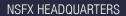


# JOINT ACCOUNT REGISTRATION

# HOLDER 1 Last name:

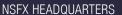
	Last name:		First name:	
	Marital status:		Profession:	
	Date of birth:		Nationality:	
	Correspondence address:			
	Prof. phone no:	Private phone no:		Mobile no:
	Prof. fax no:	Private fax no:	Secu	urity e-mail:
H0	LDER 2			
	Last name:		First name:	
	Marital status:		Profession:	
	Date of birth:		Nationality:	
	Correspondence address:			
	Prof. phone no:	Private phone no:		Mobile no:
	Prof. fax no:	Private fax no:	Secu	urity e-mail:
	The Clients request NSFX Limited to op and Conditions.	en an account, in accordance with	the conditions of R	etail Client Agreement and the Terms
	Currency account denomination:	USD	EUR	GBP
	(Any funds sent to the account will be converted in the selected currency account). The Clients authorize NSFX Limited to close any open p relative to their account should the Clients desire a partial or total fund withdrawal. The Clients declare that the information contained in the Account Opening Documentation is true and accurate.			
	Place and date:			
	Signatures of the Account Holders / Clients:			





# Section 2 – Know your customer information

1.	Customer is:	Resident	Non-Resident	
2.	Customer acts:	As principal	On behalf of a third party	
3.	Purpose and intended nature of the bu	siness relationship:		
	Please indicate the type and reason for establishing currencies that will be utilized.	g a business relationship with the Co	mpany, including the different	
4.	Source of funds:			
	Please also insert type of Identification document [i.e.	identity card or passport], country of	issue and dates of issue and expiry.	
5.	Method of initial and normal subseque	nt deposits:		
	Local bank cheques	Cash	Ва	nk transfers
	International bank cheques	Credit card pa	ayment	
	Other (please explain:)			





	6.	Anticipated	number	of	deposits	per	month
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< 5

> 5

> 20

> 30

> 50

## 7. Anticipated number of cumulative value per month:

< €1,000

>€1,000

>€5,000

>€10,000

> €25,000

#### 8. Normal method of withdrawals:

Local Bank cheques

Cash

Bank transfers

International bank cheques

Credit card Payment

Other (please explain:)

9. Anticipated cumulative value of withdrawals per month:

< €1,000

>€1,000

>€5,000

>€10,000

> €25,000

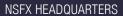
10. Anticipated geographical sphere of activity:

Local

Other

If "other" please indicate countries with which business is mostly carried out:

Kindly also indicate names of entities from which you normally receive inward payment orders and to which entities you normally effect outward payment orders.





11. Source of	of Wealth:
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Pension / Social benefits Employment Business transfers

Profession / Self-employed Other (please explain):

Please provide further information on the economic activity that has generated the net worth or income of the customer.



# Section 3 – Politically exposed persons

In terms of the Prevention of Money Laundering Act [the "Act"] and the Prevention of Money Laundering and Funding of Terrorism Regulations [the "Regulations"], the Company is required to establish whether a customer is a "politically exposed person" ["PEP"] when entering into a banking relationship or executing a transaction for a customer.

#### Are you, or have you been in the last 12 months:

- A head of state or government;
- A minister or a deputy or assistant minister or parliamentary secretary;
- A member of parliament;
- A member of the courts or other high-level judicial bodies whose decisions are not subject to further appeal, except in exceptional circumstances;
- A member of the courts of auditors, audit committees or of the boards of central banks;
- An ambassador, a charges d'affaires and any other high ranking officer of the armed forces;
- A member of the administrative, management or boards of state-owned corporations.

### An "immediate family member" of any of the above, meaning:

- Spouse or partner recognized by national law as equivalent to spouse;
- Child or spouse or partner thereof;
- Parent.

Yes	No

## A "close associate" of any of the above, meaning:

- Individual having joint beneficial ownership of a body corporate or any other form of legal arrangement, or any other close business relations with the PEP;
- Individual who has sole beneficial ownership of a body corporate or any other form of legal arrangement that is known to have been established for the benefit of the PEP.

Yes	No

N.B. If you answered "yes" to any of the above:

- Please specify how exactly you qualify as a PEP.
- You might be considered as a "politically exposed person" according to law and the Company may therefore require additional information to comply with the law.





# Section 4 - Declarations by customer

I, the undersigned hereb	ı, u	ie una	ersign	eu i	ierei	υy
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Declare that the funds that will be deposited in my accounts belong exclusively to me and are not held by me for another person, or in a fiduciary capacity or as trustee or nominee.

**N.B.** This declaration should be in line with the reply provided by customer in Question 2 of Section 2 of this Form.

Confirm that all the information provided by me to the Company is correct and up-to-date.

Undertake to immediately inform the Company if any of the information provided above becomes outdated and/or is no longer correct.

Agree to cooperate with the Company in the eventuality that it requires further documentation about me and or about any transaction(s) in which I might be involved.

Customer's signature:	Date: