



## Institutional Account Application

### Instructions for Completing your Private Scandinavian Sparkasse Application

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#### 1 Submitting your application:

- a. Before completing the form below, please make sure you have read and understood all information regarding your online trading account including the Online Trading General Business Terms and the Risk Disclosure Statement provided by Private Scandinavian Sparkasse and Credit Corp., SA.
- b. Please complete all information as accurately as possible.
- c. To comply with anti-money laundering regulations, you are required to send in the following documents:
  - i. A Copy of the Company's Certificate of Incorporation
  - ii. A Copy of the Company's Articles of Association appropriately signed
  - iii. Documents on who can sign on behalf of the Company (Authorized Signatories)
  - iv. A Copy of each Authorized Signatory's Passport to verify signatures
  - v. A Copy of Credit Card with a signature (*Only those Clients, who use Credit Card Deposit, are required to provide us A Copy of Credit Card to be used with the signature*)
- d. For faster processing, please send us the completed form along with the above-mentioned documents by fax to +46.8.501.09266 or email the scanned documents to [newaccounts@pssforex.com](mailto:newaccounts@pssforex.com)
- e. You can also send the form together with the documents by regular mail to:

**Attn: New Account**

**Online Trading Department**

**Private Scandinavian Sparkasse and Credit Corp., SA.**

**Stureplan 4c,**

**11435 Stockholm,**

**Sweden**

#### 2 Approval and Activation

If your account application is approved, our helpdesk officer will contact you at your listed email address.

For further queries, please reach us at [helpdesk@pssforex.com](mailto:helpdesk@pssforex.com) or call us at + 46.8.599.22.694.



## Institutional Account Application

Fields marked with an asterisk (\*) are mandatory.

### Account Type

\*Please select the trading account you are applying for:  Standard  Mini  Micro

### Account Details

\*Please select the currency of your account:  USD  EUR  GBP  JPY  CHF  
 AUD  NZD  CAD  HKD  RMB

### Client Information

\*Name of Company:

\*Tax Identification Number:

#### \*Main Business Address

#### \*Registered Address

If same as main address, please check this box.

\*Street Address: \_\_\_\_\_

\*City: \_\_\_\_\_

\*State: \_\_\_\_\_

\*Zip/Postal: \_\_\_\_\_

\*Country: \_\_\_\_\_

\*Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

\*E-mail Address: \_\_\_\_\_

\*Main Contact Person: \_\_\_\_\_

\*Title: \_\_\_\_\_

\*Are you publicly traded?  Yes  No

If yes, please provide us your ticker symbol: \_\_\_\_\_ and state the exchange: \_\_\_\_\_

\*Are you registered with any government agency?  Yes  No

If yes, please state the agency: \_\_\_\_\_

\*Do you act as an intermediary for your customers?  Yes  No

PRIVATE SCANDINAVIAN SPARKASSE AND CREDIT CORP., SA

STUREPLAN 4C, 11435 STOCKHOLM, SWEDEN

TEL. +46 8 5090 12 02 • FAX. +46 8 501 09 266

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## Institutional Account Application

Fields marked with an asterisk (\*) are mandatory.

### Ownership

Please list names of owners holding 25% ownership interest or more.

\*Family Name: \_\_\_\_\_

\*Given Name: \_\_\_\_\_

\*Position Held: \_\_\_\_\_

\*Country: \_\_\_\_\_

\*Are you controlled by a government?  Yes  No

If yes, please state the government that controls you:

### Corporate Disclosure

\*Number of Board Members: \_\_\_\_\_

\*Name of Chairman/President: \_\_\_\_\_

\*Name of Managing Director/VP: \_\_\_\_\_

\*Name of Secretary/Treasurer: \_\_\_\_\_

\*Directors:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Relationship with Private Scandinavian Sparkasse

\*Do you have an account with Private Scandinavian Sparkasse?  Yes  No

If yes, please provide the details of your relationship manager together with your account number:

### Financial Information

\*Equity capital stated in base currency: \_\_\_\_\_

\*Approximate risk capital in base currency: \_\_\_\_\_

\*Amount of Initial Deposit to the company's Online Trading Account in base currency: (minimum of US\$20,000)  
\_\_\_\_\_



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Fields marked with an asterisk (\*) are mandatory.

