

Bridge Securities Pvt. Ltd

TRE Certificate No. 308
BRL No. 137



Account Title : _____

Account Code : _____

CDC Sub Account : _____

**OFFICE No. 214, 2 nd FLOOR, LSE PLAZA,
19-KHAYABAN-E-AIWAN-E-IQBAL, LAHORE**

Phone: 042-36280884-86

Email: bridgesecurities110@hotmail.com

<http://www.bspl.com.pk>



BRIDGE SECURITIES (PVT) LIMITED

TREC Holder, Pakistan Stock Exchange Limited
OFFICE NO. 214, 2ND FLOOR LSE PLAZA, LAHORE.
Phone:042-36280884-86
Email: bridgesecurities110@hotmail.com
www.bspl.com.pk
TREC No. 308 BRL-137

ACCOUNT OPENING FORM

Note. 1: EACH AND EVERY COLUMN MUST BE FILLED IN

Note. 2: EACH PAGE OF THIS FORM WILL BE DULY SIGNED BY THE ACCOUNT HOLDER(S) AND THE BROKER.

NATURE OF ACCOUNT: -

SINGLE: JOINT

COMPANY: FIRM

Client ID/Account No. _____

CDC-Sub Account No. _____

Account Holder

Account Title/Name: _____

Address: _____

Tel: _____

E-Mail: _____

Fax No. _____

Permanent/Registered Address: _____

For Individuals Only: -

Date of Birth: _____

Nationality: _____

Status: _____ Resident _____ Non-Resident

Gender: _____ Male _____ Female _____

Father's/Husband Name: _____

National Identity Card No. (In Case of Non-Resident Passport No.) _____

Occupation: _____

For Companies or Firm Only:

Company registration No. _____

Status: _____ Resident _____ Non-Resident

Joint Account Holder

Account Title/Name: _____

Address: _____

Tel: _____

E-Mail: _____

Fax No. _____

Permanent/Registered Address: _____

Date Of Birth: _____

Nationality: _____

Status: _____ Resident _____ Non-Resident

Gender: _____ Male _____ Female _____

Father's/Husband Name: _____

National Identity Card No. (In Case of Non-Resident Passport No.) _____

Occupation: _____

Declaration of Solvency: -

The Account holder hereby declares that: -

- a) It has not applied to be adjudicated as an insolvent and that it has not suspended payment and that we have not compounded with our creditors;
- b) It is not un-discharged insolvent; and
- c) It has not been declared defaulter in repayments of loan of a bank/financial institution.

Name Of Authorized Persons To Operate The Account: -

The Account shall be operated by the following: -

<u>Names</u>	<u>Specimen Signature</u>	<u>Singly/Jointly</u>
(a) _____	_____	_____
(b) _____	_____	_____
(c) _____	_____	_____

The authority of the person(s) authorized to operate the account will be spelled out in the letter authorized from the account holder.

MARGIN DEPOSIT: -

The authority holder(s) hereby undertakes to deposit and maintain ___% margin against his/her/their outstanding trades/exposure for the purpose of trading in his/her/their account. The broker shall notify the Account Holder(s) about any change in the above margin requirements for the already executed at least 3 days prior to the implementation of revised margin requirements.

Client bank details (Optional):

Name of the Bank: _____

Savings/Current A/C No.: _____

Branch Address: _____

Account(s) with other Broker(s) (Optional):

NAME OF THE BROKER(S)	MEMBER EXCHANGE	CLIENT ID/ACCOUNT

NOMINATION: -

(In the event of death of the Account Holder, The nominee shall be entitled to receive securities/cash available in the account of the Account holder after set-off against losses / liabilities in the account.)

Name Of The nominee: _____

Surname: _____

CNIC Number: _____

Date of Birth: _____

(DD/MM/YYYY)

Postal Address: _____

Telephone #: _____ Mobile #: _____

E-mail: _____

SPECIAL TERMS AND CONDITIONS

The terms and conditions set herein below shall be equally binding on the Broker and the Account Holder(s).

1. All transactions between the parties shall be subject to the Articles, Rules and Regulations of the Exchange, revised policies, Board Directions and new regulations to be framed in pursuance of Section 34 of the Securities & Exchange Ordinance, 1969. Moreover, all applicable provisions of the Securities & Exchange Ordinance 1969 read with the Securities & Exchange Commission of Pakistan Act 1997, Brokers and Agents registrations Rules, 2001, Securities & Exchange Rules 1971 and all directions/ directions passed from time to time to regulate the trades between the parties and to regulate Brokers conduct and Central Depository Company Of Pakistan Limited Act, 1997, Rules framed there under and the National Clearing and Settlement System Regulations and any other law for the time being in force. The Broker shall ensure provisions of copies of all the above Laws, Rules and Regulations at his office for access to the Account Holder(s) during working hours.
1. (a): In case any dispute in connection with the trade or transactions between the Broker and the Account Holder is not settled amicably, either party may refer the same to arbitration in accordance with the provision of general regulation of the Exchange, which shall be binding on both the parties. The Account Holder hereby agrees that he would have no objection if his name and other relevant particulars are placed on Exchange's database accessible by member of the Exchange if he fails or refuses to abide by or carryout any arbitration award passed against him in his dispute with the Broker.
2. The amount deposited as security margin by the Account Holder(s) with the Broker shall only be used for the purposes of dealing in securities, such as trading and/or settlement of deliveries of securities on behalf of the Account Holder (s). The Broker shall not use such amount for his own use.
2. (a): The credit amount of the Account Holder(s) shall be kept by the broker in a separate bank account titled "Account Holder/Client account" and shall not be used by the broker for his own business".
3. The Brokers shall be authorized to act on the verbal instructions of the Account Holder(s). The Brokers shall provide a written confirmation of the executed transaction as required under rules 4(4) of the Securities & Exchange Rules, 1971, and all such transaction recorded by the Brokers in his books shall be conclusive and binding upon the Account Holder(s), which shall not be questioned by his/her/them, subject to Clause 5 below.

Or

- The Account Holder(s) shall give written instruction for the sale/purchase of securities to the broker. The Account Holder(s) shall not give any verbal/oral instruction. The Broker shall provide a written confirmation of the executed transaction as required under rule 4(4) of the Securities and Exchange Rules 1971 and all such transactions recorded by the broker in his books shall be conclusive and binding upon the Account Holder(s), which shall not be questioned by him/her/them, subject to clause 5 below.
4. The Broker shall provide the confirmation of the executed transaction to the _____ (Name Of The Account Holder) at the above stated address by means of acceptable mode of communication or by hand subject to acknowledgement receipt as noted in clause 16.
 5. In case there are any error(s) in the daily confirmation statement, the Account Holder(s) shall report the same to the Broker within one-business day of the receipt of confirmation. In case the Account Holder(s) do not respond within one business day of the receipt of the said daily confirmation statement, the confirmation statement shall be deemed conclusively accepted by the Account Holder(s).
 6. In the event that the Account Holder(s) fail(s) to deposit additional cash or securities as margin within one business day of the margin call (in writing), the Broker shall have absolute discretion to and, without further notice to Account Holder(s), liquidate the Account Holder(s) outstanding positions, including the securities purchased and carried in such account, so that the margin is maintained at the required level.
 7. (a) The Broker shall be responsible to ensure delivery of CDC eligible securities in the CDC account of Account Holder(s) subject to full payments by the Account Holder(s). In case of companies which are not on the CDS, the Brokers shall ensure delivery of physical shares along with verified transfer Deeds against payments, to the Account Holder(s). Further, the Broker shall be responsible for the payment of any credit cash balance available in the account of the Account Holder(s) preferably in form of A/C payee cross cheque only within 1 business day of the request of the Account Holder(s) (subject to the maintenance of the margin requirement).
(b) **In the event of non-receipt of payment from the Account Holder on settlement day against securities bought on account of the Account Holder, the Broker may transfer such securities to his Collateral Account under intimation to the Exchange, after complying with the requirements as mentioned in relevant clause of this chapter.**
 8. The Broker shall accept from the Account Holder(s) payments through "A/C Payee Only" cross cheque, **bank drafts, pay order or other crossed banking instruments** in case of amount in excess of Rs. 25,000/-. **Electronic transfer of funds to the Broker through banks would be regarded also good as cheque.** The Broker shall be responsible to provide the receipt to the Account Holder(s) in the Name of the Account Holder(s) duly signed by the authorized agents/employee of the Broker and the Account Holder(s) shall be responsible to obtain the receipt thereof. In case of cash dealings, proper receipt will be taken and given to the Account Holder(s), specifically mentioning if payments is for margin or the purchase of securities. The broker shall immediately deposit in its bank account all cash received in whole i.e. no payment shall be made from the cash received from clients. **However, in exceptional circumstance, where it becomes necessary for Broker to accept cash in excess of Rs. 25,000/- the Broker shall immediately report within one business day such instances with rationale thereof to the Exchange in accordance with the mechanism prescribed by the Exchange.**
 9. The Broker shall make all payments of 25,000/- and above; through crossed cheque/ bank draft/pay orders or any other crossed banking instruments showing payments of amount from their business bank account. Copies of these payment instruments including cheques, pay order, demand drafts and online instructions shall be kept in record for a minimum period of five years.
 10. The Account Holder(s) shall have a right to obtain a copy of his/her or their ledger statement under official seal and signature of the Broker or his authorized representative on a periodic basis. In case of any discrepancy in the ledger statement, the Account Holder(s) shall inform the Broker within 1 day of receipt of the ledger statement to remove such discrepancy.
 11. The Account Holder(s) shall operate the account and execute transaction himself/herself/themselves unless the Account Holder(s) authorized Mr./Ms. _____, I.D No. _____, to transact in the account. All transactions executed by the authorized person shall be binding upon the Account Holder(s).
 12. **For Joint Account Holder(s) Only: -**
We, the Account Holders shall operate the account jointly or severally and the instructions issued either jointly or severally shall be binding on us as well as upon the broker in respect of the joint titled account.

