

KNOW YOUR CUSTOMER(KYC)
APPLICATION FORM
INDIVIDUAL



TRE Certificate Holder - 149 Pakistan Stock Exchange Limited (Formerly Karachi Stock Exchange Ltd.)
Broker Registration No. BRK-169

JS Global Capital Limited
REGISTERED OFFICE:
The Center, 17th & 18th Floor, Plot No. 28, S.B.5, Abdullah Haroon Road, Karachi.
UAN: (92-21) 111-574-111 Fax: (92-21) 35632574

KNOW YOUR CLIENT (KYC) APPLICATION FORM

INDIVIDUAL

(Please use BLOCK LETTERS to fill the form)

| 1. Full name of Applicant (As per CNIC) | /SNIC/NICOP/ARC/POC/Passport) Mr./N | Ars./Ms. |
|--|---|---|
| 2.a. Father's/Husband's Name: | 2.b. Mot | her's Maiden Name: |
| 3. (a) Nationality: | (b) Marital status: Single | ☐ Married (c) Status: ☐ Resident ☐ Non-Resident |
| (d) Place of Birth | (e) Gender: Male | Female |
| 4. (a) CNIC/SNIC/NICOP/ARC/POC No: | | |
| (b) Expiry Date: | (c) issue Date: | Life Time: |
| 5. Passport details: Passport Number | r: | Place of Issue: |
| (For a foreigner or a non-resident Pakistani) | | Date of Early |
| 6. Date of Birth: | | Date of Expiry: |
| DD/MM/YY | | |
| B. ADDRESS DETAILS OF APPL | ICANT | |
| (a) Mailing Address: (Address should be different from authorized into | | |
| City/Town/Village: | Province/State: | Country: |
| (b) Tel. (Off.)*: | (c) Tel. (Res.)*: | (d) Mobile**: |
| (e) Email**: | | |
| Specify the proof of address submitted | d for mailing address: | |
| | | |
| | | |
| (a) Permanent Address: (if different from above or overseas address, mail) | ndatory for Non-Resident Applicant) | Country: |
| 2. (a) Permanent Address:(if different from above or overseas address, main City/Town/Village: | ndatory for Non-Resident Applicant) Province/State: | Country: |
| 2. (a) Permanent Address:(if different from above or overseas address, main City/Town/Village: | ndatory for Non-Resident Applicant) Province/State: (c) Tel. (Res.)*: | Country: (d) Mobile**: |
| 2. (a) Permanent Address: | ndatory for Non-Resident Applicant) Province/State: (c) Tel. (Res.)*: | Country: (d) Mobile**: |
| 2. (a) Permanent Address: | ndatory for Non-Resident Applicant) Province/State: (c) Tel. (Res.)*: | Country: (d) Mobile**: |
| 2. (a) Permanent Address: | ndatory for Non-Resident Applicant) Province/State: (c) Tel. (Res.)*: | Country: (d) Mobile**: |

