



A Fauji Foundation Group Company



ACCOUNT OPENING FORM

Enclosures:

FOR INDIVIDUALS

1. Attested copies of Computerized National Identity Card of the applicant.
2. Attested copy of Computerized National Identity Card of the Joint Account Holder and/or Nominee(s) *(if applicable)*.
3. Attested copy of passport of the applicant, Joint Account Holder and/or Nominee(s) *(in case of Non-Resident)*.
4. Letter of authorization from the Account Holder of the person authorized to trade in my/our account *(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.
6. Proof of Residence
7. Proof of Employment / Business
8. NTN Certificate (if available)
9. Attested copy of witnesses CNIC

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 persons along with attested CNIC.
 4. List of nominated persons allowed to place orders with specimen signatures.
 5. Trust deed in case of Mutual Fund.
 6. Business commencement certificate. (if applicable)
- (All documents to be signed & stamped by company secretary)*

Note:

- 1: Each and every column must be filled in Block Letters.
- 2: Columns which are not applicable should be marked "NA" and also initiated.
- 3: Each page of this form will be duly signed by the Account Holder (s) and the Broker.
- 4: Bank verification on Pg. 13 is mandatory.

NATURE OF ACCOUNT

[Please tick (✓) appropriate box]

Nature of Account	<input type="checkbox"/> Single	<input type="checkbox"/> Joint	<input type="checkbox"/> DVP Individual	ONLINE	<input type="checkbox"/> Edge Value	<input type="checkbox"/> Edge Prime
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(Please use BLOCK LETTERS to fill the form)

A - MAIN APPLICANT

1. Name / Title of Account (as per CNIC):	
2. Father's / Husband's Name:	
3. Date of Birth:	4. Nationality:
5. Permanent Address:	
6. Mailing Address:	
7. Computerized National Identity Card No: <small>in case of non-resident, please provide passport copy and No.</small>	
8. Expiry Date of CNIC:	
9. NTN No. (optional)	-
10. (a) Office Tel:	(b) Home Tel:
(d) Fax No.	(e) E-mail:
(g) Status: <input type="checkbox"/> Resident <input type="checkbox"/> Non - Resident	(f) Occupation:
(h) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

B - JOINT ACCOUNT HOLDER

1. Name / Title of Account (as per CNIC):	
2. Father's / Husband's Name:	
3. Date of Birth:	4. Nationality:
5. Permanent Address:	
6. Mailing Address:	
7. Computerized National Identity Card No: <small>in case of non-resident, please provide passport copy and No.</small>	
8. Expiry Date of CNIC:	Relationship with Main Applicant
9. NTN No. (optional)	-
10. (a) Office Tel:	(b) Home Tel:
(d) Fax No.	(e) E-mail:
(g) Status: <input type="checkbox"/> Resident <input type="checkbox"/> Non - Resident	(f) Occupation:
(h) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

C - PARTICULARS OF AUTHORIZED PERSON

1. Name (as per CNIC):	
2. Father's / Husband's Name:	
3. Date of Birth:	4. Nationality:
5. Permanent Address:	
6. Mailing Address:	
7. Computerized National Identity Card No: <small>in case of non-resident, please provide passport copy and No.</small>	
8. Expiry Date of CNIC:	Relationship with Main Applicant
9. NTN No. (optional)	-
10. (a) Office Tel:	(b) Home Tel:
(d) Fax No.	(e) E-mail:
(g) Status: <input type="checkbox"/> Resident <input type="checkbox"/> Non - Resident	(f) Occupation:
(h) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

Signatures:

Account Holder

Joint Account Holder

Broker

D - NOMINEE DETAILS													
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 and liabilities in the account. In case of Joint Account, the survivor shall be entitled to receive securities/cash available in the account of the Account Holders, after set off /adjustment against losses and liabilities in the account.													
1. Name of Nominee:													
2. Father's / Husband's Name:													
3. Relationship with A/c Holder:													
4. Computerized National Identity Card No: <small>in case of non-resident, please provide passport copy and No.</small>													
5. Expiry Date of CNIC:													
6. Date of Birth:													
7. Postal Address:													
8. E-mail:										9. Tel:			
NAME OF PERSON(S) AUTHORIZED TO OPERATE AND SETTLE THE ACCOUNT													
1. Name:										1(a). Specimen Signature:			
1(b). <input type="checkbox"/> Singly <input type="checkbox"/> Jointly													
1(c). Computerized National Identity Card No:													
2. Name:										2(a). Specimen Signature:			
2(b). <input type="checkbox"/> Singly <input type="checkbox"/> Jointly													
2(c). Computerized National Identity Card No:													
3. Name of Attorney:										3(a). Specimen Signature:			
3(b). <input type="checkbox"/> Singly <input type="checkbox"/> Jointly													
3(c). Computerized National Identity Card No:													
Draft Power of Attorney -Annexure" A" is required for the above, in case the authorized person(s) is other than the Account Holder.													
Note: Do not pay cash in excess of Rs. 25000/- & all payment instruments must be made in favour of Foundation Securities (Pvt.) Limited only. Third party Payment to and from Foundation Securities Limited are not allowed													

Signatures:

Account Holder

Joint Account Holder

Broker

DECLARATION OF SOLVENCY

The Account Holder hereby declares that:

- 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;
- It is not un-discharged insolvent; and
- It has not been declared defaulter in repayment of loan of a bank/financial institutions.

MARGIN DEPOSIT

The Account Holder(s) hereby undertakes to deposit and maintain 30% margin against his / her / their outstanding trades / exposures for the purpose of trading in his/her/their account. The Account Holder(s) shall be responsible to ensure that the Margin shall be either in cash or in securities approved by the broker for the purpose of margin deposit and which are in a state and form whereby they can be marketed, delivered and transferred. The shares deposited as margin shall be subject to hair Cut as stipulated in the prevailing Regulations of Pakistan Stock Exchange Ltd. The Account Holder(s) undertake(s) to comply with the directions of the broker for regularization of any defect, mistake, discrepancy of any matter in respect of the Securities deposited as Margin. The Broker shall notify the Account Holder(s) about any change in the above Margin requirements for the already executed trades and/or for future trades at least 3 (three) days prior to the implementation of the revised margin requirement. This is without prejudice to the Broker's right to call additional cash or Securities as Margin within one-business day and to liquidate the Account Holder(s) outstanding positions as mentioned in Clauses 6 and 8 of the Special Terms and Conditions appended herein below.

INSTRUCTIONS TO BROKER (Please strike out whichever is not applicable)

OPTIONS FOR VERBAL INSTRUCTIONS

OPTION FOR WRITTEN INSTRUCTIONS

Clause 3 of the special terms and conditions reproduced herein: The Broker shall be authorized to act on the verbal instructions of the Account Holder(s). The Broker shall provide a written confirmation of the executed transactions as required under Rule 4(4) of the Securities & 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.

Clause 3 of the special terms and conditions reproduced herein: The Account Holder(s) may also give written instructions for the sale of securities to the Broker. The Broker shall provide a written confirmation of the executed transactions as required under Rule 4(4) of the Securities & Exchanges 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.

Signature(s) of Account Holder: _____

Signature(s) of Account Holder: _____

CONFIRMATION OF TRADE AND DELIVERY OF MAIL [Please tick (✓) appropriate box]

Confirmations of trades and other correspondence may please be sent to:
For online accounts confirmation of trade will be sent on register email.

Office address via postal mail / courier

Residential address via postal mail / courier

E-mail:

Fax No:

ADDITIONAL INFORMATION TO BE PROVIDED BY ACCOUNT HOLDER - OPTIONAL

BANK DETAILS		ACCOUNTS WITH OTHER BROKERS		
Name & Address of Bank(s)	Saving/Current Account #	Name of Broker(s)	Member Exchange	Client ID/Account

Note: Do not pay cash in excess of Rs. 25000/- & all payment instruments must be made in favour of Foundation Securities (Pvt.) Limited only.

Third party Payment to and from Foundation Securities Limited are not allowed

Signatures:

Account Holder

Joint Account Holder

Broker

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

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 of Securities between the parties shall be subject to the Articles, Rules and Regulations of the relevant 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 Registration Rules, 2001, Securities and Exchange Rules, 1971 and all directions/directives passed from time to time to regulate the trades between the parties and to regulate Brokers conduct and the Central Depository Companies of Pakistan 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(i). In case any dispute in connection with the trade or transaction between the Broker and the Account Holder is not settled amicably, either party may refer the same to arbitration in accordance with the provisions of General Regulations 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 members 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 amounts for his own use.
- 2(i). 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 Broker shall be authorized to act on the verbal instructions of the Account Holder(s). The Broker shall provide a written confirmation of the executed transactions as required under Rule 4(4) of the Securities & 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.

or

The Account Holder(s) may also give written instructions for the sale / Purchase of securities to the Broker. The Broker shall provide a written confirmation of the executed transactions as required under Rule 4(4) of the Securities & 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 transactions to the Account Holder at the above stated address by means of acceptable mode of communication or by hand subject to acknowledgment receipt as noted in Clause 18, within twenty four (24) hours of the execution of the order.
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 any further notice to Account Holder(s), liquidate the Account Holder(s) outstanding positions, including the Securities purchased and carried in such Account, at the sole risk and responsibility of the Account Holder(s) without incurring any liability against the Broker arising out of such action, so that the margin is maintained at the required level, or the losses suffered by the Broker, can be recovered.
- 7(i). The Broker shall be responsible to ensure delivery of CDC eligible securities in the CDC account of the Account Holder(s), subject to full payment by the Account Holder(s), in the manner indicated in Clause 8 hereafter. In case of companies which are not on the CDS, the Broker 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 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 requirements, and adjustment of any legitimate claims of the Broker).
- 7(ii). 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 the General Regulations of the Exchange.
- 8.(i) **The Broker shall be entitled to insist upon any particular method of payment, which may even include cash (in case of amounts not exceeding Rs. 25000/-, OR by "A/c Payee Only" crossed cheque, demand draft, State Bank of Pakistan's Cheque or Manager's Cheque, (In case of amounts in excess Rs. 25000/-). 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 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 payment 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 payments shall be made from the cash received from Clients. However, in exceptional circumstances, 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.**

Account Holder(s) Signature: _____ , _____

- 8.(ii) The Account Holder(s) shall pay to the Broker for all purchases removal of the last working session of the clearing of the relevant Exchange, all amounts due in respect of Securities that have been purchased or transactions carried out by the Broker on the instructions of the Account Holder(s), whether or not the Account Holder(s) has/have received Invoice/Bills in respect thereof. For the purpose of this Clause, a Certificate by the Broker that a particular amount is due in this regard, shall be the conclusive proof thereof and shall be binding upon and not called in question by the Account Holder(s).

Signatures:

Account Holder

Joint Account Holder

Broker

- 8.(iii) In case of any amount due from the Account Holder(s), as may be certified by the Broker in respect of Securities purchased on account of the Account Holder(s), has not been paid by the Account Holder(s) within the period specified in Clause 8(ii) above, the Broker shall have the right to settle the outstanding amounts out of any money(ies) or margin of the Account Holder(s) lying with the Broker or from any money(ies) realized from the sale of Securities or any other property held by the Broker as margin or security and the Broker shall have an unfettered right and power to sell, transfer and dispose off such assets and/or the margin or security as the Broker may deem fit.
- 8.(iv) In case of sale contract, the Account Holder(s) shall, before the start of the last working session of the clearing of the relevant Exchange, deposit with the Broker the Securities which he/she/ they/it has/have instructed the Broker to sell. The Account Holder(s) shall be responsible to ensure that such Securities are in a state and form whereby they can be marketed, delivered and transferred. The Account Holder(s) also undertake(s) to comply with the directions of the Broker for regularization of any defect, mistake, discrepancy or irregularity or any such matter in respect thereof.
- 8.(v) Without prejudice to the Broker's rights, remedies and resources mentioned in any of the preceding Clauses, in the event of the Account Holder(s) failure to make the payment against a purchase contract as mentioned in Clauses 8(ii) and 8(iii) above, or to deliver or deposit the Securities against a sale contract, as mentioned in Clause 8(iv) above, and/or to deposit and maintain the margin as mentioned in the Margin Deposit condition mentioned above in this Form, the Broker shall have the right to square up and liquidate the Account Holder(s)' outstanding position(s) and recover all outstanding due from the Account Holder(s), including losses, damages, costs and expenses which the Broker may suffer or sustain out of any Margin or Securities or collaterals that may be held by the Broker at the relevant time. The Account Holder(s) shall continue to be liable for any shortfall.
- 8.(vi) without prejudice to the other terms & conditions agreed between Foundation Securities (Pvt) Limited and the client, it is agreed that if any amount(s) standing due against the client is not paid on the due date(s), Foundation Securities (Pvt) Limited shall have the right charge the client late payment charges at a rate to be communicated in writing to the client.
9. The members shall make all the payments of Rs. 25000/- and above, through crossed cheques / bank drafts / pay orders or any other crossed banking instruments showing payment of amount from their business bank account. Copies of these payment instruments including cheques, pay orders, 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/their ledger statement under official seal and signature of the Broker or his authorized representative on monthly basis and otherwise as and when required by the Account Holder(s)' at a reasonable cost to the Account Holder(s). In case of any discrepancy in the ledger statement, the Account Holder(s) shall inform the Broker within 1 (one) day of receipt of the ledger statement.
11. The Account Holder (s) shall operate the account and execute transactions himself / herself / themselves unless the Account Holder(s) authorize Mr./Ms./ _____ CNIC No. _____ (Authorized Person) to transact in the account in which event the transactions shall be executed by the Authorized Person on behalf of the Account Holder(s). 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 provided to the Account Holder(s). Any change therein shall be intimated in writing to the Account Holder(s) with immediate effect. The Account Holder(s) shall not deal with any person at the Broker's office, except with the Broker's authorized agents/traders and designated employees. The Broker shall not be responsible for any dealings between the Account Holder(s) and any unauthorized person.
14. The Broker shall debit the account 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. The Account Holder(s) agree(s) to pay such commission at such rates and on such basis as the Broker may from time to time advise to the Account Holder(s), either verbally or in writing, in accordance with prescribed rates stipulated by the relevant Exchange or at such rates as the Broker may decide within the limits stipulated by the relevant Exchange. Besides, the Broker is also authorized to collect any levies, charges, taxes, rates, duties, including central excise duties, sales tax, etc. on each transaction as may be levied by the Federal, Provincial or Local Government(s), the Commission, the Exchanges and/or the CDC. In case any withholding tax is applicable on payments to be made to the Account Holder(s), the same shall be withheld in accordance with the pertinent laws, rules and regulations.
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 any appropriate Court, Tribunal, Exchange, the Commission, the State Bank, the Investigating Agencies (such as NAB, FIA, ANF, etc.) or the Federal or Provincial or Local Government(s) as the case may be, in exercise of its/their powers under the law require(s) any such information, the Broker shall be obliged to disclose the same for which the Account Holder(s) shall not raise any objection whatsoever.
16. In case, a Broker converts his individual membership rights to corporate membership and vice versa, or in case of merger of the Broker's corporate membership with another entity, the agreement and conditions laid down herein above shall remain effective, unless otherwise mutually agreed by the parties.
17. All orders received telephonically and placed on KATS shall be supported by recording on dedicated telephonic lines, preferably connected with a computerized taping system so as the orders could possibly be sorted on UIN basis and made user friendly.