Or

- Our titled account shall be operated only by _____ who shall be deemed as the authorized person for operating the joint account or issuing any instructions relating thereto.
13. The Broker shall be responsible to append a list of his authorized agents/traders and designated employees, who can deal with the Account Holder(s), with this account opening form and a copy of both the opening form and the list will be provide to the Account Holder(s). Any change therein shall be intimated in writing to the Account Holder(s) with immediate effect.

14. The Broker shall not disclose the information of the transactions of the Account Holder(s) for the commission charges or any other charges in connection with the brokerage services rendered, which shall be clearly detailed in the ledger statement/daily confirmations.
15. The Broker shall not disclose the information of the transactions of the Account Holder(s) to any third party and shall maintain the confidentiality of this information. However, in case the Exchange or the Commission, as the case may be requires any such information, the Broker shall be obliged to disclose the same for which the Accounts Holder(s) shall not raise any objection whatsoever.
16. In case a Broker convert his individual membership rights to corporate membership and *vice versa*, the agreement and conditions laid down herein above shall remain effective unless otherwise agreed by the parties.
17. Acceptable mode of communication between the Account Holder(s) and the Broker shall be through letter (Courier/Registered Post/Fax/E-mail) or by hand subject to receipt/acknowledgement. The onus of proving that the e-mail has been received by the recipient shall be on the sender sending the E-mail. Confirmation of order to clients made through fax or E-mail will have a time record.
18. All orders received telephonically an placed on Computerized Trading System shall be supported by recording on dedicated telephonic lines, preferably connected with a computerized taping system so as the order could be stored on UIN basis and made user friendly.
19. In case of change of address or contact numbers of either party, the concerned party shall immediately notify the other party of the changes in writing.
20. I/We, the Account Holder(s) acknowledge receipt of this account opening form (signed here by me/us in duplicate) along with the copies of all the annexure and I/We, the Account Holder(s) also undertakes that I/We have understood all the above terms and conditions of this agreement which are acceptable to me/us.
21. I/We, the Account Holder(s) understand that the shares trading business carries risk and subject to the due diligence on part of the broker, I/We may incur losses for which, I/We, the Account Holder(s) shall not hold the Broker responsible.
22. I/We, the Account Holder(s) further confirm that all information given in this application is true and complete and hereby authorize the Broker to verify any information mentioned above.

Signature Of Broker

Signature of Account Holder

First Joint Holder (Signature)

Second Joint Holder (Signature)

Third Joint Holder (Signature)

Witnesses:

1. _____ (I.D. Card No. _____)
2. _____ (I.D. Card No. _____)

Opened By: _____

Checked By: _____

Date: _____

Enclosures (For Individuals): -

1. Attested copies of National Identity Card of the applicant.
2. Attested copies of National Identity Card of the Joint Holders and or Nominee(s) (if Applicable).
3. Attested copies of Passports of the applicant, joint Holders and or Nominee(s) (In Case of Non-Residents)
4. Copy of the letter of authorization form the Account Holder(s) of the person authorized to trade in my/our accounts (if other than the account holder).
5. A list of Transaction Fee, Commission to be charged by the Broker and other CDC charges to be levied.

Enclosures (For Corporate Entities): -

1. Certified true copy of Board Resolution (specimen provided as per **Annexure 'A'**).
2. Certified true copies of Memorandum & Articles of Association.
3. List of Authorized Signatories.
4. List of nominated persons allowed placing order.

Annexure – 'A'

“RESOLVED” that an application be made on behalf of _____ (name of entity) to _____ (“Broker”) for opening an Account and for the aforesaid purpose the Account Opening Form including Terms and Conditions as set out herein be executed on behalf of _____ (name of entity).

FURTHER RESOLVED that Mr./Ms. _____ and Mr./Ms. _____ be and are hereby authorized and empowered, either singly/jointly for and on behalf of _____ (name of entity) to sign and execute and deliver this Account Opening Form and Terms & Conditions and other documents in connection therewith, and to do any other act, deed or thing for and on behalf of _____ (name of entity) in respect of company’s application for opening an Account.

FURTHER RESOLVED that Mr./Ms. _____ and Mr./Ms. _____ be and are hereby authorized and empowered, either singly/jointly to represent to the broker on all matters pertaining to the maintenance and operation of the Account, to deal, liase and correspond with broker and give instructions to fulfill all the responsibilities and obligations to broker under the Law, Rules and Regulations and the Terms and Conditions in relation to the Account form time to time, and to deal with other incidental and ancillary acts, things and deeds.

Signature of Directors: -

1. _____ 2. _____ 3. _____ 4. _____

5. _____ Date of Resolution: _____



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TREC Holder, Pakistan Stock Exchange Limited
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TREC No. 308 BRL-137

Schedule of Charges

Minimum cash balance in 5000/-

<u>Detail of Charges</u>	<u>Rate</u>	<u>Basis</u>	<u>Collection</u>
CDS initial Deposit Charges	0.50	Per Share	<u>Mode on</u>
Courier Charges	Variable	Depending on Consignment	
Sub A/C CDC Maintenance Charges Annual	500/-	Rupee	In Advance Annually
Account Opening/Closing Charges	1000/-	Rupee	at the time of Opening /
Closing of Account.			

COMMISSION SLAB

TRADING	SLAB	DELIVERY
0.001____9.99		
10.00____49.99		
50.00____99.99		
100.00____199.99		
200.00____299.99		
300.00____399.99		
400.00____499.99		
500.00____599.99		
600.00____699.99		
700.00____799.99		
800.00 and above		

Capital Value tax @0.01 on sale/purchase Value of shares

FED@ _____% on Gross Commission in respect of Purchase & Sale of shares

Commission slab for CFS

Note:- overdue charges subject to variation of interest rates / market Condition. As when application all Government excise duties/ taxes, stamp duties etc., are for costumers account and will be charged in addition to the brokerage firm tariff. All incidental expenses will be recovered in addition to the above stated charges. Brokerage firm may vary charges depending on the business volume / Market sentiment as per pre-arrangement.

Name Client. _____

A/C # _____

For Bridge Securities (Pvt) Ltd

Signature _____

BRIDGE SECURITIES (PVT) LIMITED

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For official use of the Participant only	
Application Form No:	
CDS Participant ID:	
Sub-Account No:	
Trading Account No: (if applicable)	

CDC Sub Account Opening Form For Individuals

(Sub-Accounts are opened and maintained by Participants in accordance with the CDC Regulations made pursuant to Section 4 of the Central Depositories Act, 1997)

Nature of Account	Single		Joint	
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(Please use **BLOCK LETTERS** to fill the form)

I/We hereby apply for opening of my/our Sub-Account under the Account Family of **BRIDGE SECURITIESZ (PVT) LIMITED** (hereinafter referred to as "Participant") maintained in the Central Depository System ("CDS") of the Central Depository Company of Pakistan Limited ("CDC"). My/our particulars are given as under:

A. REGISTRATION (AND OTHER) DETAILS OF MAIN APPLICANT																								
1. Full name of Applicant (As per CNIC / NICOP / Passport) MR. / MRS. / MS.																								
2. Father's / Husband's Name:																								
3. Contact Details of Main Applicant:																								
(a) Permanent Address: (Address should be different from Participant's business address)																								
(b) Mailing Address:																								
(c) Contact No:				(d) Fax: (optional)				(e) Email: (*)																
• Land Line No.:																								
• Local Mobile No. (*)																								
4. Computerized National Identity Card No: (For resident Pakistani)																								
5. Expiry date of CNIC:																								
6. NICOP No: (For non-resident Pakistani)																								
7. Expiry date of NICOP:																								
8. Passport details: (For a foreigner or a Pakistani origin)				Passport Number:				Place of Issue:																
				Date of Issue:				Date of Expiry:																
9. Details of Contact Person: [Note: Contact Person shall not be the person other than the Main Applicant, any one of the Joint Applicant or their Attorney. Where Contact Person is the Main Applicant or any of the Joint Applicant, please only provide the name below. In case of Attorney, please provide details in (a) to (h) below]																								
(a) Name: MR. / MRS. / MS.																								
(b) Relationship/ association of the Attorney with the Main Applicant:																								
(c) Address:																								
(d) Computerized National Identity Card No:																								
(e) Expiry date of CNIC:																								
(f) Contact No:				(g) Fax: (optional)				(h) Email: (*)																
• Land Line No.:																								
• Local Mobile No. (*)																								
10. Share holder's Category: INDIVIDUAL																								
11. (a) Occupation: [Please tick (✓) the appropriate box]																								
													AGRICULTURIST			BUSINESS			HOUSEWIFE			HOUSEHOLD		
													RETIRED PERSON			STUDENT			BUSINESS EXEC.			INDUSTRIALIST		
PROFESSIONAL			SERVICE			OTHERS (specify)																		
(b) Name of Employer / Business:						(c) Job Title / Designation:																		
(d) Address of Employer / Business:																								

*At least one field must be mandatorily filled.

Signatures:

Main Applicant

Joint Applicant 1

Joint Applicant 2

Joint Applicant 3

Participant

B. REGISTRATION (AND OTHER) DETAILS OF THE JOINT APPLICANT(S)													
PERSONAL INFORMATION – JOINT APPLICANT NO. 1													
1. Full name of Applicant (As per CNIC / NICOP / Passport) MR. / MRS. / MS.													
2. Father's / Husband's Name:													
3. Permanent Address: <i>(Address should be different from Participant's business address)</i>													
4. (a) Contact No: Land Line No.				Local Mobile No.				(b) Fax: (optional)				(c) Email:	
5. Computerized National Identity Card No: <i>(For resident Pakistani)</i>													
6. Expiry date of CNIC:													
7. NICOP No: <i>(For non-resident Pakistani)</i>													
8. Expiry date of NICOP:													
9. Passport details: <i>(For a Foreigner or a Pakistani origin)</i>						Passport Number:				Place of Issue:			
						Date of Issue:				Date of Expiry:			
10. (a) Occupation: <i>[Please tick (✓) the appropriate box]</i>			AGRICULTURIST		BUSINESS		HOUSEWIFE		HOUSEHOLD				
			RETIRED PERSON		STUDENT		BUSINESS EXEC.		INDUSTRIALIST				
			PROFESSIONAL		SERVICE		OTHERS (specify)						
(b) Name of Employer / Business:							(c) Job Title / Designation:						
(d) Address of Employer / Business:													
PERSONAL INFORMATION – JOINT APPLICANT NO. 2													
1. Full name of Applicant (As per CNIC / NICOP / Passport) MR. / MRS. / MS.													
2. Father's / Husband's Name:													
3. Permanent Address: <i>(Address should be different from Participant's business address)</i>													
4. (a) Contact No: Land Line No.				Local Mobile No.				(b) Fax: (optional)				(c) Email:	
5. Computerized National Identity Card No: <i>(For resident Pakistani)</i>													
6. Expiry date of CNIC:													
7. NICOP No: <i>(For non-resident Pakistani)</i>													
8. Expiry date of NICOP:													
9. Passport details: <i>(For a Foreigner or a Pakistani origin)</i>						Passport Number:				Place of Issue:			
						Date of Issue:				Date of Expiry:			
10. (a) Occupation: <i>[Please tick (✓) the appropriate box]</i>			AGRICULTURIST		BUSINESS		HOUSEWIFE		HOUSEHOLD				
			RETIRED PERSON		STUDENT		BUSINESS EXEC.		INDUSTRIALIST				
			PROFESSIONAL		SERVICE		OTHERS (specify)						
(b) Name of Employer / Business:							(c) Job Title / Designation:						
(d) Address of Employer / Business:													
PERSONAL INFORMATION – JOINT APPLICANT NO. 3													
1. Full name of Applicant (As per CNIC / NICOP / Passport) MR. / MRS. / MS.													
2. Father's / Husband's Name:													
3. Permanent Address: <i>(Address should be different from Participant's business address)</i>													
4. (a) Contact No: Land Line No.				Local Mobile No.				(b) Fax: (optional)				(c) Email:	
5. Computerized National Identity Card No: <i>(For resident Pakistani)</i>													
6. Expiry date of CNIC:													
7. NICOP No: <i>(For non-resident Pakistani)</i>													
8. Expiry date of NICOP:													
9. Passport details: <i>(For a Foreigner or a Pakistani origin)</i>						Passport Number:				Place of Issue:			
						Date of Issue:				Date of Expiry:			
10. (a) Occupation: <i>[Please tick (✓) the appropriate box]</i>			AGRICULTURIST		BUSINESS		HOUSEWIFE		HOUSEHOLD				
			RETIRED PERSON		STUDENT		BUSINESS EXEC.		INDUSTRIALIST				
			PROFESSIONAL		SERVICE		OTHERS (specify)						
(b) Name of Employer / Business:							(c) Job Title / Designation:						
(d) Address of Employer / Business:													

Signatures:

Main Applicant

Joint Applicant 1

Joint Applicant 2

Joint Applicant 3

Participant

C. OTHER INFORMATION													
1. Dividend Mandate [Please tick (✓) the appropriate box]				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If yes, please provide following details:					
(a) Account Title:						(b) Account No:							
(c) Name of Bank:						(d) Branch:							
(e) Address:													
2. National Tax No: (Optional)													
3. Nationality:													
4. Residential Status [Please tick (✓) the appropriate box]				Resident	Non-Resident	Repatriable	Non-Repatriable						
				Pakistani	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
				Pakistani Origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
				Foreign National	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
5. If you are maintaining any Special Convertible Rupee Account ("SCRA"), please provide details in (a) to (c):				(a) SCRA Account No:		(b) Bank Name:							
				(c) Branch Details:									
6. Zakat Status: <i>(If, according to the Fiqh of the Applicant(s), Zakat deduction is not applicable, then relevant Declaration on prescribed format shall be submitted with the concerned Issuer and the Participant)</i>				Please tick (✓) the appropriate box									
				<input type="checkbox"/>	Muslim Zakat payable								
				<input type="checkbox"/>	Muslim Zakat non-payable								
				<input type="checkbox"/>	Non-Muslim								
				<input type="checkbox"/>	Not Applicable								
7. Particulars of nominee (Optional but if desired, nomination should only be made in case of sole individual and not joint account) <i>[In case of death of Sub-Account Holder: Nomination may be made in terms of requirements of Section 80 of the Companies Ordinance, 1984, which inter alia requires that person nominated as aforesaid shall not be a person other than the following relatives of the Sub-Account Holder, namely: a spouse, father, mother, brother, sister and son or daughter, including a step or adopted child.]</i>				(a) Name of Nominee:									
				(b) Father's/Husband's Name:									
				(c) Relationship with Main Applicant: [Please tick (✓) appropriate box]				<input type="checkbox"/>	Spouse	<input type="checkbox"/>	Father	<input type="checkbox"/>	Mother
								<input type="checkbox"/>	Brother	<input type="checkbox"/>	Sister	<input type="checkbox"/>	Son*
								<input type="checkbox"/>	Daughter*	* Including step or adopted child			
				(d) Address:									
				(e) CNIC No: (in case of a resident Pakistani)									
				(f) Expiry date of CNIC:									
				(g) NICOP No: (in case of a non-resident Pakistani)									
				(h) Expiry date of NICOP:									
				(i) Passport details: (In case of a foreigner or a Pakistani origin)				Passport Number:					
								Place of Issue:					
								Date of Issue:					
Date of Expiry:													
(j) Contact No:				(k) Fax: (optional)									
(l) E-mail: (optional)													
D. CDC SMS / IVR/ WEB SERVICES ("CDC access")													
CDC provides FREE OF COST services under CDC access whereby sub-account holders can have real time access to their account related information.													
1(a). SMS or eAlert/eStatement is a <u>mandatory</u> service, where alerts are sent whenever certain activities take place in a sub-account. eStatement is a service where your account balance statement will be electronically transmitted to your email address. Please subscribe to either SMS or eAlert/eStatement service as a mandatory requirement. You can also subscribe to both the services.													
				Short Messaging Service (SMS)		Mobile No.(†)		† of Contact Person as provided in Part A or Part B of this Form, as the case may be.					
				eAlert / eStatement Service		Email Address (†)							
1(b). If you have subscribed for eStatement, please specify the frequency of eStatement: [Please tick (✓) the appropriate box]				Monthly	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>						
2. Do you wish to subscribe to free of cost IVR Service? [Please tick () the appropriate box]				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No						
3. Do you wish to subscribe to free of cost Web Service? [Please tick () the appropriate box]				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No						
4. If you are subscribing to IVR and/or Web Service, please provide following details of your Contact Person:													
(a) Date of Birth (DD / MM / YYYY)				/			/						
(b) Mother's Maiden Name:				(c) Email Address (of Contact Person as provided in Part A or Part B of this Form, as the case may be):									

Signatures:

Main Applicant

Joint Applicant 1

Joint Applicant 2

Joint Applicant 3

Participant

E. SUB-ACCOUNT OPERATING INSTRUCTIONS

1. Signatory(ies) to give instruction to the Participant pertaining to the operations of the Sub-Account. <i>(Please specify sub-account operating instructions in the relevant column along with names and specimen signatures of authorised signatories)</i>	Names of Signatory(ies)		Specimen Signatures
	(a)		
	(b)		
	(c)		
	(d)		

2. Sub-Account Operating Instructions: [Please (✓) appropriate box]	<input type="checkbox"/>	Either (Singly) or Survivor	<input type="checkbox"/>	Attorney
	<input type="checkbox"/>	Jointly [any] _____	<input type="checkbox"/>	Any other

Please specify:

F. BANK VERIFICATION

The following information is required to be verified by the Bank Manager only where the Main Applicant is maintaining bank account:

Particulars of Main Applicant:

Bank Account Title:	CNIC No:						-								-
---------------------	----------	--	--	--	--	--	---	--	--	--	--	--	--	--	---

Bank Account No:

Address of Applicant:

Signature of Applicant:

We do hereby verify the above particulars and signature of our above account holder:

Particulars of Bank Manager / Authorized Officer:

