



Types of Account:

# ACCOUNT OPENING FORM

TREC Holder: 007
Dhaka Stock Exchange Limited
Full Service Depository Participant
(DP) of CDBL

Code No:											
BO ID No:	1	2	0	2	0	2	0	0			
Name:											
Contact No:											

Cash

Margin

Link

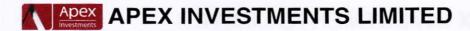
TREC Holder: 007, Dhaka Stock Exchange Limited

SEC Reg. No- 3.1/DSE/07/2008/251

Photograph of Principal Account Holder Photograph of Joint Account Holder

**CUSTOMER ACCOUNT INFORMATION FORM** Date Client Account No. BO ID NO. 2020200 Account Type: Cash Margin Link A/C NRB: Yes Status: Individual No Special Remarks, If any: Name of the Customer / Account Holder: Father's / Husband's Name: Mother's Name: Date of Birth ...... Sex: Male Female Nationality ...... Occupation ..... Present Address ..... Phone/Cell ...... Fax ..... E-mail. Permanent Address ..... Phone/Cell Fax E-mail Joint Account Holder's Name : Present Address Phone/Cell ..... E-mail ..... Permanent Address ..... Phone/Cell Fax E-mail Name and contact details of the Authorized Person (if any) of the Customer to deal with Apex Investments Limited (A passport size photograph of the Authorized Person is required to be attested by the Customer) Name of Authorized Person : Father's / Husband's Name: ..... Date of Birth ...... Sex: Male Female Nationality ..... Photograph of Authorized Person Permanent Address Phone/Cell Fax E-mail Whether the Customer or Joint Holder is an Officer or Director of any Stock Exchange/Listed Company? If Yes, Name & Address of the Stock Exchange/ Listed company ...... Name & Address of the Person Introducing the Customer ..... Special Instruction, If any: Date & Signature of Customer Date & Signature of Joint Account Holder Date & Signature of Authorized Person (if any) Signature of Trader / Reference By Date & Signature of Introducer Authorized Signatory Accepting the Account

CDBL Bye Laws Form 20



### BO Account Opening Form Bye Law 7.3.3 (b)

Please complete all details in CAPITAL letters. Please fill all names correctly. All communication shall be sent only to the First Named Account Holder's correspondence address.

Application No.	Date
Please Tick whichever is applicable	D D M M Y Y Y Y
BO Category: Regular Omnibus Clearing BO Type: Individual	Company Joint J
Name of CDBL Participant (Up to 99 Characters) APEX INVESTMENTS LIMITED	Date Account Opened
CDBL Participant ID BO ID	
2 0 2 0 0 1 2 0 2 0 2 0 0	D D M M Y Y Y Y
I/We request you to open a Depository Account in my/our name as per the following details:  1. First Applicant	
Name in Full of Account Holder (UP to 99 Characters)	
Name of Account Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms./ Dr. abbreviate only if over	er 30 characters)
(In case of a Company / Firm / Statutory Body / Name of Contact Person)	
In Case of Individual Male Female Occupation (30 characters)	
Father's /Husband's Name	
Mother's Name	
2. Contact Details:	
Address:	
City Post Code State/ Division Country	
Telephone	il
3. Passoprt / NID Details	
NID No.	
Passport No Issue Place Issue Date E	xpiry Date
4. Bank Details Bank Routing No.	
Bank Name	
Electronic Dividend Credit: Yes No Tax Exemption if any: Yes No TIN/	l Tax ID :
5. Other Informations	yout meets to have done and suggest the
Residency : Resident Non Resident Nationality Date of Birth	D D M M Y Y Y Y
	ecify)
Internal Ref. No (To be filled in by CDBL Participant)	
In Case of Company :  Registration No.  Date of Registration	D D M M Y Y Y Y
6. