

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
- Cryptocurrency CFDs Additional Risk Warnings & Conditions (if you intend to trade such instruments)

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 11 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 designated bank official
 A designated postal official
 A designated police official
- A government ministry
- 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 INFORMATI	ON					
Introduced By (for Introduced Accounts Only)						
Managed By (for Managed Accounts Only)						
-	aged account, you will need to comogether with your money manager a			Attorney ("LPOA") available on		
1. Company Details						
Full Corporate Name (As in Co	ertificate of Incorporation, Formation or 0	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 F	ecognised Stock Exchange?	☐ YES	□ NO			
Name of Exchange:			Type of Industry:			
LEI No.:			GIIN (if applicable):			
Primary Email (for delivery of e	Primary Email (for delivery of electronic statements):					
Primary Contact Person (mu	st be a Director or an Authorised Sig	gnatory)				
Name:						
Email Address:			Contact Number:			



2. Director Details						
Please list all directors	of the Company (or e	quivalent). If necess	sary, provide in	an additional she	eet.	
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 O	wners 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:								



4. Additional Authorise	ed Signatory Sec	tion		
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)							
Has the Company ever been declared or s	subject to bankruptcy or insolv	vency proceedings?	☐ YES	□ NO			
If so, please provide details:							
Has the Company or its directors ever been	en subject to any criminal, reg	ulatory or legal proceedings?	? □ YES	□ NO			
If so, please provide details:							
Annual Turnover: USD							
Please provide details on the source of th	e Company's accumulated we	ealth.					
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 - 1	10 mil			
	\square above 10 mil - 20 mil	☐ above 20 mil					
Banking Details (for all deposits and without	Irawals)						
Account Name:							
Bank Name and Branch:							
Sort Code / BIC:							
Bank Account No.:							
SWIFT:		IBAN:					



6. Confirmation of Knowledge and Understanding

Signatures of two authorised representatives

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:

- 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.
- 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.

Signature	Full Name
Position	Date
Signature	Full Name
Position	Date



7. Ce	7. Certified Board Resolution							
I/We o	I/We certify that at a meeting of the directors of ("Company")							
whose registered office is at								
held o	n			the following resolution	s were duly passed:			
1.					("ADSS") for the purposes of tradin relevant Terms of Business;	g margin instruments as		
2.				nd specimen signatures a ereby jointly and severally	appear in the attached Authorised authorised:	Signatories list (each an		
	a.	To sign any doo form;	cument in connectio	on with the opening and	operation of the Account, including	the account application		
	b.	To authorise fe	es and commissions	to be paid to ADSS or th	rd party from the Account;			
	c.	To authorise de	posits to be made i	nto and withdrawals to b	e made from the Account;			
	d.		ests and demands f r demands of whate		ices of intention to purchase or sell	any Instrument and any		
	e.	To receive and	confirm the correct	ness of notice, confirmati	ons, requests, demands and confirm	nations of every kind;		
	f.				SS directly or through the System in			
	g.			Account Managers, or o or through the System in	ther persons or entities to place el the Account;	ectronic and oral orders		
	h.		oromise, adjust and relating to the Acco	-	f the Company with respect to any	and all claims, disputes		
	i.	To perform all any of the foreg		ns of any and all agreeme	ents executed with ADSS and to tal	ke any action relating to		
4.	same		ing resolution shall		in in force and that ADSS shall be certified by a Director of the Co			
5.	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.							
Signat	ure		Di	rector Name	Date			
Signat	ure		Di	rector Name	Date			
(Affix c	(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)	☐ Solely ☐ Jointly
Name:		Job Title:	
Signature Specimen:		Signatory Rights: (check one please)	☐ Solely ☐ Jointly
Name:		Job Title:	
Signature Specimen:		Signatory Rights: (check one please)	☐ Solely ☐ Jointly
Name:		Job Title:	
Signature Specimen:		Signatory Rights: (check one please)	☐ Solely ☐ Jointly
Name:		Job Title:	
Signature Specimen:		Signatory Rights: (check one please)	☐ Solely ☐ Jointly
Signature	Director Name		Date
Signature	Director Name		Date