Name:	Contact No(s):
-------	----------------

E-mail:	Signature & Rubber Stamp:
---------	---------------------------

G. AUTHORIZATION UNDER SECTIONS 12 AND 24 OF THE CDC ACT EXCLUSIVELY FOR SETTLEMENT OF UNDERLYING TRADES INCLUDING PLEDGE AND RECOVERY OF CHARGES AND LOSSES

Undersigned, hereby give my/our express authority to the Participant under Section 12 and Section 24 of the Central Depositories Act, 1997 to handle Book-entry Securities beneficially owned by me/us and entered in my/our Sub-Account maintained with the Participant for securities transactions that are exclusively meant for the following purposes:

- a. For the settlement of any underlying market transactions (trades) including off market transactions made by me/us from time to time;
- b. For pledge securities transactions with any Stock Exchange or a Clearing Company relating to any of my/our underlying market transactions (trades) to be settled through the Clearing Company from time to time;
- ba. For, where applicable, pledging of my/our securities only with a Stock Exchange in accordance with the requirements of regulations of such Stock Exchange for meeting any shortfall in the margin and/or mark-to-market losses requirements of the Participant and/or other Sub-Account Holders of the Participant;
- c. For the recovery of payment against any underlying market purchase transactions made by me/us from time to time;
- d. Movement by me/us from time to time of my/our Book-entry Securities from my/our Sub-Account under the Main Account under the control of the Participant to my/our Sub-Account under another Main Account under the control of the Participant or to my/our Sub-Account under any Main Account which is under the control of another Participant or to my/our Investor Account;
- e. Securities transactions which has been made by way of a gift of Securities by me/us to my/our Family Members or other persons in accordance with the CDC Regulations from time to time;
- f. Securities transactions pertaining to any lending or borrowing of Securities made by me/us from time to time in accordance with the CDC Regulations;
- g. For the recovery of any charges or losses against any or all of the above transactions carried out by me/ us or services availed; and/or
- h. Delivery Transaction made by me/us for any other purposes as prescribed by the Commission from time to time.

Authority on each occasion shall be given by me/us to the Participant for handling of Book-entry Securities beneficially owned by me/us for all other purposes as permitted under the applicable laws and regulations.

 I/We note that above shall serve as a one-time fixed authorization to the Participant for handling of Book-entry Securities owned by the undersigned Sub-Account Holder(s) and entered in his/her/their Sub-Account maintained with the Participant. Handling of Book-entry Securities for all other purposes should however require specific authority in writing from the undersigned Sub-Account Holder(s) in favour of the Participant. For handling of Book-entry Securities worth Rs. 500,000/- and above, the above mentioned specific authority shall be obtained on non-judicial stamp paper.

Signatures:

Main Applicant Joint Applicant 1 Joint Applicant 2 Joint Applicant 3 Participant

IMPORTANT

Please read and understand the Terms and Conditions before signing and executing this form

TERMS AND CONDITIONS

The Terms and Conditions set herein below shall govern the Sub-Account forming part of the Account Family of the CDS Participant Account of the Participant, which shall be binding on the Sub-Account Holder as well as the Participant:

1. Provisions of the Central Depositories Act, 1997 ("**the Act**") and the Central Depository Company of Pakistan Limited Regulations ("**the Regulations**") as amended from time to time and the CDC's Operating Manual/Operating Instructions developed and issued pursuant thereto from time to time and any other by-laws, directives of the Securities and Exchange Commission of Pakistan issued from time to time, shall govern the opening, maintenance and operations of the Sub-Account.
2. Each page of this form should be duly signed by the Applicant (and joint Applicants if any) and the Participant or any authorized person of the Participant.
3. The Participant shall ensure provision of copies of all the relevant laws, rules and regulations at his office for access to the Sub-Account Holder(s) during working hours.
4. The Participant shall provide a list of his authorized agents/traders and designated employees, who can deal with the Sub-Account Holder(s) from time to time. Any change(s) therein shall forthwith be intimated in writing to the Sub-Account Holder(s).
5. The Registration Details and such other information specified by the Applicant in this form for opening of the Sub-Account appear in the Sub-Account to be established by the Participant in the Central Depository System who shall ensure the correctness and completeness of the same. Any change therein notified by the Sub-Account Holder from time to time in writing to the Participant shall reflect in the Sub-Account of such Sub-Account Holder.
6. The Book-entry Securities owned by the Sub-Account Holder shall be exclusively entered in the Sub-Account of such Sub-Account Holder.
7. Transfer, Pledge and Withdrawal of Book-entry Securities entered in the Sub-Account of the Sub-Account Holder shall only be made from time to time in accordance with the authorization given by the Sub-Account Holder to the Participant in Part (G) above pursuant to Section 12 and 24 of the Act. Such authorization shall constitute the congregated / entire authorizations by the Sub-Account Holder(s) in favour of the Participant and supersedes and cancels all prior authorizations (oral, written or electronic) including any different, conflicting or additional terms which appear on any agreement or form the Sub-Account Holder(s) has executed in favour of the Participant.
8. Participant shall be liable to give due and timely effect to the instructions of the Sub-Account Holder given in terms of the above-referred authorization with respect to transfer, pledge and withdrawal of Book-entry Securities entered in his Sub-Account under the control of the Participant. Such instructions, among other matters, may include closing of Sub-Account.
9. Participant shall send within 10 days of end of each quarter Account Balance statement to the Sub-Account Holder without any fee or charge showing the number of every Book-entry Security entered in his Sub-Account as of the end of the preceding quarter. Such Account Balance statement shall be generated from the CDS. Further, the Sub-Account Holder may request for such statement (including Account Activity reports) from the Participant at any time on payment of a fee on cost basis as prescribed by the Participant. The Participant shall be liable to provide such report/statement to the Sub-Account Holder within 3 Business Days from the date of receipt of such request, with or without charges.
10. In consideration for the facilities and services provided to the Sub-Account Holder by the Participant, the Sub-Account Holder shall pay fees and charges to the Participant as applicable for availing such facilities and services under the Act, the Regulations and these Terms & Conditions. In case of outstanding payment against any underlying market purchase transaction, charges and/or losses against the Sub-Account Holder, the Participant shall have the right, subject to Clause 7 above and under prior intimation to the Sub-Account Holder to clear the payment, charges and/or losses (including any shortfall in margin requirements) within the reasonable time prescribed by the Participant, to dispose off the necessary number of Book-entry Securities of the Sub-Account Holder and apply the net proceeds thereof towards the adjustment of such outstanding payment, charges and/or losses, provided that the Participant shall report the disposal of such Securities to the relevant Stock Exchange as an off-market transaction where the Securities are transferred from the Sub-Account to the House Account of the Participant.
11. Participant shall have the right, subject to 20 Business Days prior written notice to the Sub-Account Holder to close the Sub-Account if it becomes dormant with no holding balances. No Sub-Account shall be treated as dormant unless there is no activity for continuous six months.
12. Where admission of Participant to the CDS is suspended or terminated by the CDC, the Sub-Account Holder shall have the right, subject to the Regulations and the Procedures made thereunder, to request CDC to change his Controlling Account Holder and Participant shall extend full cooperation to the Sub-Account Holder in every regard, without prejudice to his right of recovery of any dues or receivable from the Sub-Account Holder.
13. In case of a Joint Account, all obligations and liabilities in relation to this Sub-Account or under these Terms and Conditions shall be joint and several.
14. These Terms and Conditions shall be binding on the Participant's nominee, legal representative, successors in interest and/or permitted assigns.
15. In the event of any conflict between these Terms and Conditions and the terms and conditions contained in Trading Account Opening Form or any other forms/authorizations prescribed by the Participant or otherwise, the Terms and Conditions contained herein shall prevail, insofar as it is related to the custodial services to be provided by the Participant under the legal framework of CDC.
16. The provision of services as provided for hereunder shall not constitute Participant as trustee and the Participant shall have no trust or other obligation in respect of the Book-entry Securities except as agreed by the Participant separately in writing.
17. The Participant is not acting under this application form as Investment Manager or Investment Advisor to the Sub-Account Holder(s).
18. The Participant should ensure due protection to the Sub-Account Holder regarding rights to dividend, rights or bonus shares etc. in respect of transactions routed through him and not do anything which is likely to harm the interest of the Sub-Account Holder with/from whom it may have had transactions in securities.
19. Subject to Section 21 of the Act, Participant shall maintain complete confidentiality of any information or document that is in his knowledge or possession or control relating to the affairs of the Sub-Account Holder(s), and in particular, relating to their Sub-Account(s), and shall not give, divulge, reveal or otherwise disclose such information or document to any other person.
20. These Terms and Conditions shall be deemed to have been amended, altered and/or modified if rights and duties of the parties hereto are altered by virtue of change in law, rules, regulations etc. of SECP and/or articles, rules, regulations of the Stock Exchanges and/or the Act, CDC Regulations, CDC's Operating Manual/Operating Procedures and/or any circular, directive or direction issued therein, such changes shall be deemed to have been incorporated and modified the rights and duties of the parties hereto.
21. The Participant shall ensure that duly filled in and signed copy of this form along with the acknowledgement receipt is provided to the Sub-Account Holder.