**Note: Do not pay cash in excess of Rs. 25000/- & all payment instruments must be made in favour of Foundation Securities (Pvt.) Limited only.
Third party Payment to and from Foundation Securities Limited are not allowed**

Signatures:

Account Holder

Joint Account Holder

Broker

18. 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/acknowledgment, as per the medium chosen by the Account Holder(s) in the title page of this Account Opening Form. 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 orders to clients made through fax or e-mail will have a time record. The Broker may, however, at its discretion, insist upon a particular mode of receiving instructions from the Client in one of the above mentioned modes of communication and shall be further at a liberty to record, tape or in any other manner store such instructions. Any voice recording made by the Broker shall constitute evidence of the communication so recorded for such instructions.
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. The Account Holder(s) further undertake(s) to promptly notify the Broker in writing of any change in the List of Authorized Person(s), as set out in this Account Opening Form. No change thereto shall be effective and the Broker shall be entitled to rely on the information pertaining to the Authorized Person(s) and the particulars, as recorded with the Broker without incurring any liability for doing so, until such time that the Broker is so notified in writing along with the credentials and specimen signature(s) of the replacement Authorized Person(s).
20. The Account can be closed by either party upon given the other party 15 (fifteen) days prior written notice to the other. Upon service of such notice, no further transactions of Securities will be executed by the Broker on Account of the Account Holder(s), except that all pending orders shall be executed and all settlement shall be made on the effective date of such termination. This is without prejudice to the right of the Broker to close the Account and to square off the Account Holder(s)' position and recover all outstanding, dues, losses, etc. without any prior notice in event of non-payment or breach of any of the terms and conditions of this Agreement by the Account Holder(s). The Account Holder(s) shall continue to be liable for any shortfall.
21. 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 undertake that I / we have understood all the above terms and conditions of this agreement which are acceptable to me / us.
22. I / We, the Account Holder(s) understand(s) 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. 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.
23. 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 from any sources deemed appropriate by the Broker.
24. **"FSL" reserves right to transfer holding (s) from client's CDC sub account to client's CDC investor account at any time when deem necessary by giving one day prior notice through any mode of communication. The client shall not question or raise objection on such notice. The securities transferred under such notice shall be deemed as lawful and authorized handling of securities. The non-transmittal of aforesaid notice by whatsoever reason shall not make transfer of securities to CDC Investor account of client objectionable.**

Account Holder(s) Signature: _____ , _____

25. All applicable regulatory and statutory levies directly imposed by regulators (PSX, CDC, SECP and NCCPL etc), shall be communication and shall also be placed on website of Foundation Securities (Pvt) Ltd.
26. Brokerage rates are provided with SAOF and should sign by the clients. Any subsequent change in these in rates shall be informed to the client accordingly.
27. FSL also reserves right to block or suspend any account and or UIN, if unreasonable or suspicious activity is found or FSL believes that such account may breach regulations or good standard market practices.

SIGNATURE OF ACCOUNT HOLDER												
Name of Applicant:						Date:			Signature:			
FOR JOINT ACCOUNT HOLDER :												
Name of Applicant:						Date:			Signature:			
FOR AND ON BEHALF OF BROKER:												
Name:						Signature:						
Designation:												
WITNESSES:												
1. Name:									Signature:			
CNIC No:												
2. Name:									Signature:			
CNIC No:												

Signatures:

Account Holder

Joint Account Holder

Broker

IMPORTANT

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

TERMS AND CONDITIONS FOR ONLINE TRADING

These terms and conditions are in addition to the other terms and conditions of this Account Opening Form and are applicable only in case of Online Trading:

- (a) Online trading will be permitted through an online trading system of the Broker, which will act for the purpose of buying and selling securities, including Leverage Product at the Stock Exchange (Online Exchange).
- (b) A password or (personal identification number) PIN will be issued to the Account Holder(s) by the Broker 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 email or through any courier 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 the Broker.
- (c) Broker 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 the Broker. If the Password / PIN is disclosed to any third party the Account Holder(s) should immediately notify the same to the Broker. 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 Account Opening Form.
- (d) All risks connected and involved with Electronic/Online Trading will be assumed fully by the Account Holder(s). Neither the Broker 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 slow downs in the internet connection and piracy of Account Holder(s) information and affairs by unscrupulous persons.
- (e) The Broker 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 Trading Facility on account of the Account Holder(s). The amount and timing may vary depending on factors solely at Broker's discretion. Broker shall have the right to liquidate the Account Holder(s) Trading position(s) if the Account margin is insufficient at any time.
- (f) The Broker 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.
- (g) All other term and conditions including Special Terms and Conditions and CDC Terms and Conditions of this Account Opening Form shall be equally applicable to Online Trading Account(s).

Note: Do not pay cash in excess of Rs. 25000/- & all payment instruments must be made in favour of Foundation Securities (Pvt.) Limited only.

Third party Payment to and from Foundation Securities Limited are not allowed

Signatures:

Account Holder

Joint Account Holder

Broker

(TO BE MADE ON STAMP PAPER OF Rs. 500/- DULY ATTESTED BY NOTARY PUBLIC)

SPECIAL POWER OF ATTORNEY FOR OPERATING OF ACCOUNT

Through this power of attorney dated _____ day of _____, _____
 I/We, the Account Holder(s), having Trading Account No. _____ and CDC Sub Account No. _____ titled
 _____ maintained with Foundation Securities (Pvt.) Limited do hereby appoint
 Mr/Ms _____ s/o d/o w/o _____ holder of CNIC No.
 _____, whose signature is given below and who is related to me/us as _____
 and whose bank account is provided herein below for identification purposes only which is also verified by his banker, as my/our Attorney to execute
 all transactions of Buy/Sell of Securities and their settlement in my said account for and on behalf of me/us as and when may be deemed appropriate
 by him/her in hisdiscretion since: *(please choose one of the following by ticking on it, in case of choosing option "iii" mention reason)*

- i) I/We am/are incapable of understanding complexities of stock market, or
- ii) I/We am/are not well conversant with the trading patterns of securities, or
- iii) Due to the reason of _____ could not transact on my/our own.

All transactions, settlements, agreements etc entered/executed by him/her shall be construed as done by me/us in person and shall be binding on me/us and shall never be questioned by me/us ever on any premise and at any forum whatsoever. I/We hereby instruct Foundation Securities (Pvt.) Limited to accept and treat the said person as my/our legally appointed Attorney with all powers as aforesaid and treat this Power of Attorney as an integral part of my Account Opening Form with Foundation Securities (Pvt.) Limited pertaining to the above stated trading account and CDC sub account. All references to Power of Attorney in the said Account Opening Form should also be read in accordance with this document.

Bank Account Information of the Authorized Attorney for identification purposes as discussed above

Title of the Bank Account _____
Bank Account Number _____
Bank Name and Address _____

Verification by the Bank: It is verified that the above bank account info is correct and the account validly exists.

Bank stamp and signatures _____

I/We undertake that in the event of termination/withdrawal of this authority, Foundation Securities (Pvt.) Limited. shall be notified immediately and promptly in writing. However all transactions executed before delivery of the said notice shall be binding on the Account Holder(s) in all respects.

In WITNESS WHEREOF, I/We execute this power of attorney on the date above mentioned.