### Investment Experience

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Questions stated below about your investment experience will help us in evaluating your account application with us.

- \*How would you consider your company?  Professional investor  
 Experienced investor  
 Inexperienced investor
- 

- \*What kind of trader are you?  Risk willing  
 Risk neutral  
 Risk averse
- 

- \*What is your trading objectives?  To attempt to achieve speculative gains  
 To hedge other investments  
 To hedge commercial risk
- 

- \*Have you experienced trading and/or investing in financial market?  Yes  No  
If yes, please state the details:

- Years of Trading:  Less than 1 year  
 1 year to less than 3 years  
 3 years to less than 5 years  
 5 years or more

- Frequency of Trades:  Daily  
 Weekly  
 Monthly  
 Yearly

Products in which the company has previously invested:

- |   |   |
|---|---|
| <input type="checkbox"/> Futures          | <input type="checkbox"/> CFDs/ Stocks on margin |
| <input type="checkbox"/> Options          | <input type="checkbox"/> Bonds/ Fixed income    |
| <input type="checkbox"/> Foreign Exchange | <input type="checkbox"/> Real estate            |
| <input type="checkbox"/> Stocks           | <input type="checkbox"/> Others: _____          |



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### Financial Knowledge and Experience

- \*Do you know about the volatility of currency exchange rates?  Yes  No
- \*Do you have any knowledge on the availability of liquidity in currency market?  Yes  No
- \*Do you know the factor/s that influence/s exchange rate?  Yes  No
- \*Do you understand the impact of leverage and its risks in trading margined assets?  Yes  No
- \*Have you experienced using hedging tools such as stop loss and limit orders?  Yes  No

\*What kind of products and services at Private Scandinavian Sparkasse are you interested in?

- |   |  |
|---|--|
| <input type="checkbox"/> Futures          | <input type="checkbox"/> CFDs/Stocks on margin |
| <input type="checkbox"/> Options          | <input type="checkbox"/> Bonds/Fixed income    |
| <input type="checkbox"/> Foreign Exchange | <input type="checkbox"/> Others: _____         |

### How did you hear about us?

- Internet
- Print
- Personal Experience
- TV/Radio
- Seminar
- If you were referred by a broker or an advisor, please state the name and details:
- \_\_\_\_\_



## Institutional Account Application

### Signatures

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#### On behalf of the company, I declare by my signature:

To have read, understood and agreed to the Online Trading General Business Terms (including the Risk Disclosure Statement) and all of its contents;

To understand and accept that the Online Trading General Business Terms and any other relevant terms and conditions (as amended from time to time) apply to the company's entire trading relationship with Private Scandinavian Sparkasse and Credit Corp., SA.;

To have received, read and understood the product information material relating to the relevant products;

To have received additional in-depth verbal information about the products and the inherent possibilities and risks, if so requested; and

To have received satisfactory answers to all questions regarding the terms, conditions and other issues relating to the relevant products.

#### Furthermore, I confirm:

That the information provided by me and inserted in this form is correct;

That the investment amount has been chosen by me taking the company's total financial circumstances into consideration and is considered by me to be reasonable under such circumstances;

That I acknowledge that Private Scandinavian Sparkasse and Credit Corp., SA. is only able to provide proper advice to the company if I have supplied Private Scandinavian Sparkasse and Credit Corp., SA with correct and adequate information in this Client Application Form or as otherwise requested by Private Scandinavian Sparkasse and Credit Corp., SA.;

That Private Scandinavian Sparkasse and Credit Corp., SA is entitled to send newsletters or other investment material to me by e-mail, sms or similar electronic messaging services, and that [I/we] must inform Private Scandinavian Sparkasse and Credit Corp., SA in writing, if I do not wish to receive such material.

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Date

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Signature of Chairman/ President

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Print Name of Chairman/ President

#### In witness whereof,

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Date

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Signature of Secretary/ Treasurer

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Print Name of Secretary/ Treasurer

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