Signatures:

Main Applicant

Joint Applicant 1

Joint Applicant 2

Joint Applicant 3

Participant

DECLARATION & UNDERTAKING

I/We, the undersigned, hereby declare that:

- a) I/We am/are not minor(s);
- b) I/We am/are of sound mind;
- c) I/We have not applied to be adjudicated as an insolvent and that I/We have not suspended payment and that I/We have not compounded with my/our creditors;
- d) I/We am/are not an undischarged insolvent;
- e) I/We confirm having read and understood the above Terms and Conditions and I/We hereby unconditionally and irrevocably agree and undertake to be bound by and to comply with the above Terms and Conditions and any other terms and conditions which may be notified from time to time with the approval of the concerned authorities modifying or substituting all or any of the above Terms and Conditions in connection with the opening, maintenance and operation of the Sub-Account;
- f) I/We, being the Applicant(s), hereby further confirm that all the information contained in this form is true and correct to the best of my/our knowledge as on the date of making this application;
- g) I/We further agree that any false/misleading information by me/us or suspension of any material fact will render my/our Sub-Account liable for termination and further action under the law; and
- h) I/We hereby now apply for opening, maintaining, operation of Sub-Account forming part of the Account Family of CDS Participant Account of Participant.

DISCLAIMER FOR CDC ACCESS

The main objective of providing information, reports and account maintenance services through the Interactive Voice Response System, Internet /Web access and Short Messaging Service ("SMS") or any other value added service is to facilitate the Sub-Account Holders ("Users") with a more modern way to access their information. CDC makes no other warranty of the IVR, Internet /Web access, SMS or any other value added services and Users hereby unconditionally agree that they shall make use of the internet/web access subject to all hazards and circumstances as exist with the use of the internet. CDC shall not be liable to any Users for providing and making available such services and for failure or delay in the provision of SMS to Users and all Users, who use the IVR, internet access, SMS or any other value added services, shall be deemed to have indemnified CDC, its directors, officers and employees for the time being in office and held them harmless from and against any losses, damages, costs and expenses incurred or suffered by them as a consequence of use of the IVR system, internet/web access, SMS or any other value added services.

All Users hereby warrant and agree that their access of the internet /web by the use of a User-ID and login is an advanced electronic signature and upon issuance of such User-ID to the user, they hereby waive any right to raise any objection to the compliance of the User-ID and login with the criteria of an advance electronic signature.

All Users shall by signing this Form and by their conduct of accessing the IVR, internet/Web access, SMS or any other value added services agree to all the terms and conditions and terms of use as shall appear on the CDC website at www.cdcaccess.com.pk which shall be deemed to have been read and agreed to by the Users before signing this form.

Name of Applicant:	Date: Place:	Signature:
Name of Joint Applicant No 1:	Date: Place:	Signature:
Name of Joint Applicant No 2:	Date: Place:	Signature:
Name of Joint Applicant No 3:	Date: Place:	Signature:
For and on behalf of <i>(In case if signed by the Attorney on behalf of the Applicant(s))</i>		
I/we hereby agree to admit the Applicant(s) as the Sub-Account Holder(s) in terms of the above Terms and Conditions as amended from time to time and shall abide by the same in respect of opening, maintenance and operation of such Sub-Account.		
Name of Participant:	Date:	
Participant's Seal & Signature:		
Witnesses:		
1. Name:		
Signature:	CNIC No:	
2. Name:		
Signature:	CNIC No:	

Enclosures:

1. Attested copy of CNIC / NICOP / Passport of the Applicants / Joint Applicants / nominee(s) (as the case may be).
2. Duly notarised Power of Attorney* (if applicable).
3. Zakat Declaration of the Applicant and the Joint Applicant (if applicable).
4. Attested copy of NTN Certificate (if applicable).

* Where the Applicant is a non-resident or foreigner, duly consularized copy of Power of Attorney by the Consul General of Pakistan having jurisdiction over the Applicant(s) should be submitted.

H. FOR THE USE OF PARTICIPANT ONLY

Particulars of Sub-Account Opening Form verified by :

				Stamp:		
Application:	<input type="checkbox"/>	Approved	<input type="checkbox"/>	Rejected	Signature: (Authorized signatory)	Date:
Sub-Account no. issued:						
Account opened by:						
Saved by:				Posted by:		
Signature:		Date:		Signature:		Date:
Remarks: <i>(if any)</i>						

ACKNOWLEDGEMENT RECEIPT

Application No:		Date of receipt:	
<i>I/We hereby confirm and acknowledge the receipt of duly filled and signed Sub-Account Opening Form from the following Applicant:</i>			
[Insert Name of Applicant(s)]		Participant's Seal & Signature:	
1.			
2.			
3.			
4.			



BRIDGE SECURITIES (PVT) LIMITED

TREC Holder, Pakistan Stock Exchange Limited
OFFICE NO. 214, 2ND FLOOR LSE PLAZA, LAHORE.

Phone:042-36280884-86

Email: bridgesecurities110@hotmail.com

www.bspl.com.pk

TREC No. 308 BRL-137

Agreement for Online Internet Trading Terminal

I/We, _____ S/o _____

holder of CNIC # _____ agree that Bridge Securities (Pvt) Ltd will not be held responsible in case of any delay or failure of connection due to whatsoever reasons.

I/We, _____ further indemnify that Bridge Securities (Pvt) Ltd, TREC holder Pakistan Stock Exchange Limited will not be held responsible in case of any delay in order submission, cancellation or change of an order, trade confirmation, reports, or any trading activity and / or viewing of market activity and any other consequential loss or losses due to whatsoever reasons. All trades originating from this Online Internet Trading Terminal will be solely my / our responsibility to settle.

I further confirm that I will maintain _____% margin at all times.

Terms and Conditions of Agreement

- a) Online trading will be permitted through an online trading system of PSX (KITS), which will act as the Broker for the purpose of buying and selling securities, including COT, DFC (Deliverable Future Contract), and MTS (Margin Trading System) at the Stock Exchange (Online Exchange) and wherever the term MoneyLineSecurities (Pvt) Ltd is used in the Terms and conditions for online trading, it shall deem to mean the Broker.
- b) Bridge Securities (Pvt) Ltd will request the PSX to generate user name, password and PIN (personal identification number) and send the same to Account Holder(s) at his/her/their/its email ID, to enable the Account Holder(s) to have an access to and use this Account for online trading. The Password/PIN may be communicated through e-mail to the Account Holder(s) at his/her/their/its own risk. The Account Holder(s) shall not disclose the password/ PIN to any person and shall take every reasonable precaution to prevent discovery of the Password/ PIN by any other person. The Account Holder(s) shall immediately change the password/PIN as soon as it is received from PSX. Bridge Securities (Pvt) Ltd may electronically transfer delivery of confirmation, statements and other notices in connection with Electronic/Online Trading. It shall be the responsibility of the Account Holder(s) to review, upon receipt of e-mails, confirmation statement, notices, margin and maintenance calls whether delivered by mail, e-mail or electronic terminal at the discretion of Bridge Securities (Pvt) Ltd. If the Password/ PIN is disclosed to any third party the Account Holder(s) should immediately notify the same to Bridge Securities (Pvt) Ltd. The Account Holder(s) will immediately notify of any loss, theft or unauthorized use of his/her/their/its account number and Password/ PIN. The Account Holder(s) shall immediately notify and change his/her/its/their e-mail or other address as mentioned in the Application Form.
- c) All risks connected and involved with Electronic/Online Trading will be assumed fully by the Account Holder(s). Neither the Bridge Securities (Pvt) Ltd nor any of its directors or officers would be responsible or liable in any manner for any losses or damages that may be suffered by the Account Holder(s) including those due to the misuse of the Account Holder(s) Password or PIN, hacking of lines, outages and slowdowns in the internet connection and piracy of Account Holder(s) information and affairs by unscrupulous persons.

- d) Bridge Securities (Pvt) Ltd may at any time and from time to time require additional margin in the Account (in cash or Securities) before executing any Orders or undertaking any Transactions through Online Facility on account of the Account Holder(s). The amount and timing may vary depending on factor solely at Bridge Securities (Pvt) Ltd discretion. Bridge Securities (Pvt) Ltd shall have the right to liquidate the Account Holder(s) Trading position(s) if the Account margin is insufficient at any time.
- e) Bridge Securities (Pvt) Ltd may at its discretion elect with or without notice to square off the Account Holder(s) Account and make obligations in the Account immediately due and payable by the Account Holder(s) without assigning any reason.

DECLARATIONS:

1. The Account Holder(s) understand(s) that the share trading business carries risk and subject to the due diligence on part of the Broker may incur losses for which, the Account Holder(s) shall not hold the broker responsible. The Account Holder(s) further acknowledge(s) that the prices of the Securities do fluctuate abruptly and instantly and investments in Securities may experience abrupt upward and downward movements and may even become valueless. The Broker shall not be liable for any fluctuations in the prices of Securities due to purchase and sale on the day of the Transaction and the net price mentioned in confirmation shall be accepted as concluded final price and shall be binding upon the Account Holder(s) and the Broker.
2. The Account Holder(s) acknowledge receipt of this Account Opening Form(signed here by me/us in duplicate) along with the copies of all the annexure and the Account Holder(s) also undertake to have understood and accepted all the above additional Terms and Conditions.
3. The Account Holder(s) further confirm that all the information given in Account Opening Form is true and complete and hereby authorize the Broker to verify any information mentioned above from any sources deemed appropriate by the Broker.

Account No. _____

Account Title : _____

Signature of Account Holder(s) _____

For & on behalf of Bridge Securities (Pvt) Ltd

Dated _____



BRIDGE SECURITIES (PVT) LIMITED

TREC Holder, Pakistan Stock Exchange Limited
OFFICE NO. 214, 2ND FLOOR LSE PLAZA, LAHORE.