<u>Account Holder(s)</u>	<u>Appointed Attorney</u>
Name: _____	Name: _____
CNIC: _____	CNIC: _____
Signature: _____	Signature: _____
Name: _____	
CNIC: _____	
Signature: _____	

WITNESSES

Name: _____	Name: _____
CNIC: _____	CNIC: _____
Address: _____	Address: _____
_____	_____
Signature: _____	Signature: _____

SUB-ACCOUNT OPENING FORM FOR INDIVIDUALS

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: (Address should be different from Participant's business address)														
4. (a) Contact No: Landline No.						Local Mobile No. (*)								
(b) Fax (optional)						(c) Email: (*)								
5. Computerized National Identity Card No: (For resident Pakistani)														
6. Expiry date of CNIC:														
7. NICOP No: (For non-resident Pakistani)														
8. Expiry date of NICOP:														
9. Passport details: (For a Foreigner or a Pakistani origin)			Passport Number:			Place of Issue:			Date of Issue:			Date of Expiry:		
10. (a) Occupation <input type="checkbox"/> AGRICULTURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> HOUSEWIFE <input type="checkbox"/> HOUSEHOLD <input type="checkbox"/> RETIRED PERSON <input type="checkbox"/> STUDENT (Please tick (✓) the appropriate box) <input type="checkbox"/> BUSINESS EXE. <input type="checkbox"/> INDUSTRIALIST <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> SERVICE <input type="checkbox"/> 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: (Address should be different from Participant's business address)														
4. (a) Contact No: Landline No.						Local Mobile No. (*)								
(b) Fax (optional)						(c) Email: (*)								
5. Computerized National Identity Card No: (For resident Pakistani)														
6. Expiry date of CNIC:														
7. NICOP No: (For non-resident Pakistani)														
8. Expiry date of NICOP:														
9. Passport details: (For a Foreigner or a Pakistani origin)			Passport Number:			Place of Issue:			Date of Issue:			Date of Expiry:		
10. (a) Occupation <input type="checkbox"/> AGRICULTURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> HOUSEWIFE <input type="checkbox"/> HOUSEHOLD <input type="checkbox"/> RETIRED PERSON <input type="checkbox"/> STUDENT (Please tick (✓) the appropriate box) <input type="checkbox"/> BUSINESS EXE. <input type="checkbox"/> INDUSTRIALIST <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> SERVICE <input type="checkbox"/> 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: (Address should be different from Participant's business address)														
4. (a) Contact No: Landline No.						Local Mobile No. (*)								
(b) Fax (optional)						(c) Email: (*)								
5. Computerized National Identity Card No: (For resident Pakistani)														
6. Expiry date of CNIC:														
7. NICOP No: (For non-resident Pakistani)														
8. Expiry date of NICOP:														
9. Passport details: (For a Foreigner or a Pakistani origin)			Passport Number:			Place of Issue:			Date of Issue:			Date of Expiry:		
10. (a) Occupation <input type="checkbox"/> AGRICULTURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> HOUSEWIFE <input type="checkbox"/> HOUSEHOLD <input type="checkbox"/> RETIRED PERSON <input type="checkbox"/> STUDENT (Please tick (✓) the appropriate box) <input type="checkbox"/> BUSINESS EXE. <input type="checkbox"/> INDUSTRIALIST <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> SERVICE <input type="checkbox"/> OTHERS (specify)														
(b) Name of Employer / Business:						(c) Job Title / Designation:								
(d) Address of Employer / Business:														

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: [Please tick (✓) the appropriate box]											
(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)											
<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)											
[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.]											
(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: Landline No. Local Mobile No. (*)											
(k) Fax (optional) (l) Email: (*)											
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 mandatory service , where alerts are sent whenever certain activities takes 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.											
<input type="checkbox"/> Short Messaging Service (SMS) Mobile No. (☎)											
<input type="checkbox"/> eAlert / e Statement Service Email: (☎) (☎) of Contact Person as provided in Part A or Part B of this Form. as the case may be											
1 (b) If you have subscribed for eStatement, please specify the frequency of eStatement: [Please tick (✓) the appropriate box] <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly											
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):											

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

Annexure - FATCA Declaration

The Foreign Account Tax Compliance Act (FATCA) is a part of US legislation enacted by the US Congress to prevent tax evasion by US persons who conceal offshore assets from the IRS (US Tax Authority). The objective of FATCA is to obtain information on certain US persons with income or assets outside the United States for the purpose of increasing compliance with US tax laws. The purpose of this form is to gather relevant information for our Global Compliance reporting matters.

(All Fields are Mandatory) - Write Not Applicable (N.A) where required

Account No.:	Name:
Nationality If you hold multiple nationalities, please indicate here	1. _____ 2. _____
Country of Permanent Residence	
Country of Birth	
Permanent Address	Mailing Address: _____ Postal Code: _____ City: _____ Country: _____
Mailing Address (if different from above)	Mailing Address: _____ Postal Code: _____ City: _____ Country: _____
Telephone	_____ - _____ - _____ Country Code Area code Number
Name & Address of Authorized Person to transact in the Account / Third Party Mandate	Name: _____ Mailing Address: _____ City: _____ Postal Code: _____ Country: _____

**As per our policy at FSL we do not entertain any request to hold any mail or provide an in care of address facility to any customer. We also do not entertain any standing instructions to transfer any amounts to any accounts.*

Account Holder's Declaration

I/we hereby confirm the information provided above is true, accurate and complete. I/we hereby provide my/our consent to Foundation Securities (Pvt.) Limited FSL or any of its affiliates to disclose and furnish and share information pertaining to my/our account to domestic or overseas regulators or tax authorities where necessary to establish our tax liability in any jurisdiction.

I/we also authorize FSL to deduct withholding tax from my/our account when required to do so by domestic or overseas regulators or tax authorities or pay out, from my/our account(s) such amounts as may be required according to applicable laws, regulations, agreements with regulators or authorities and directives.

I/we shall indemnify and hold FSL harmless against any claim, damages, costs, expenses and other direct and/or indirect consequence of disclosing, furnishing and sharing any information with any domestic or overseas regulators or tax authorities.

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

I/we agree that FSL may, either at its own instance or of any court, close, freeze or suspend dealings on the account, without prior notice to the customer and without being liable for any duty it may owe to the customer. FSL reserves the right, at its sole discretion and without notice to the customer, to close the account, which is not being operated in a manner satisfactory to FSL or for any other reason whatsoever, without disclosing the reason for closure of the said account to us.

Signatures:

_____ Account Holder

_____ Date

_____ Broker

Annexure - FATCA Declaration for Joint Account Holder(s)

The Foreign Account Tax Compliance Act (FATCA) is a part of US legislation enacted by the US Congress to prevent tax evasion by US persons who conceal offshore assets from the IRS (US Tax Authority). The objective of FATCA is to obtain information on certain US persons with income or assets outside the United States for the purpose of increasing compliance with US tax laws. The purpose of this form is to gather relevant information for our Global Compliance reporting matters.

(All Fields are Mandatory) - Write Not Applicable (N.A) where required

Account No.:	Name:
Nationality If you hold multiple nationalities, please indicate here	1. _____ 2. _____
Country of Permanent Residence	
Country of Birth	
Permanent Address	Mailing Address: _____ Postal Code: _____ City: _____ Country: _____
Mailing Address (if different from above)	Mailing Address: _____ Postal Code: _____ City: _____ Country: _____
Telephone	_____ - _____ - _____ Country Code Area code Number
Name & Address of Authorized Person to transact in the Account / Third Party Mandate	Name: _____ Mailing Address: _____ City: _____ Postal Code: _____ Country: _____

**As per our policy at FSL we do not entertain any request to hold any mail or provide an in care of address facility to any customer. We also do not entertain any standing instructions to transfer any amounts to any accounts.*

Joint Account Holder(s) Declaration

I/we hereby confirm the information provided above is true, accurate and complete. I/we hereby provide my/our consent to Foundation Securities (Pvt.) Limited FSL or any of its affiliates to disclose and furnish and share information pertaining to my/our account to domestic or overseas regulators or tax authorities where necessary to establish our tax liability in any jurisdiction.

I/we also authorize FSL to deduct withholding tax from my/our account when required to do so by domestic or overseas regulators or tax authorities or pay out, from my/our account(s) such amounts as may be required according to applicable laws, regulations, agreements with regulators or authorities and directives.

I/we shall indemnify and hold FSL harmless against any claim, damages, costs, expenses and other direct and/or indirect consequence of disclosing, furnishing and sharing any information with any domestic or overseas regulators or tax authorities.

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

I/we agree that FSL may, either at its own instance or of any court, close, freeze or suspend dealings on the account, without prior notice to the customer and without being liable for any duty it may owe to the customer. FSL reserves the right, at its sole discretion and without notice to the customer, to close the account, which is not being operated in a manner satisfactory to FSL or for any other reason whatsoever, without disclosing the reason for closure of the said account to us.

Signatures:

_____ Joint Account Holder

_____ Date

_____ Broker

KNOW YOUR CUSTOMER (KYC) FOR INDIVIDUALS			
(TO BE FILLED BY THE ACCOUNT HOLDER)			
Name of Applicant:		Father's / Husband's name:	
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Qualification:	<input type="checkbox"/> Matric / O level <input type="checkbox"/> Inter / A level <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters & above		
City:	<input type="checkbox"/> Karachi <input type="checkbox"/> Islamabad <input type="checkbox"/> Lahore <input type="checkbox"/> Others (specify) _____	Country:	_____
Type of accommodation:	<input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Portion		
Residence is:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgage <input type="checkbox"/> Parents <input type="checkbox"/> Company Provided		
Occupation:	<input type="checkbox"/> Agriculturist <input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Retired Person <input type="checkbox"/> Student <input type="checkbox"/> Service		
	<input type="checkbox"/> Industrialist <input type="checkbox"/> Professional <input type="checkbox"/> Business Executive <input type="checkbox"/> Others (specify): _____		
Occupation Details:	Employer / Business Name: _____		Designation: _____
	Nature of Business: _____		Tenure: _____
Sources of Income:	<input type="checkbox"/> Salaried <input type="checkbox"/> Business <input type="checkbox"/> Others (specify): _____		
Account Mode:	<input type="checkbox"/> Online <input type="checkbox"/> Offline		
Expected value of Investment:	<input type="checkbox"/> Up to Rs. 500,000/- <input type="checkbox"/> Up to Rs. 1,500,000/- <input type="checkbox"/> Up to Rs. 2,500,000/- <input type="checkbox"/> More than Rs. 2,500,000/-		
Knowledge of Stock Market:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Sources of fund for Stock Investment:	<input type="checkbox"/> Loan / Borrowed <input type="checkbox"/> Own Investment <input type="checkbox"/> Collective Investment		
Do you have any Investor Account?	<input type="checkbox"/> Yes then Investor Account # _____		<input type="checkbox"/> No
Do you / your family member have any other account in FSL?	<input type="checkbox"/> Yes then give name(s): _____		<input type="checkbox"/> No
REFERENCE DETAILS			
Name:	Occupation:	Contact #:	_____
Address: _____			

(TO BE FILLED BY THE JOINT ACCOUNT HOLDER)			
Name of Joint Applicant:		Father's / Husband's name:	
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Qualification:	<input type="checkbox"/> Matric / O level <input type="checkbox"/> Inter / A level <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters & above		
City:	<input type="checkbox"/> Karachi <input type="checkbox"/> Islamabad <input type="checkbox"/> Lahore <input type="checkbox"/> Others (specify) _____	Country:	_____
Type of accommodation:	<input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Portion		
Residence is:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgage <input type="checkbox"/> Parents <input type="checkbox"/> Company Provided		
Occupation:	<input type="checkbox"/> Agriculturist <input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Retired Person <input type="checkbox"/> Student <input type="checkbox"/> Service		
	<input type="checkbox"/> Industrialist <input type="checkbox"/> Professional <input type="checkbox"/> Business Executive <input type="checkbox"/> Others (specify): _____		
Occupation Details:	Employer / Business Name: _____		Designation: _____
	Nature of Business: _____		Tenure: _____
Sources of Income:	<input type="checkbox"/> Salaried <input type="checkbox"/> Business <input type="checkbox"/> Others (specify): _____		
Account Mode:	<input type="checkbox"/> Online <input type="checkbox"/> Offline		
Expected value of Investment:	<input type="checkbox"/> Up to Rs. 500,000/- <input type="checkbox"/> Up to Rs. 1,500,000/- <input type="checkbox"/> Up to Rs. 2,500,000/- <input type="checkbox"/> More than Rs. 2,500,000/-		
Knowledge of Stock Market:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Sources of fund for Stock Investment:	<input type="checkbox"/> Loan / Borrowed <input type="checkbox"/> Own Investment <input type="checkbox"/> Collective Investment		
Do you have any Investor Account?	<input type="checkbox"/> Yes then Investor Account # _____		<input type="checkbox"/> No
Do you / your family member have any other account in FSL?	<input type="checkbox"/> Yes then give name(s): _____		<input type="checkbox"/> No
REFERENCE DETAILS			
Name:	Occupation:	Contact #:	_____
Address: _____			

I/ we confirm that above stated information is correct and true.

Signatures:

Account Holder

Joint Account Holder

Broker

(TO BE FILLED BY THE JOINT ACCOUNT HOLDER)			
Name of Joint Applicant:		Father's / Husband's name:	
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Qualification:	<input type="checkbox"/> Matric / O level <input type="checkbox"/> Inter / A level <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters & above		
City:	<input type="checkbox"/> Karachi <input type="checkbox"/> Islamabad <input type="checkbox"/> Lahore <input type="checkbox"/> Others (specify) _____	Country:	_____
Type of accommodation:	<input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Portion		
Residence is:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgage <input type="checkbox"/> Parents <input type="checkbox"/> Company Provided		
Occupation:	<input type="checkbox"/> Agriculturist <input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Retired Person <input type="checkbox"/> Student <input type="checkbox"/> Service		
	<input type="checkbox"/> Industrialist <input type="checkbox"/> Professional <input type="checkbox"/> Business Executive <input type="checkbox"/> Others (specify): _____		
Occupation Details:	<input type="checkbox"/> Employer / Business Name: _____		<input type="checkbox"/> Designation: _____
	<input type="checkbox"/> Nature of Business: _____		<input type="checkbox"/> Tenure: _____
Sources of Income:	<input type="checkbox"/> Salaried <input type="checkbox"/> Business <input type="checkbox"/> Others (specify): _____		
Account Mode:	<input type="checkbox"/> Online <input type="checkbox"/> Offline		
Expected value of Investment:	<input type="checkbox"/> Up to Rs. 500,000/- <input type="checkbox"/> Up to Rs. 1,500,000/- <input type="checkbox"/> Up to Rs. 2,500,000/- <input type="checkbox"/> More than Rs. 2,500,000/-		
Knowledge of Stock Market:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Sources of fund for Stock Investment:	<input type="checkbox"/> Loan / Borrowed <input type="checkbox"/> Own Investment <input type="checkbox"/> Collective Investment		
Do you have any Investor Account?	<input type="checkbox"/> Yes then Investor Account #: _____		<input type="checkbox"/> No
Do you / your family member have any other account in FSL?	<input type="checkbox"/> Yes then give name(s): _____		<input type="checkbox"/> No
REFERENCE DETAILS			
Name:	Occupation:	Contact #:	
Address:			

(TO BE FILLED BY THE JOINT ACCOUNT HOLDER)			
Name of Joint Applicant:		Father's / Husband's name:	
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Qualification:	<input type="checkbox"/> Matric / O level <input type="checkbox"/> Inter / A level <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters & above		
City:	<input type="checkbox"/> Karachi <input type="checkbox"/> Islamabad <input type="checkbox"/> Lahore <input type="checkbox"/> Others (specify) _____	Country:	_____
Type of accommodation:	<input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Portion		
Residence is:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Mortgage <input type="checkbox"/> Parents <input type="checkbox"/> Company Provided		
Occupation:	<input type="checkbox"/> Agriculturist <input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Retired Person <input type="checkbox"/> Student <input type="checkbox"/> Service		
	<input type="checkbox"/> Industrialist <input type="checkbox"/> Professional <input type="checkbox"/> Business Executive <input type="checkbox"/> Others (specify): _____		
Occupation Details:	<input type="checkbox"/> Employer / Business Name: _____		<input type="checkbox"/> Designation: _____
	<input type="checkbox"/> Nature of Business: _____		<input type="checkbox"/> Tenure: _____
Sources of Income:	<input type="checkbox"/> Salaried <input type="checkbox"/> Business <input type="checkbox"/> Others (specify): _____		
Account Mode:	<input type="checkbox"/> Online <input type="checkbox"/> Offline		
Expected value of Investment:	<input type="checkbox"/> Up to Rs. 500,000/- <input type="checkbox"/> Up to Rs. 1,500,000/- <input type="checkbox"/> Up to Rs. 2,500,000/- <input type="checkbox"/> More than Rs. 2,500,000/-		
Knowledge of Stock Market:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Sources of fund for Stock Investment:	<input type="checkbox"/> Loan / Borrowed <input type="checkbox"/> Own Investment <input type="checkbox"/> Collective Investment		
Do you have any Investor Account?	<input type="checkbox"/> Yes then Investor Account #: _____		<input type="checkbox"/> No
Do you / your family member have any other account in FSL?	<input type="checkbox"/> Yes then give name(s): _____		<input type="checkbox"/> No
REFERENCE DETAILS			
Name:	Occupation:	Contact #:	
Address:			

I/ we confirm that above stated information is correct and true.

Signatures:

Account Holder

Joint Account Holder

Broker

CUSTOMER DUE DILIGENCE CHECKLIST			
	Risk classification	KYC requirements	
G.1	Low risk	Reduced KYC requirements shall be applicable.	
G.2	Medium risk	Greater care required and documents should be obtained before opening of account.	
G.3	High risk	Enhanced KYC Requirements shall be applicable.	
G.4	High risk	Account cannot be opened as KYC requirements have not been fulfilled.	
1.	Proof of address to be provided by applicant (submit any one)	<input type="checkbox"/> Driving license <input type="checkbox"/> Latest Utility bill	<input type="checkbox"/> Passport Copy <input type="checkbox"/> Others
2.	CNIC of Principal and Joint Holders / Passport for foreign Nationals / NICOP for Non Resident Pakistanis:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low risk High risk (G4)
3.	Proof of Employment / Business:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low risk (G1) High risk (G4)
4.	NTN certificate, where applicable:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low risk (G1) High risk (G4)
5.	Is the person a Non Resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
6.	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 and quantum of investments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
7.	Is the person involved in dealing in high value items? (based on declared occupation)	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
8.	Is the person a foreign National?	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
9.	Does the person appear to have links or money transfer to / from offshore tax heavens or belongs to country(s) where KYC / CDD and anti money laundering regulations are lax? (in terms of not sufficiency applying FATF recommendations)	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
10.	Is there any reason to believe that the person has been refused account opening by another financial institution / Brokerage House?	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
11.	Is the person opening the brokerage account on a non face to face basis / Online?	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) Low risk (G1)
12.	Is the person a holder of a senior level public (Government) office i.e. Politically exposed person (PEP) of a family member of PEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low risk (G1)
13.	Is the person a holder of high profile position? (e.g. Senior Politician)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low risk (G1)
14.	If the response to any question (12-13) above was YES then, Is the brokerage account relationship with this high risk category person including politically 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)	<input type="checkbox"/> Yes <input type="checkbox"/> No	High risk (G3) High risk (G4)
15.	If client is Non-Resident or other then Karachi, Lahore or Islamabad:	<input type="checkbox"/> Verification by a reliable third party <input type="checkbox"/> Reference of an existing customer <input type="checkbox"/> Confirmation from other broker with whom customer had/has an account	
16.	Overall Risk Classification:	<input type="checkbox"/> Low risk (G1) <input type="checkbox"/> Medium risk (G2) <input type="checkbox"/> High risk (G3) <input type="checkbox"/> High risk (G4)	
17.	Account opening application status:	<input type="checkbox"/> Approved on the basis of G1, G2, G3 <input type="checkbox"/> Rejected on the basis of G4	
18.	If rejected then reason of rejection:		
19.	Completed by:	20. Checked by:	
	Name of Sales person / Agent: _____	Name of Compliance person: _____	
	Signature: _____	Signature: _____	
	Date: _____	Date: _____	

RISK DISCLOSURE DOCUMENT

(TO BE GIVEN BY THE BROKERS TO THEIR CUSTOMERS)

This Risk Disclosure document is prescribed by the Pakistan Stock Exchange Limited (PSX) under Clause 13(1) of the Securities Broker (Licensing and Operations) Regulations, 2016.

This document contains important information relating to various types of risks associated with trading and investment in financial products (equity securities, fixed income instruments, derivatives contracts etc.) being traded at PSX. The customers should carefully read this document before opening trading account with a broker.

In case a customer suffers negative consequences or losses as a result of trading/investment, he/she shall be solely responsible for the same and PSX or Securities and Exchange Commission of Pakistan (SECP) shall not be held responsible/liable, in any manner whatsoever, for such negative consequences of losses.

The customers must acknowledge and accept that there can be no guaranteed profit or guaranteed return on their invested capital and under no circumstances a broker can provide customers such guarantee or fixed return on their investment in view of the fact that the prices of securities and futures contract can fall as well as rise depending on the market conditions and performance of the companies. Customers must understand that past performance is not a guide to future performance of the securities, contracts or market as a whole. In case the customers have any doubt or are unclear as to the risks/information disclosed in this document, PSX strongly recommends that such customer should seek an independent legal or financial advice in advance.

PSX neither singly or jointly and expressly nor impliedly guarantee nor make any representation concerning the completeness, accuracy and adequacy of the information contained in this document as this document discloses the risks and other significant aspects of trading/investment at the minimum level. PSX does not provide or Purport to provide any advice and shall not be liable to any person who enters into a business relationship with a broker based on any information contained in this document. Any information contained in this document must not be construed as business/investment advice in any manner whatsoever.

THE CUSTOMERS MUST BE AWARE OF AND ACQUAINTED WITH THE FOLLOWING:

1. BASIC RISKS INVOLVED IN TRADING IN SECURITIES MARKET:

1.1 VOLATILITY RISK:

Volatility risk is the risk of changes in the value of financial product in any direction. High volatility generally means that the values of securities/contracts can undergo dramatic upswings and/or downswings during a short period. Such a high volatility can be expected relatively more in illiquid or less frequently traded securities/contracts than in liquid or more frequently traded one. Due to volatility, the order of a customer may not be executed or only partially executed due to rapid change in the market prices. Such volatility can also cause price uncertainty of the market orders as the price at which the order is executed can be substantially different from the last available market price or may change significantly thereafter, resulting in a real or notional loss.

1.2 LIQUIDITY RISK:

Liquidity refers to the ability of market participants to buy and/or sell securities expeditiously at a competitive price and with minimal price difference. Generally, it is assumed that more the numbers of orders available in a market, greater is the liquidity. Liquidity is important because with greater liquidity, it is easier for customers to buy and/or sell securities swiftly and with minimal price difference and as a result, customers are more likely to pay or receive a competitive price for their executed trades. Generally, lower liquidity can be expected in thinly traded instruments than in liquid or more frequently traded ones. As a result, order of customer may only be partially executed, or may be executed with relatively greater price difference or may not be executed at all. Under certain market conditions, it may be difficult or impossible for the customers to liquidate a position in the market at a reasonable price, when there are no outstanding orders either on the buy side or on the sell side, or if trading is halted in a security/contract due to any reason.

1.3 SPECULATIVE TRADING RISK:

Speculation involves trading of a security/contract with the expectation that it will become more valuable in a very near future. these transactions are attempted to make profit from fluctuations in the market value of securities, rather than fundamental value of a security and/or underlying attributes embodied in the securities such as dividends, bonus or any other factor(s) materially affecting the price.

