civil servant (permanent)
Chartered Accountant
Post Office - Postmaster

The required wording for certification on each photographic identification must be:

“Certified to be a true likeness and copy of the original seen by me”

The required wording for certification for non-photographic identification must be:

“Certified to be a true copy of the original seen by me”

Accompanying the above wording should clearly state the following details of the certifier:

Name
Date of certification
Position held
Signature

Address
Contact details
Official stamp of their office (if possible)

All certifications must be dated within 3 months of the application and we cannot accept a certified copy of a copy.

NB: SELF CERTIFICATION IS NOT PERMITTED IN ANY CIRCUMSTANCES