Phone:042-36280884-86

Email: bridgesecurities110@hotmail.com

www.bspl.com.pk

TREC No. 308 BRL-137

LATTER OF AUTHORITY

Dear Sir,

I want to inform you that I maintain a Sub Account No. _____ under your participant Account No. _____ for custody of my shares. I am often busy and cannot instruct you directly on the telephone or otherwise.

I, here for, authorize Mr. _____
S/o. _____ CNIC No. _____
Address _____

To convey my instruction to you among on the following matters:

1. To place order for purchase/sale of shares of various companies at various rates.
2. To sing confirmation statement of various trades carried out my behalf during the period.
3. To issue written instruction to you, for receipt/transfer of shares(though normal trade into/out of my C.D.C Sub Account)
4. To receive A/c payee cheques in my name from you and make payment on my behalf in cash or by cheques.
5. To receive original/copies of bills, proceeds an difference Bill and copies of Account Statements on my behalf.

You will be fully indemnified, for all acts and omission done, on behalf of my authorized person whose instruction shall be deemed as my instruction.

Yours sincerely,

Name: _____ signature: _____

Address: _____

Date: _____

Signatures:

Main applicant

Joint applicant 1

Joint applicant 2

Joint applicant 3

Participant

Undertaking For Foreign Account Tax Compliance Act (FATCA)

Name: _____

Country of Residence: _____

Country of Birth: _____

Please confirm the following	Yes	No
Are you U.S.A Residence	_____	_____
Are you U.S Citizen	_____	_____
Do you hold a U.S Permanent Resident Card (Green Card)	_____	_____
Are you a Resident/Citizen of other country (please specify	_____	_____
Are you Dual National (Please specify what nationality do you hold)	_____	_____
Are you a Resident of any country other than Pakistan (Please specify)	_____	_____
Do you have any tax obligation in a country other than Pakistan	_____	_____
{Note: If “yes” then please specify the list of countries along with its respective tax number Social securities number, or Local equivalent }		
Are you a U.S OWNED Entity/ony other country (please Specify)	_____	_____

I/We her Confirm the information provided above its true, accurate and complete.

I/we hereby provided my/our contact to Bridge securities (Pvt) Ltd or any associates/affiliates including branches (COLLECTIVELY “THE Broker”) to disclose and furnish and hare information pertaining to my/our account to domestic overseas regulators or tax authorities where necessary to establish our tax liability in any jurisdiction.

I/WE also authorize the Broker to deduct withholding tax from my/our account when required to do so by domestic or overseas regulator or tax authorities or payout. From my/our account(s) such amounts as may be required according to Applicable Laws, Rules, and Regulation, Agreements with regulator or authorities and directive (Both local and international).

I/we shall indemnify and hold the Broker harmless against any claim, Damages, Costs, expenses and other direct and/or indirect consequence of the Broker disclosing, furnishing and Haring any information pertaining to my/our trading account with any domestic or overseas regulators or tax authorities .

I/we agree and undertake to notify the Broker within thirty (30) calendar days if there is a change in any information which we here provided to the Broker.”

Customer Signature



BRIDGE SECURITIES (PVT) LIMITED

TREC Holder, Pakistan Stock Exchange Limited
OFFICE NO. 214, 2ND FLOOR LSE PLAZA, LAHORE.

Phone:042-36280884-86

Email: bridgesecurities110@hotmail.com

www.bspl.com.pk

TREC No. 308 BRL-137

Application Form for Online Internet Trading Terminal

Bridge Securities (Pvt) Ltd
TREC Holder, Pakistan Stock Exchange,
Room # 214, 2nd Floor, LSE Plaza,
19-Khayaban-e-Aiwan-e-Iqbal,
Lahore.

Dear Sir,

I/We, _____ S/o _____

Holder of CNIC # _____ would like to apply for Online Internet
Trading Terminal. (OITT)

Kindly send Online Internet Trading Terminal Login ID and Password at the following email ID:

_____ .

A/C # with Bridge Securities (Pvt) Limited: _____

Signature: _____ ✓

Date: _____

Lahore Stock Exchange and all other capital market entities, i.e. Central Depository Company (CDC) and National Clearing Company (NCCPL) are engaged in ensuring that our market apparatus provides the best possible security and safety in the trading, transmission and custody of investors' securities.

An essential element of adequate investors' protection apparatus is the duty of due care and appropriate oversight by the investors themselves over their trading and custodial arrangements. Investors are encouraged to ensure the following in this respect:

- ◆ Check and verify the reputation of the broker and the registration status of his branch office concerned and agents before establishing client relationship with any brokerage house.
- ◆ While opening a trading account with a broker, read and understand the contents of the "Standardized Account Opening Form" and provide all contact details (mailing address, e-mail, telephone, and mobile number etc.) on this form. Get a copy of the same duly indicating your trading ID number and UIN. Don't give unnecessary authorization to anyone to trade on your behalf.
- ◆ Have a "CDC Sub-Account" opened through your broker. Read the Sub Account Opening Form carefully and ask your broker to give you a copy, duly mentioning your complete contact details and the Sub Account Number.
- ◆ For absolute custody and protection of your portfolio, consider opening an account with CDC's "Investor Account Service (IAS)".
- ◆ Also enroll for free of cost e-alerts, e-statements and SMS alert services of CDC. Ask your broker to activate them, and ensure that you receive an email and/or SMS against any activity in your account as well as an e-statement on a monthly basis.
- ◆ Have a valid Unique Identification Number (UIN) issued from NCCPL. UIN for individual resident Pakistanis is the CNIC number.
- ◆ Regularly access NCCPL's website to check "UIN Information System" to monitor all activities carried out against your UIN by the broker.
- ◆ Ask the broker to place your orders through your respective UIN only, and strictly ask him to not aggregate your orders with other UINs as the same is non-transparent.
- ◆ In case of non registration for the IVR (Interactive Voice Response) or e-statement services of CDC, you must regularly obtain physical statement from the broker and also obtain a free of cost CDC Sub-Account statement from any CDC office. Ensure that both statements match each other and securities balances given are correct as per your record.
- ◆ Do not place funds with any broker on fixed return basis as the same is illegal.
- ◆ Always make payments/deliveries in the official name of the brokerage and always obtain receipt for every payment made.
- ◆ All transactions and capital gains taxes are payable on the prescribed rates of the Government of Pakistan. No broker can offer any relaxation in the prescribed rates of these taxes. A broker offering discounted rates against these taxes may be involved in deceptive and wrongful practices.
- ◆ In case of any change in your contact details, immediately update the same on all relevant record items such as the UIN database, your trading Account with the broker and your CDC Sub-Account etc.

In case of any discrepancy in the statements or suspicion of wrongful conduct of your broker, immediately contact Lahore Stock Exchange, CDC and/or NCCPL at their following given contacts:



Ph: +92-42-3636-8000
Fax: +92-42-3636-8485
Email: info@lse.com.pk
Web: www.lse.com.pk



Ph: +92-21-111-111-500
Fax: +92-21-3432 6031
Email: info@cdcpak.com
www.cdcpakistan.com



Ph: +92-21-32460811-19
Fax: +92-21-3246 0827
Email: info@nccpl.com.pk
Web: www.nccpl.com.pk

CLIENT RELATIONSHIP FORM

KYC-CHECK LIST

YOUR PERSONAL INFORMATION (to be filled by the client)

Name: _____
Father's / Husband's Name: _____ Mother's maiden Name: _____

Date of birth: _____ Place of Birth: _____ Nationality: _____

New NIC No: _____ Old NIC No: _____ Passport No: _____

Permanent Address: _____

Your Current Residence is: Owned Rented Mortgaged Parents Company Provided
Type of Accommodation: House Apartment Portion Other
Residing Since: _____

Gender: Male Female Marital Status: Single Married No. of Dependents: _____
Qualification Metric/O' level Inter/A'S level Bachelo Master & above
Source if Fund a Invested in Stock Exchange Loaned/Borrowed Own Investment
 Collective Investment Inherited savings

YOUR OCCUPATIONAL DETAIL (to be filled by the client)

Name of Company: _____ Designation: _____
Tel: _____ Fax: _____ Cell: _____ Email (office) _____

Nature of Occupation: Salaried Busin man Sel Employed Professional
Nature of Business (Please Specify) _____

Business/Employment tenure: _____ Years: _____ Month: _____

Your Monthly Income: Gross Income (Rs.) _____ Net Income (Rs.) _____ Other Income (Rs.) _____

YOUR REFERENCE

Name: _____ Relationship: _____ New NIC No. _____

Address Resident: _____

Tel (Res) _____ Tel (Office) _____ Cell No. _____

CONTACT DETAIL

Land Line No: _____ CNIC No: _____ Cell Number: _____
 Address Res: _____ Address Off: _____ Passport in case of foreigner: _____
 Nationality: _____ Email Address: _____ Obtain Business Card: _____

REMARKS

SIGNATURES:

Main Applicant _____ Joint Applicant 1 _____ Joint Applicant 2 _____ Joint Applicant 3 _____ Participant _____

BRIDGE SECURITIES (PVT) LIMITED.