Speculative trading results in an uncertain degree of gain or loss. Almost all investment activities involve speculative risks to some extent, as a customer has no idea whether an investment will be a blazing success or an utter failure.

Day trading strategy is a common example of speculative trading in which customers buy and sell the same security/derivative within the same day, such that all obligations are netted off and closed and no settlement obligations stand. The customer indulging in a day-trading strategy needs to be more vigilant and informed than the customers investing for a longer period, as market may not move during the day as the day-trader originally anticipated, resulting in a loss to them.

1.4 RISK OF WIDER SPREAD:

The Bid-Ask spread is the difference between the offer price and bid price of a security/contract quoted by the Market Makers or trading parties. The size of spread is affected by a number of factors such as liquidity, volatility, free float (the total number

Signatures:

Main Applicant

Joint Applicant

Participant

of shares outstanding that are readily available for trading) etc. Generally, low liquidity, high volatility and low free float levels of a security may result in relatively wider Bid-Ask Spread. The higher Bid-Ask spread can result in greater cost to customers.

1.5 RISK PERTAINING TO THE PRICE FLUCTUATIONS DUE TO CORPORATE ANNOUNCEMENT:

The corporate announcements by the issuers for the corporate actions or any other material information may affect the price of the securities. These announcements combined with relatively lower liquidity of the security may result in significant price volatility.

The customers, while making any investment decision in such securities/contracts, are advised to take into account such announcements. Moreover, the customers should be cautious and vigilant in case fake rumors are circulating in the market. The Customers are advised to refrain from acting purely based on such rumors rather take well informed investment decision in light of all facts and circumstances associated with such securities and their issuers.

1.6 RISK REDUCING ORDERS:

The customers can place orders for limiting the losses to certain amounts, such as Limit Orders, Stop Loss Orders, and Market Orders etc. Customers must ask their brokers for detailed understanding of these order types. Customers must acknowledge that placement of such orders for limiting losses to certain extent may not always be an effective tool due to rapid movements in the prices of securities and, as a result, such orders may not be executed.

1.7 SYSTEM RISK:

High volume trading will frequently occur at the market opening and before market close. Such high volumes may also occur at any point in the day causing delay in order execution or confirmation. During periods of volatility, on account of market participants continuously modifying their order quantity or prices or placing fresh orders, there may be delays in order execution and its confirmations.

1.8 SYSTEMIC RISK:

Systemic risk arises in exceptional circumstances and is the risk that the inability of one or more market participants to perform as expected will cause other participants to be unable to meet their obligations when due, thereby affecting the entire capital market.

1.9 SYSTEM AND NETWORKING RISK:

Trading on the PSX is done electronically, based on satellite/leased line based communications, combination of technologies and computer systems to place and route orders. All these facilities and systems are vulnerable to temporary disruption or failure, or any such other problem/glitch, which may lead to failure to establish access to the trading system/network. Such limitation may result in delay in processing or processing of buy or sell orders in part only or non-processing of orders at all. As with any financial transaction, the customer may experience losses if orders cannot be executed normally due to systems failures on the part of exchange or broker. The losses may be greater if the broker having customers' position does not have adequate back-up systems or procedures. Accordingly, the Customers are cautioned to note that although these problems may be temporary in nature, but when the customers have outstanding open positions or unexecuted orders, these limitations represent a risk because of obligations to settle all executed transactions.

1.10 RISK OF ONLINE SERVICES:

The customers who trade or intend to trade online should fully understand the potential risks associated with online trading. Online trading may not be completely secure and reliable and may cause delay in transmitting information, execution of instructions due to technological barriers. Moreover, the customer acknowledges and fully understands that he/she shall be solely responsible for any consequences arising from disclosure of the access codes and/or passwords to any third person or any unauthorized use of the access codes and/or passwords.

1.11 REGULATORY/LEGAL RISK:

Government policies, rules, regulations, and procedures governing trading on the exchange are updated from time to time. Such regulatory actions and changes in the legal/regulatory ecosystem including but not limited to changes in tax/levies may alter the potential profit of an investment. Some policies of the government may be focused more on some sectors than others thereby affecting the risk and return profile of the investment of the customers in those sectors.

2. RISKS IN DERIVATIVE AND LEVERAGE PRODUCTS:

Derivative and leveraged trades enable the customer to take larger exposure with smaller amount of investment as margin. Such trades carry high level of risk and the customers should carefully consider whether the trading in the derivative and leveraged products is suitable for them, as it may not be suitable for all customers. The higher the degree of leverage, the greater the possibility of profit or loss it can generate in comparison with the investment involving full amount. Therefore, the customers should trade in the derivative and leveraged products in light of their experiences, objectives, financial resources and other relevant circumstances.

Derivative product namely deliverable Futures Contract, Cash Settled Futures Contract, Stock Index Futures Contract and Index Options Contracts and leveraged products namely Margin Trading System, Margin Financing and Securities Lending and Borrowing are available for trading at stock exchange.

The customer transacting in the derivative and leveraged markets needs to carefully review the agreement provided by the brokers and also thoroughly read and understand the specifications, terms and conditions which may include markup rate, risk disclosures

Signatures:

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Joint Applicant

Participant

etc. There are a number of additional risks that all customers need to consider while entering into derivative and leveraged market transactions. These risks include the following:

- (a) Trading in the derivative and leveraged markets involves risk and may result in potentially unlimited losses that are greater than the amount deposited with the broker. As with any high risk financial product, the customer should not risk any funds that the customer cannot afford to lose, such as retirement savings, medical and other emergency funds, funds set aside for purposes such as education or home ownership, proceeds from student loans or mortgages, or funds required to meet living expenses.
- (b) All derivative and leveraged trading involves risk, and there is no trading strategy that can eliminate it. Strategies using combinations of positions, such as spreads, may be as risky as outright long or short positions. Trading in equity futures contracts requires knowledge of both the securities and the futures markets.
- (c) The customer needs to be cautious of claims of large profits from trading in such products. Although the high degree of leverage can result in large and immediate gains, it can also result in large and immediate losses.
- (d) Because of the leverage involved and the nature of equity futures contract transactions, customer may feel the effects of his/her losses immediately. The amount of initial margin is small relative to the value of the futures contract so that transactions are 'leveraged' or 'geared'. A relatively small market movement will have a proportionately larger impact on the funds the customer has deposited or will have to deposit. This may work against customer as well as for him/her. Customer may sustain a total loss of initial margin funds and any additional funds deposited with the broker to maintain his/her position. If the market moves against his/her position or margin levels are increased, customer may be called upon to pay substantial additional funds on short notice to maintain his/her position. If the customer fails to comply with a request/call for additional funds within the time specified, his/her position may be liquidated/squared-up at a loss, and customer will be liable for the loss, if any, in his/her account.
- (e) The customer may find it difficult or impossible to liquidate/square-up a position due to certain market conditions. Generally, the customer enters into an offsetting transaction in order to liquidate/square-up a position in a derivative or leverage contract or to limit the risk. If the customers cannot liquidate position, they may not be able to realize a gain in the value on position or prevent losses from increasing. This inability to liquidate could occur, for example, if trading is halted due to some emergency or unusual event in either the equity futures contract or the underlying security, no trading due to imposition of circuit breaker or system failure occurs on the part of exchange or at the broker carrying customers' position. Even if customers can liquidate position, they may be forced to do so at a price that involves a large loss.
- (f) Under certain market conditions, the prices of derivative contracts may not maintain their customary or anticipated relationships to the prices of the underlying security. These pricing disparities could occur, for example, when the market for the equity futures contract is illiquid, when the primary market for the underlying security is closed, or when the reporting of transactions in the underlying security has been delayed.
- (g) The customer may be required to settle certain futures contracts with physical delivery of the underlying security. If the customer hold position in a physically settled equity futures contract until the end of the last trading day prior to expiration, the customer shall be obligated to make or take delivery of the underlying securities, which could involve additional costs. The customer should carefully review the settlement and delivery conditions before entering into an equity futures contract.
- (h) Day trading strategies involving equity futures contracts and other products pose special risks. As with any financial product, customers who seek to purchase and sell the same equity futures in the course of a day to profit from intra-day price movements ("day traders") face a number of special risks, including substantial commissions, exposure to leverage, and competition with professional traders. The customer should thoroughly understand these risks and have appropriate experience before engaging in day trading. The customer should obtain a clear explanation of all commission, fees and other charges for which he/she will be liable. These charges will affect net profit (if any) or increase loss.

