

ULTIMATE BENEFICIAL OWNER INFORMATION

COMPANY / LEGAL ENTITY DETAILS

NAME: _____ FORM COMPLETED BY: NOMINEE BENEFICIAL OWNER INTRODUCER

ULTIMATE BENEFICIAL OWNER INFORMATION

TITLE: _____ NAME: _____ SURNAME: _____

I.D./ PASSPORT NUMBER: _____ NATIONALITY: _____ PLACE OF BIRTH: _____ DATE OF BIRTH: _____

PASSPORT DETAILS: _____ COUNTRY OF ISSUE: _____ DATE OF ISSUE: _____ EXPIRY DATE: _____

MARITAL STATUS: SINGLE MARRIED COHABITATION DIVORCED/SEPARATED WIDOWED

RESIDENTIAL STATUS: OWNER TENANT WITH PARENTS OTHER _____

EDUCATION: HIGH SCHOOL COLLEGE UNIVERSITY POST GRADUATE PROFESSIONAL QUALIFICATIONS

CYPRUS RESIDENT NON-RESIDENT YEARS OF SERVICE/SELF-EMPLOYMENT: _____

EMPLOYER (If Self-Employed state so): _____ POSITION: _____

PREVIOUS EMPLOYMENT (IF LESS THAN 2 YEARS IN PRESENT) YEARS OF SERVICE/SELF-EMPLOYMENT: _____

EMPLOYER (If Self-Employed state so): _____ POSITION: _____

HOME ADDRESS: _____ NO. OF YEARS AT CURRENT ADDRESS: _____

POSTAL CODE: _____ TOWN/CITY: _____ COUNTRY: _____

WORK ADDRESS: _____

POSTAL CODE: _____ TOWN/CITY: _____ COUNTRY: _____

TEL. NO.: _____ HOME _____ WORK _____ MOBILE _____ FAX _____

E-MAIL: _____

BANK/ FINANCIAL INSTITUTION REFERENCE (Name and contact details): _____

INFORMATION REGARDING THE INVESTMENT EXPERIENCE OF THE ULTIMATE BENEFICIAL OWNER

PLEASE SELECT ANY OF THE STATEMENTS BELOW THAT ARE APPLICABLE

- Possesses a portfolio of financial instruments including cash deposits of minimum value of €500,000 (or equivalent in other currencies).
- Have realised a minimum of ten (10) transactions of significant volume per quarter on the same financial instruments during 4 consecutive quarters.
- Possesses significant financial knowledge and expertise or holds or have held a managerial position in a regulated financial firm or a bank.

BENEFICIAL OWNER'S OR NOMINEE(S) /INTRODUCER(S) DECLARATION, AUTHORISATION AND SIGNATURE

I/WE HEREBY CONFIRM TO ONE PLUS CAPITAL LIMITED (HEREINAFTER "ONEPLUS") THAT I / THE INDIVIDUAL WHO'S DETAILS ARE GIVEN ABOVE AM / IS AN ULTIMATE BENEFICIAL OWNER OF THE COMPANY / LEGAL ENTITY INDICATED ABOVE. I/WE HEREBY CONFIRM THAT I/WE HAVE BEEN INFORMED AND ACCEPT / INFORMED THE BENEFICIAL OWNER ABOUT ALL THE TERMS AND CONDITIONS WHICH GOVERN THE PROVISION OF THE REQUESTED ACCOUNTS AND SERVICES BY ONEPLUS. THE INFORMATION DISCLOSED ABOVE IS TRUE AND ACCURATE AND I/WE WILL PROMPTLY NOTIFY ONEPLUS IF ANY OF THE ABOVE PARTICULARS CHANGE OR CEASE TO BE TRUE AND ACCURATE. I/WE ALSO UNDERTAKE TO SUPPLY ANY OTHER INFORMATION THAT MAY BE REQUIRED IN THE FUTURE AND I/WE HEREBY SUBMIT TRUE COPIES OF THE RELEVANT ORIGINAL DOCUMENTS. FURTHERMORE I/WE UNDERSTAND AND AGREE THAT THE INFORMATION ABOVE AND ANY OTHER INFORMATION CONTAINED IN THIS DOCUMENT CAN AND MAY BE DISCLOSED BY ONEPLUS FOR REGULATORY PURPOSES OR BECAUSE OF OTHER STATUTORY OBLIGATIONS AND TO OTHER ENTITIES OF THE ONEWORLD GROUP.

 BENEFICIAL OWNER SIGNATURE
(Not required if Trust Deed/Declaration of Trust exist)

 DATE

 NOMINEE / INTRODUCER SIGNATURE(S)

 DATE