Annexure A

FOR INTERNAL USE ONLY

KYC/CDD CHECKLIST

Date	Account	Account/UIN #
------	---------	---------------

SECTION A

Minimum Information/Documents to be Provided by Investor	Pls	pls
Pls	tick	tick
tick		

1. Individuals/Sole Proprietorships	2. partnerships	3. Institution/Corporation	
CNIC of principal and Joint Holders/ passport for Foreign Nationals / NICOP for non-resident Pakistan	CNICS/NICOP of all partners, as applicable	CNIC/NICOP of Authorized Signatories and Directors	
Proof of Employment/Business	Partnership Deed	List of Directors and Officers	
NTN Certificate, where available	Latest financial statements	NTN certificate	
	Certificate of Registration (in case of registration partnership firm)	Documentary evidence of tax Exemption (if applicable)	
	NTN Certificate	Certificate of Incorporation	
		Certificate of Commencement of Business	
		Certified Copy of Board Resolution	
		Memorandum & Articles of association/ Bye Laws/ Trust Deed	
		Audited Accounts of the company	
4. Trusts	5. Clubs societies and Associations	6. Executors/ Administrators	
CNICs of all trustees	Certificate copy of certificate of Registration	CNICs of all Executors/Administrators	
Certified copy of the Trust Deed	List of Members	Certified copy of Letter of Administration	
Latest financial of the trust	CNIC/NICOP of Members of Governing Board		
Documentary Evidence of Tax Exemption (if applicable)	Certified copy of bylaws/rules and regulation		
Trustee/Governing Body Resolution	Copy of latest financials of Society/Association		
	Board/Governing Body Resolution		

If documents/information is complete, proceed to section B

List any missing documents/information below:

If any document or information is missing, proceed to Section G4.

SECTION B

Assessment of Information provided in section A, Based on information provided in A,		
1. Is the investor also the ultimate beneficiary of the funds to be invested If No, joint account should be opened or power of attorney be provided by ultimate Beneficiary with relevant documentary detail of the beneficiary	Yes	No
2. In case the investor is a private company, IS the latest shareholders' list available	Yes	No
3. In case of Government Accounts, Mark YES if the account is not in the personal name of the government official A resolution/authority letter (duly endorsed by Ministry of finance or finance Department of concerned government) is available, which authorizes the opening and operating of this account by an officer of federal/provincial/local government in his /her official capacity	Yes	No
If the answer to any of the above question was 'NO', go to section G.3 or G.4 Otherwise go to section C		

Section C

Risk Category of Investor	please tick Box		
1. Government Department/Entity		LOW RISK	Go to Section G.1
2. Public listed Company		LOW RISK	Go to Section G.1
3. Private limited company		MEDIUM RISK	Go to Section G.2
4. Non-Government Organization (NGO)		HIGH RISK	Go to Section G.3
5. Trust/Charity		HIGH RISK	Go to Section G.3
6. Unlisted Financial institution			Go to Section D
7. Individual			Go to Section E

SECTION D

Unlisted Private Financial Institution (NBFI)		
Is the unlisted private financial institution domiciled in Pakistan and is regulated by the SECP/State Bank of Pakistan (SBP)	YES	NO
Is it domiciled in a FATF member country that is satisfactorily following the FATF Recommendation and is supervised by a regulatory body	YES	NO
If YES, proceed to Section G.1	If No, Proceed to Section G.3	

SECTION E

Individual		
1. Is the person a non-resident Pakistani	YES	NO
2. Is the person a high net worth individual with no identifiable source of income or His/her profile/source of income doesn't match with size & quantum of investments/	YES	NO
3. Is the person involved in dealing in high value item (based on declared occupation)	YES	NO
4. Is the person a foreign national	YES	NO
5. Does the person appear to have links or money transfer to/from offshore tax havens Or belong to country (s) where KYC/CDD and anti money laundering regulation are lax (in term of not sufficiently applying FATF recommendation)	YES	NO
6. Is there any reason to believe that the person has been refused account opening by Another financial institution/brokerage house	YES	NO
7. Is the person opening the brokerage account on a non-face-to-face basis/on-line	YES	NO
If the response to any question (1-7) above was 'YES', proceed to Section G.3		
8. Is the person a holder of senior level public (government) office i.e. a politically Exposed person (PEP) or family member of PEP.	YES	NO
9. Is the person a holder of high profile position (e.g. senior politically)	YES	NO
If the response to any question (8-9) above was 'YES', proceed to Section F, else proceed to Section G.1		

SECTION F

Politically Exposed Person/ Foreign National/Holder of High Profile Position		
Is the brokerage account relationship with this high risk category person including politically exposed person/foreign national/holder of high profile position, approved by the Nominee Director, CEO/COO of the brokerage house (approval shall be provided by management through signing the respective Account Opening Form	Yes	No
If YES, proceed to Section G.3	If NO, proceed to Section G.4	

SECTION G**Investor Risk Profile**

	Risk Classification	KYC Requirements
G.1	LOW RISK	Reduced KYC Requirement shall be applicable: Investor account can be opened once information/documents mentioned in section A have been provided.
G.2	MEDIUM RISK	Greater care required and documents listed in section A should be obtained before opening of account.
G.3	HIGH RISK	Enhanced KYC Requirements shall be applicable: Investor account can be opened once information/documents mentioned in section A have been provided. Transaction shall be monitored to ensure that the funds used for investments are from an account under the investor's own name in a financial institution (e. g bank) subject to high due diligence standards and the amount and frequency of investments are not unusual given the nature and financial strength of the Investor
G.4	HIGH RISK	Account cannot be opened as KYC Requirements have not been Fulfilled.

CONFIRMATION of physical presence of customer when opening account	YES	NO
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Other Comments

Completed by:	Name of sales person/Agent	Signature	Date
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Checked by:	Name of compliance person	Signature	Date
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PAKISTAN
STOCK EXCHANGE
LIMITED

INVESTOR AWARENESS GUIDE

PAKISTAN STOCK EXCHANGE LIMITED
Regulatory Affairs Division

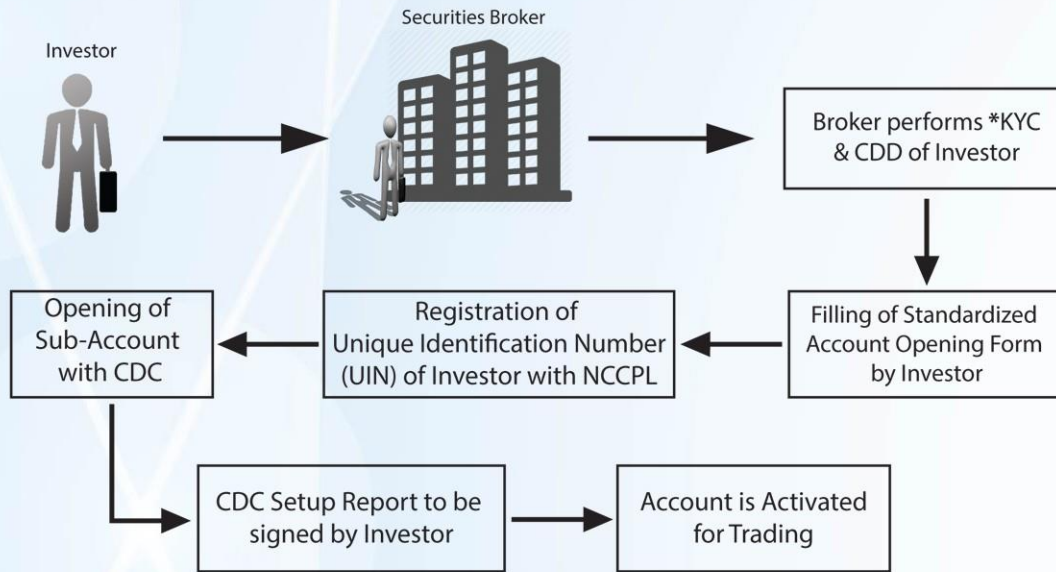


INVESTOR AWARENESS GUIDE

The Pakistan Stock Exchange Limited (PSX) is issuing this 'Investor Awareness Guide' to educate the investing PUBLIC about their rights and obligations and Guide them to take prudent approach while trading in shares or futures contracts. This Guide explains some significant provisions regarding shares trading and settlement as well as investors' protection.