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| C. OTHER DETAILS | |
|---|---|
| 1. Gross Annual Income Details (please specify): Below Rs. 100,001 Rs. 250,001 - Rs. 500,000 Rs. Rs. 100,001 - Rs. 250,000 Rs. 500,001 - Rs. 1,000,000 | |
| 2. Source of Earning / Income: | |
| 3. (a) Profession / Occupation: [Please tick () the appropriate box]: | |
| Agriculturist Business Housewife Household Retired Person Student | |
| ☐ Business Executive ☐ Industrialist ☐ Professional ☐ Service ☐ Govt./Public Sector ☐ Oth | ners (Specify) |
| (b) Name of Employer/Business: | |
| (e) Address of Employer/Business: | |
| D. BANK DETAILS/E-WALLET | |
| Bank Name: | |
| IBAN No.: | |
| E-Wallet Provider Name: E-Wallet Number: | |
| E. DECLARATION | |
| • I hereby confirm that all the information furnished above is true and correct to the best of my knowledge and to inform you of any changes therein, immediately. In case any of the above information is found to be untrumisrepresenting, I am aware that I may be held liable for it. | d belief and I undertake e or false or misleading or |
| I hereby, unconditionally and irrevocably, declare, confirm and acknowledge having read in full and understo conditions attached as an Annexure to this KYC Application Form duly provided to me by the Authorized Inte- filing of this KYC Application Form. | |
| I hereby acknowledge that I was informed by the Authorized Intermediary at the time of filing this KYC Applications and conditions are prescribed under CKO Regulations, 2017 and are also available on the website of CK doubt or concern that the terms and conditions shared with me by the Authorized Intermediary are any diffe specified in CKO Regulations, 2017 and available an CKO's website. | (O, further, I have no |
| Date: | |
| CNIC/SNIC/NICOP/ | he Applicant as per ARC/POC/Passport^ No olicant signature is different) |
| FOR OFFICE USE ONLY | |
| • I hereby confirm and acknowledge having provided in full the relevant terms and conditions attached as an A Application Form to the Customer at the time of filing of this KYC Application Form. | Annexure to this KYC |
| I hereby confirm that I have informed the Customer at the time of filing this KYC Application Form regarding terms and conditions in CKO Regulations, 2017 and on the website of CKO, I further confirm and acknowledg concern that the terms and conditions shared with Customer by me are not updated and has any difference of terms and conditions specified in CKO Regulations, 2017 and available at CKO's website. | e that I have no doubt or |
| Authorized Signatory Date Seal/Stamp of the | · Authorized Intermediary |
| * Optional ** For NICOP/ARC/POC/Passport, Email is mandatory and Mobile Number is Optional. Whereas for CNIC/SNIC, Mo and Email is Optional, however, in case of online account opening, both mobile number and email address are m individual Pakistani customers. In case of SNIC where country of stay is not Pakistan, email will be mandatory. *** IBAN / E-Wallet Number shall be mandatory for all Customers except for those who have provided an underta IBAN requirement due to any exception available under applicable laws, rules, regulations etc. or where permitte be recorded. | obile Number is Mandatory nandatory for resident aking for exclusion from |

Terms & Conditions of the KYC Application Form

- 1. All terms herein shall, unless expressly stated otherwise, have the same meaning as ascribed to them in the Centralized KYC Organization Regulations.
- 2. The information provided in KYC application form and/or CRF shall be in addition to and not in derogation of the requirements prescribed under Anti-Money Laundering and Countering Financing of Terrorism Regulations, 2018.
- 3. All correspondence shall be sent by CKO at the mailing address and/or email address of the Customer, as stated on the KYC Application Form. KYC application form shall be submitted electronically for Online Account Opening of Individual Pakistani Customer by Authorized Intermediary that is a Professional Clearing Member or a Securities Broker.
- 4. Neither the CKO nor its directors, officers, employees or agents shall be liable for losses, damages, liabilities, costs or expenses suffered or incurred by the Customer as a result of providing its KYC Information to Authorized Intermediaries or the CKO due to any reasons whatsoever including its unauthorized disclosure.
- 5. The Customer undertakes to indemnify the CKO against any losses, damages, liabilities, costs or expenses suffered or incurred by CKO, including any legal costs and claims by third parties, as a result of any inaccuracy, misrepresentation, misstatement or incorrect details in the information supplied by the Customer or any omission in such information or any other contravention or violation of the Centralized KYC Organization Regulations
- 6. The Customer agrees that in the event that he does not abide by the timelines prescribed in the Centralized KYC Organization Regulations for submission of information and confirmation to the NCCPL, the NCCPL shall be authorized to take action as prescribed in the Centralized KYC Organization Regulations. The Customer undertakes that it shall hold CKO harmless and that CKO shall not be liable for any losses, damages, liabilities, costs or expenses suffered or incurred by the Customer as a result of such actions.
- 7. The Customer agrees that CKO may hold, store and process its KYC Information on the KYC Information System and KYC Database in connection with its KYC functions under the Centralized KYC Organization Regulations. The Customer also agrees that CKO may disclose its KYC Information as permitted under the CKO Regulations and such other disclosures as may be reasonably necessary for compliance with any other laws or regulatory requirements.
- 8. The Customer acknowledges that KYC Information System and KYC Database, including but not limited to all the information contained therein is the legal property of CKO.
- 9. The Customer agrees that verification against KYC information provided by Customer and Authorized Intermediaries, shall be performed by CKO as per CKO Regulations and such verifications shall include verification of KYC information through linked services such as RAAST, 1-Link, PMD, NADRA, etc. (Clause 9 Annexure-IIIA).
- 10. The Customer agrees that KYC information provided by Customer at the time of onboarding shall be shared with CDC in pursuance of provisions prescribed by the Securities & Exchange Commission of Pakistan with respect to Central Gateway Portal managed by CDC.
- 11. The Authorized Intermediaries agree to pay CKO the fees and charges as prescribed by CKO from time to time in respect of its KYC functions.
- 12. CKO has absolute discretion to amend or supplement any of the terms and conditions at anytime and will endeavor to give prior notice of fifteen days wherever feasible for such changes.
- 13. The Customer agrees and affirms that it shall be bound by and acts in accordance with the provisions of the Centralized KYC Organization Regulations.
- 14. These terms and conditions shall be governed by the laws of Pakistan.
- * The terms and conditions will be part of the Online Account Form for Individual Pakistan

