



CORPORATE ACCOUNT APPLICATION FORM



Before you start...

This application form is for corporate accounts only, if you require an individual one please apply through www.adss.com. This form will need to be signed by two authorised representatives.

Before applying please ensure you have read our:

- Risk Warnings
- Terms of Business
- Privacy Policy
- Order Execution Policy
- Conflicts of Interest Policy; and
- Schedule of Charges

All the above are available on our website www.adss.com/legal.

Board Resolution

Your board must meet and pass certain resolutions to enable your company to apply for an account and trade with ADS Securities LLC ("ADSS"). This includes authorising the signing of this application and confirming the authorised signatories. Please refer to page 10 of this application form.

Supporting Documents

With your application you must submit the following additional documents:

- Certified copy of Certificate of Incorporation, Formation or Organization
- Certified copy of Memorandum and Articles of Association
- Proof of registered address
- Proof of trading address (if different to the above)
- Certified copy of Register of Members or Shareholders
- Copy of most recent bank statement that will be used to fund or withdraw money to
- Certified copy of registration with a government regulatory agency (if applicable)
- Certified copy of Trade License (if applicable)

You may not need to provide all of the Supporting Documents listed above and your ADSS Sales contact will provide you with the applicable list of Supporting Documents, if you fall under one of the following categories (please tick the relevant box):

- an Authorised Person or authorised Market Institution;
- a Regulated Financial Institution whose entire operations are subject to regulation and supervision, including AML regulation and supervision, in a jurisdiction with AML regulations which are equivalent to the standards set out in the FATF recommendations;
- a Subsidiary of a Regulated Financial Institution if such Subsidiary observes the same AML standards as the Regulated Financial Institution;
- a Company whose securities are listed on a Regulated Exchange and which is subject to standard disclosure obligations;
- a Government body or a non-commercial government entity in a FATF member country.



Identification Documents

For Shareholders and Beneficial Owners with 25% or more ownership in the company, Controlling Persons and Authorised Signatories: One of the items listed in each of the Sections A and B below must be provided.

Section A (Provide ONE of the following)

- **Certified copy of Passport**
 - MUST be within validity period
- **Certified copy of 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 B (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 as a true and complete copy by ONE of the following:

- An ADSS 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

Foreign Account Tax Compliance Act

To comply with the Foreign Account Tax Compliance Act (FATCA), ADSS is required to obtain a US tax certificate (W-8 series as appropriate) from corporate clients. Please refer to the IRS website or consult your tax advisor.

Please note that we are unable to consider your application until the above is received and in some cases we may ask for further information or documentation.

Please return this application form along with its attachments to our Sales Team. If you have any questions please reach out to your ADSS Sales contact.



ACCOUNT INFORMATION

Introduced By
(for Introduced Accounts Only)

Managed By
(for Managed Accounts Only)

If your account will be a managed account, you will need to complete a copy of the Limited Power of Attorney ("LPOA") available on our Website, sign the LPOA together with your money manager and provide it to ADSS.

1. Company Details

Full Corporate Name (As in Certificate of Incorporation, Formation or Organization)

Country of Incorporation:

Establishment date:

Corporate License No.:

Trading Name:

Nature of Business:

Telephone No.:

Business Email Address:

Registered Office Address:
(P.O. Box No.)

Business Trading Address:
(If different from above)

Company Website:

Company tax residency:

TIN (if available):

Is the company regulated by any Financial Services Regulator? YES NO

Name of Regulator:

Regulatory Number:

Is the Company Listed on a Recognised Stock Exchange? YES NO

Name of Exchange:

Type of Industry:

LEI No.:

GIIN (if applicable):

Primary Email (for delivery of electronic statements):

Primary Contact Person (must be a Director or an Authorised Signatory)

Name:

Email Address:

Contact Number:



2. Director Details

Please list all directors of the Company (or equivalent). If necessary, provide in an additional sheet.

Person 1

Title:

Full Name:

Job Title:

Date of Birth:

Residential Address:

TIN (if available):

Person 2

Title:

Full Name:

Job Title:

Date of Birth:

Residential Address:

TIN (if available):

Person 3

Title:

Full Name:

Job Title:

Date of Birth:

Residential Address:

TIN (if available):

Person 4

Title:

Full Name:

Job Title:

Date of Birth:

Residential Address:

TIN (if available):



3. Beneficial Owner Details

Please list all Beneficial Owners or Shareholders with 25% or more equity or voting rights. If necessary, please provide in an additional sheet.

A) Corporate Owners or Shareholders (Legal Entities)

Legal Person 1

Legal Name:			
Country of Incorporation:		Incorporation Date:	
Registered Office Address:			
TIN (if available):		Holding (%):	

Legal Person 2

Legal Name:			
Country of Incorporation:		Incorporation Date:	
Registered Office Address:			
TIN (if available):		Holding (%):	

B) Individual Beneficial Owners or Shareholders

Person 1

Title:			
Full Name:			
Job Title:		Date of Birth:	
Residential Address:			
TIN (if available):		Holding (%):	

Person 2

Title:			
Full Name:			
Job Title:		Date of Birth:	
Residential Address:			
TIN (if available):		Holding (%):	



4. Additional Authorised Signatory Section

Person 1

Title:

Full Name:

Employment Title:

Date of Birth:

Residential Address:

Corporate Email Address:

Person 2

Title:

Full Name:

Employment Title:

Date of Birth:

Residential Address:

Corporate Email Address:

Person 3

Title:

Full Name:

Employment Title:

Date of Birth:

Residential Address:

Corporate Email Address:

Person 4

Title:

Full Name:

Employment Title:

Date of Birth:

Residential Address:

Corporate Email Address:



5. Financial Details

What is the approximate size of the Company's liquid financial instrument portfolio?
(including cash deposits, investments but excluding any property)

USD

Has the Company ever been declared or subject to bankruptcy or insolvency proceedings?