***DISCLAIMER:** Investors should not construe this Guide as comprehensive and interpretive of all applicable regulatory provisions. Investors are further advised in their own interests to read and understand the applicable securities rules and regulations as framed by Securities and Exchange Commission of Pakistan (SECP), PSX, Central Depository Company of Pakistan Limited (CDC) and National Clearing Company of Pakistan Limited (NCCPL) to obtain complete understanding of their rights and obligations.*

ACCOUNT OPENING PROCESS FLOW



** KYC & CDD: Know Your Customer & Customer Due Diligence*

TRADING FLOW

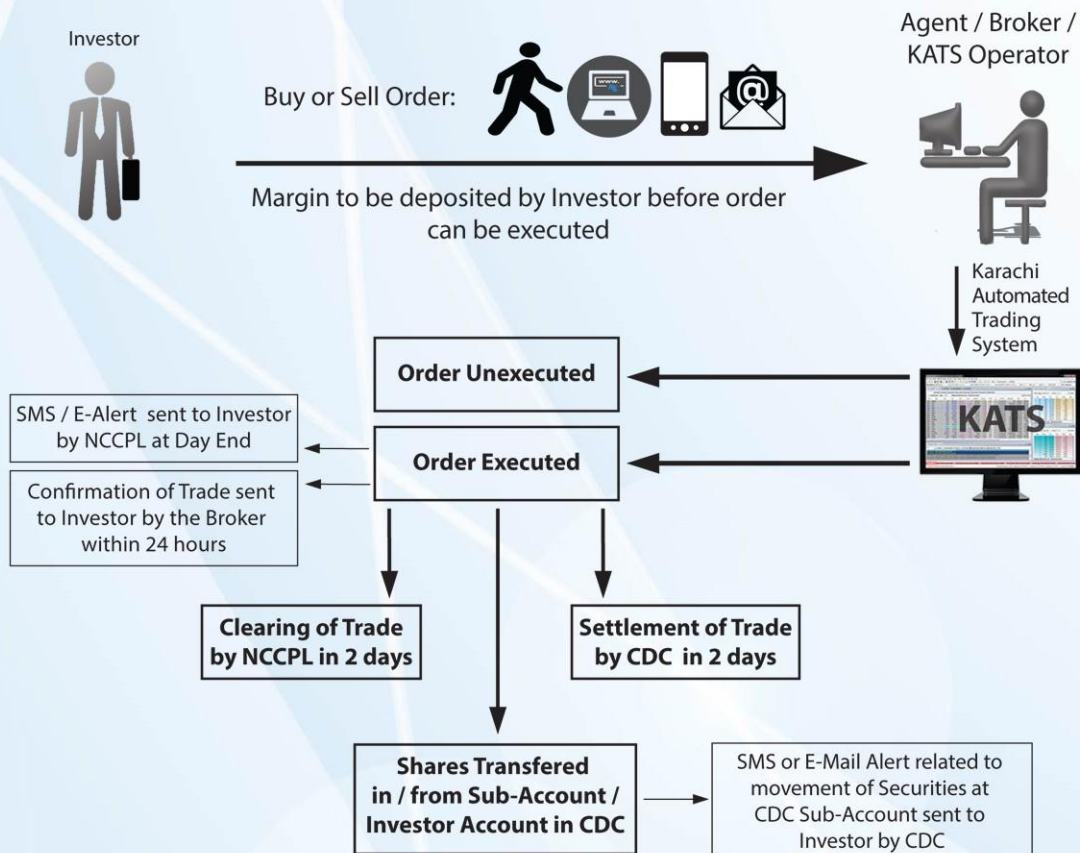


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1. KNOW YOUR BROKERS/AGENTS AND THEIR REGISTERED BRANCHES:

The Securities Brokers (Licensing and Operations) Regulations, 2016 framed under Securities Act, 2015 require a broker to be licensed and registered as Securities Broker (hereinafter referred to as “PSX Broker”) with SECP in order to perform the functions of a PSX Broker. Similarly, the agents of PSX Broker must also be registered with SECP to perform the functions of agent.

To verify the registration details of PSX Brokers and their agents is the first prudent step all investors should take to ensure that they trade through a duly registered person and at a registered place. Therefore, investors should seek from PSX Brokers/agents the information relating to their registration numbers and other related details prior to commencing business with them and match the same with their registration details including details relating to their registered branch offices available on PSX website: www.psx.com.pk and Jamapunji: www.jamapunji.pk.

The above verification is very crucial, because if you do business with an unregistered PSX Broker or agent that later embezzles your money and/or securities or goes out of business, there may be no way for you to recover your money or even lodge complaint with SECP or other capital market institutions i.e. PSX, CDC and NCCPL. Therefore, it is strongly advised to all investors to make sure that they deal through the registered PSX Broker and/or its agents and at their registered branches/offices.

2. OPENING OF ACCOUNT IN OWN NAME:

Customers are advised in their own interest to open trading account with PSX Brokers in their own name and are encouraged to operate the account themselves. However, in case Customer wishes to authorize a trustworthy person to operate the trading account, he/she should furnish written authorization for the same with PSX Broker while opening the account. The customer must retain a copy of such authorization for record purpose.

Customers must note that they will be responsible and liable for any consequences including but not limited to losses and claims that may arise or incurred by virtue of transactions executed in their account on the instructions of their authorized persons. Please keep in mind that such authorization carries risk of misuse of authority and may lead to fraud. Therefore, Customers need to be mindful of any bogus activity in their account and carefully select a person being authorized to operate their account in order to ensure that all trades executed in their account remain in their knowledge.

3. FILLING OF STANDARDIZED ACCOUNT OPENING FORM:

The PSX Brokers are required to adopt Standardized Account Opening Form (SAOF) for each of their Customers. The SAOF is a primary source of contractual agreement that contains minimum Terms and Conditions binding on the PSX Broker and its Customers equally.



Account Opening Form Checklist

- Nature of Account
- Complete particulars of account holder
- Declaration of Solvency
- Particulars of Authorized Person(s) to operate the account
- Letter of authorization from the Account Holder to operate the account by Authorized Person (s)
- Detail of Margin Deposit
- Details of Client banks (optional)
- Complete particulars of Account(s) with other broker(s) (optional)
- Complete particulars of Nominee
- Acknowledgement of Special Terms and Conditions as specified by the exchange
- Signature of Broker
- Signature of Account Holder
- Signature of Joint Account Holder (if applicable)
- Complete particulars of two witnesses with CNIC details

Enclosures (for individuals):

- Attested copies of National Identity Card of the applicant
- Attested copies of National Identity Card of the Joint Holders and or Nominee(s) (if applicable)
- Attested copies of passports of the applicant, Joint Holders and or Nominee(s) (in case of non-residents)
- Copy of the letter of authorization from the Account Holder(s) of the person authorized to trade in my/our accounts (if other than the account holder)
- List of Transaction fee, Commission to be charged by the Broker and other CDC charges to be levied

Enclosures (for corporate entities):

- Certified true copy of Board Resolution (as per specimen provided by PSX)
- Certified true copies of Memorandum & Articles of Association
- List of authorized signatories
- List of nominated persons allowed placing orders

Compliance Officer

Room No 214, 2nd Floor, Stock Exchange Building, 19-Khayaban-e-Awan-e-Iqbal Lahore.
TELEPHONE+92 42 36280884, +92 42 36280885, 36280886

EMAIL: bridgesecurities110@hotmail.com, URL: www.bspl.com.pk



KYC/CDD Checklist

**Annex-
B**

For Individual/ Sole proprietorship

- Copy of CNIC of Principal and Joint holders/ NICOP for Non-Residential Pakistanis
- Passport for Foreign Nationals
- Business/ Employment Proof
- NTN Certificate (If available)
- Nominee details (Not in case of Joint holders)
- Present and permanent address details with supports (where possible)
- Email address of the customer

For Partnership

- Name of Partnership and Partners
- Copy of CNIC/NICOP of all Partners
- Partnership Deed
- Copy of Latest Financials
- Certificate of Registration (If registered partnership firm)
- NTN Certificate
- Address of place of business
- Authorized partner to operate the account
- Mobile number and email address of the authorized person

For Institutions/ Corporates

- Name of Directors and Officers
- Registered Address
- Copy of CNIC/NICOP of all Directors and Authorized Signatories
- Certificate of Incorporation
- Certificate of Commencement of Business
- NTN Certificate
- Tax exemption certificate where applicable
- Certified copy of Board Resolution
- Memorandum & Articles of Association/ ByeLaws/ Trust Deed
- Audited Accounts of the Institutions/ Corporate



BRIDGE SECURITIES (PVT) LIMITED

For Trust

- Copy of CNIC of all Trustees
- Certified copy of Trust Deed
- Copy of Latest Financials of the Trust
- Document Evidence of Tax Exemption (If any)
- Trustee/ Governing Body Resolution

For Club Societies and Associations

- List of Members of Governing Body
- Copy of CNIC/ NICOP of Members of Governing Body
- Certified Copy of Certificate of Registration
- Certified Copy of by-laws/Rules and Regulations
- Copy of Latest Financials of Society/Association
- Resolution of Board/Governing Body

For Executors/ Administrations

- Copy of CNIC of all Executors/Administrators
- Certified Copy of Letter of Administration

Compliance Officer



BRIDGE SECURITIES (PVT) LIMITED

The Compliance Officer,
Bridge Securities (Pvt.) Limited
Lahore

Dear Sir/Madam

Subject: ACKNOWLEDGEMENT OF DOCUMENTS

I hereby acknowledge the receipt of the following documents.

- COPY OF COMPLETE SET OF ACCOUNT OPENING FORM
- COPY OF THE UIN POST REPORT
- CDC SETUP REPORT

Thanking you, we remain,
Yours truly,

Customer Name: _____

Account No : _____

CDC No : _____

Signature : _____

Room No 214, 2nd Floor, Stock Exchange Building, 19-Khayaban-e-Awan-e-Iqbal Lahore.
TELEPHONE+92 42 36280884, +92 42 36280885, 36280886

EMAIL: bridgesecurities110@hotmail.com, URL: www.bspl.com.pk



Account Closing Checklist

At the time of Account Closure

- Settlement of outstanding balance in the client's regular bank account (money and shares/securities held on client's behalf);
- Criteria for account closing date; whether after settlement or the date of application of account closing.

At the time of Account Closure

- There is no balance/ securities outstanding against the customers;
- Customer's money has been transferred/ settled;
- No transaction is carried out subsequent to account closing date;
- Requisite certifications and clearances as prescribed under the applicable regulatory framework have been obtained for closing the account.

Account(s) have been closed after the settlement if there is any transaction is in process.

Compliance Officer