Enclosures*

- 1. Copies of CNIC, SNIC, NICOP, ARC, POC and/or passport* where applicable
- 2. Proof of mailing/permanent address*
 - Note: In case the address provided is same as in CNIC, no additional document is mandatory. In other cases, any of the following documents shall be obtained: Utility bills; rental agreement; insurance policy.
- 3. Employer Details (for salaried persons) *
 Copy of service card or any other acceptable evidence of service, such as certificate from the employer.
- 4. Proof of business for self-employed persons*.

| Signature of the Applicant | Authorized Signatory |
|----------------------------|----------------------|

| IXI | iow four Custome | er (KYC) / Customer Due Dilig | ence (CDD) Informat | ion - Mandatory | | |
|-----------------|--|--|--|-----------------------------|--------------------|--|
| a) | Birth Information: | Date of Birth: | City: | Country: _ | | |
| b) | Type of Customer | | DVP | ☐ Non-DVP | ☐ IDS | |
| c) | (Includes Heads of Sta | ally Exposed Person / Family Memberate or of government, senior politicial ate owned corporations, important pation.) No (If Yes pleas) | ns, senior government/jud political party officials, Seni | icial/military officials of | | |
| d) | Are you a family mem | bers or close associate of any Public | | l Person. | | |
| | Yes | No (If Yes provide details | s OF PEP) | | | |
| | Name: | Designation: _ | | | | |
| | Function: | Relationship w | vith Client: | | | |
| e) | ultimate beneficiary. | nvesting on behalf of any other person | | ease provide the follow | ing details of the | |
| | Name of Ultimate Bei | neficial owner: | Rel | ationship with the Custo | omer: | |
| | CNIC/ NICOP/ Passpoi | rt No.: | | | | |
| f) | Yes | tution refused to open your account No (if Yes, provide detail | ls) | Signature of Ultimate | | |
| | Name of Financial Institution: Reason For Refusal: | | | | | |
| g) h) i) | Yes | to offshore tax haven countries? No alue item such as Silver, Gold? No | | | | |
| j) | National Tax No. (NTN |) | | | | |
| k) | Education Below | w Matric | ☐ Intermediate/A Leve☐ Other☐ Trading | ☐ Graduate | | |
| m) | Mode of Transactions | : Online | Offline | Both | | |
| n) | Expected Monthly tur | nover/Trading Value: | | | | |
| o) i) ii) | Nature of Business of | ng Business/ Employment Employer/Business: ns covered by business: | | | | |
| | Signature of Account | Holder: | | | | |
| | Name | Signatu | | Date | _ | |