YES NO

If so, please provide details:

Has the Company or its directors ever been subject to any criminal, regulatory or legal proceedings?

YES NO

If so, please provide details:

Annual Turnover:

USD

Please provide details on the source of the Company's accumulated wealth.

Do you operate as broker or intermediary for any third party?

YES NO

If yes, please provide details:

Funds available for trading with ADSS:

USD

Amount of initial deposit:

USD

Net Assets (USD):

- Under 500,000 500,001 - 2 mil above 2 mil - 10 mil
 above 10 mil - 20 mil above 20 mil

Banking Details *(for all deposits and withdrawals)*

Account Name:

Bank Name and Branch:

Sort Code / BIC:

Bank Account No.:

SWIFT:

IBAN:



6. Confirmation of Knowledge and Understanding

You should not sign this account application form if you are unsure as to the nature of the risks involved in trading using the services provided by ADSS. Margined transactions carry a high level of risk to your capital and it is possible that you lose more than your initial investment.

Declaration

I/We understand and accept that I/We give the declarations below on behalf of the Company and I/We confirm that I/We have proper authorisation to do so:

1. I/We confirm that the Company fully understands the nature and risks of margin trading. I/We understand that I/we can incur losses significantly greater than the amount ("margin") I/We are initially required to deposit to open a margined transaction and should this occur I/We will be required to cover these losses.
2. I/We consent to the provision to the Company of all relevant documents mentioned in this account application form and in particular the Risk Warning, the Cryptocurrency CFDs – Additional Risk Warnings & Conditions (if applicable), the Terms of Business, Order Execution Policy, Conflicts of Interest Policy and Privacy Policy which was made available via the ADSS website (www.adss.com/legal). For the Company's benefit and protection, I/we and the Authorised Signatories, have read and understood these documents. Furthermore, I/we hereby agree that the Company shall be bound by the terms of all these documents and that they form part of its contractual relationship with ADSS.
3. I/We hereby represent that, by signing below, the information provided on this account application form is true and accurate (and not misleading in any material respect). I/We confirm that I/we will notify ADSS immediately of any changes to the information I/we have provided including but not limited to any change in beneficial ownership.
4. I/We hereby confirm that all documents submitted along with this account application form are genuine, true and valid.

I/We agree to hold harmless, release and indemnify ADSS from any and all loss or liability arising from ADSS and its related group companies or affiliates placing reliance on this declaration made by us.

Signatures of two authorised representatives

_____ Signature	_____ Full Name
_____ Position	_____ Date
_____ Signature	_____ Full Name
_____ Position	_____ Date



7. Certified Board Resolution

I/We certify that at a meeting of the directors of [redacted] ("Company")

whose registered office is at [redacted]

held on [redacted] the following resolutions were duly passed:

1. That an account(s) ("**Account**") be opened with ADS Securities LLC ("**ADSS**") for the purposes of trading margin instruments as offered by ADSS from time to time ("**Instruments**") according to the relevant Terms of Business;
2. That each of the persons whose names and specimen signatures appear in the attached Authorised Signatories list (each an "**Authorised Signatory**"), shall be and are hereby jointly and severally authorised:
 - a. To sign any document in connection with the opening and operation of the Account, including the account application form;
 - 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.
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 a Director of the Company shall have been received by the Company.
5. We 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. We agree to hold harmless, release and indemnify ADSS from any and all loss or liability arising from ADSS and its related group companies or affiliates placing reliance on this declaration made by us.

Signature

Director Name

Date

Signature

Director Name

Date

(Affix company stamp)



Authorised Signatories List

Authorised Signatories for _____ (name of Company)
as at _____ (date).

Name:	_____	Job Title:	_____
Signature Specimen:	_____	Signatory Rights: (check one please)	<input type="checkbox"/> Solely <input type="checkbox"/> Jointly

Name:	_____	Job Title:	_____
Signature Specimen:	_____	Signatory Rights: (check one please)	<input type="checkbox"/> Solely <input type="checkbox"/> Jointly

Name:	_____	Job Title:	_____
Signature Specimen:	_____	Signatory Rights: (check one please)	<input type="checkbox"/> Solely <input type="checkbox"/> Jointly

Name:	_____	Job Title:	_____
Signature Specimen:	_____	Signatory Rights: (check one please)	<input type="checkbox"/> Solely <input type="checkbox"/> Jointly

Name:	_____	Job Title:	_____
Signature Specimen:	_____	Signatory Rights: (check one please)	<input type="checkbox"/> Solely <input type="checkbox"/> Jointly

_____ Signature	_____ Director Name	_____ Date
_____ Signature	_____ Director Name	_____ Date