3. GENERAL:

3.1 ASSETS HELD WITH BROKERS:

The customer should familiarize him/herself with the measures available for protecting from the risk of misappropriation or misuse of cash and securities held with the brokers. For such purpose, he/she may opt for UIN Information System (UIS) provided by National Clearing Company of Pakistan Limited (NCCPL). The customer should also provide correct mobile number/email address in order to receive SMS/e-Alerts services being provided by the NCCPL and Central Depository Company of Pakistan Limited (CDC) on each trade and movement of their securities.

Moreover, the customers should be aware of the protections given to money and securities deposited with the brokers, particularly in the event of a default by such broker or the broker's insolvency or bankruptcy. The customer recognizes that in such default/insolvency/bankruptcy scenario, the customer may recover his/her money and/or property to such extent as may be governed by relevant PSX Regulations and/or local laws in force from time to time.

3.2 CUSTOMERS RIGHTS AND OBLIGATIONS:

The customer must understand their rights and obligations as well as the rights and obligations of the brokers specified under the PSX Regulations and the Standardized Account Opening Form, Know Your Client Form, Standardized Sub-Account Opening Form of CDC, and Agreement(s) of Leveraged Products (Margin Trading system, Margin Financing and Securities Lending and Borrowing), where applicable, and any other applicable Rules, Regulations, Guidelines, Circulars etc. as may be issued by SECP and PSX from time to time.

- (a) The customers should ensure that they deal through the registered branch and with the registered Agents/Traders/Representatives of the broker. The customer shall also verify such details from the website of PSX and Jamapunji (www.jamapunji.pk);
- (b) Customer at the time of establishing relationship with the brokers, should obtain a clear explanation of all brokerage, commission, fees and other charges for which customer will be liable to pay and these charges will affect net cash inflow or outflow;
- (c) It is obligatory for the brokers to issue contract note, in either electronic form or hard copy, by next working day of trading. The contract note shall contain all information relating to trade execution including commission and charges applicable on the customers. In case contract note is not issued, customer should inquire with broker immediately and in case the matter is not resolved, the same should be reported to the PSX;

Signatures:

Main Applicant

Joint Applicant

Participant



(d) The customers should match the information as per the contract notes with SMS/e-Alert received from CDC and/or NCCPL and may also verify from the UIS facility from the website of NCCPL.

UNDERTAKING

I, the customer, hereby acknowledge that I have received this Risk Disclosure Document and have read and understood the nature of all risks and other contents and information provided in this document.

Date: _____

Signature of Broker

Signature of Account Holder

Signature of Joint Account Holder

Signatures:

Main Applicant

Joint Applicant

Participant

The Manager
Foundation Securities (Pvt) Ltd

Sub: Authorization to Transfer shares from CDC Sub Account to CDC Investor Account.

I/we _____ applicant /equity account holder at Foundation Securities (Pvt) Ltd do hereby agree and authorize Foundation Securities (Pvt) Ltd to transfer shares lying in my CDC Sub Account with them to my/our CDC Investor account whenever they deem necessary.

My /our CDC Investor Account details are as under:

Title:

CDC Investor Account Number:

Signature _____

Name of Applicant / Account Holder

Signature _____

Name of Applicant / Account Holder

For EDGE Stock Trading

Commission Slab	Edge Value	Edge Prime
0.01 - 50	4 Paisa	6 Paisa
50.01 - 100	7 Paisa	10 Paisa
100.01 - 200	11 Paisa	16 Paisa
Above 200	21 Paisa	30 Paisa

Please (tick appropriate box)

EDGE Value

EDGE Prime

Signature of Account Holder _____

Signature of Joint Account Holder 1 _____

Signature of Joint Account Holder 2 _____

Signature of Joint Account Holder 3 _____

FOR INTERNAL USE OF FOUNDATION SECURITIES (PVT) LIMITED

Title of Account:	A/c No.:	Authorized Person:
Reference:	Commission Slab:	

DOCUMENTS CHECKLIST. [Please tick (✓) appropriate box]

<input type="checkbox"/> 1. Notarized copy (ies) of CNIC of Account holder(s), Nominee and Authorized Person.	<input type="checkbox"/> 3. A.O.F fully completed and signed. Stamped also where necessary.
<input type="checkbox"/> 2. Authority Letter/ Power of Attorney, where Required.	<input type="checkbox"/> 5. CZ-50 of Account Holder(s)
<input type="checkbox"/> 4. Attested Passport Copy (ies) where necessary.	<input type="checkbox"/> 7. List of authorized person(s), where required.
<input type="checkbox"/> 6. Certified Board Resolution, where required.	<input type="checkbox"/> 8. Attested Copies of Articles & Memorandum or Trust deed, where required.
<input type="checkbox"/> 9. CDC Account: <input type="checkbox"/> Sub A/c: <input type="checkbox"/> Investor A/c:	

MARGIN DETAILS AT THE TIME OF ACCOUNT OPENING

1. PKRS. _____ vide Cheque / P.O / DD / TT #: _____ dated: _____ (Please attach copy of instrument)

2. Detail of Shares to be transferred.

Stock	Quantity	Transferor
1.		
2.		
3.		
4.		
5.		

Remarks (if any):

Sales Person:	Head of Sales:	Head of Operations:
Signature:	Signature:	Signature:

Approved / Not Approved to be signed by C.E.O. / G.M. Equities.

Cheif Executive / G.M. Equities:

ACKNOWLEDGEMENT RECEIPT

Application No:	Date of receipt:
------------------------	-------------------------

I/We hereby confirm and acknowledge the receipt of duly filled and signed Sub-Account Opening Form from the following Applicant:

[Insert Name of Applicant(s)]	Participant's Seal & Signature:
1.	
2.	
3.	
4.	

A/c. I.D: _____

UIN #: _____

CDC Sub A/c #: _____



Foundation Securities (Private) Limited

Corporate Member: Karachi Stock Exchange Guarantee Limited
KSE Code # 142 S.E.C.P Broker Registration #: BRK -192

REGISTERED OFFICE

Ground Floor, Bahria Complex II, M.T. Khan Road, Karachi-74000, UAN: (92 21) 111 000 375
Fax: (92 21) 3561 2262 **Email: info@fs.com.pk URL: www.fs.com.pk**

Foundation Edge:

2nd Floor, Bahria Complex II,
M.T. Khan Road, Karachi-74000,
Toll Free: 0800 TRADE (0800 87233)
Fax: (92 21) 3561 5240
Email: info@fsedge.com
URL: www.fsedge.com

Karachi Stock Exchange Branch:

Room # 127, 3rd Floor,
Karachi Stock Exchange Bldg.,
Stock Exchange Road.
Tel: (92 21) 32462835-8
Fax: (92 21) 32462696

Gulshan-e-Iqbal Branch:

Mezzanine Floor, SB-08, Block 13-B,
K.D.A Scheem # 24 University Road,
Gulshan-e-Iqbal, Karachi.
Tel: (92-21) 34818141-46,48,49

Lahore Office:

11-F/1, Main Gulberg, Jail Road, Lahore.
Tel: (92 42) 35776821-29
Fax: (92 42) 35776830

Islamabad Office:

Office No. 1212, ISE Towers, Jinnah Avenue,
Islamabad. Tel: (92 51) 2895221-28
Fax: (92 51) 2895229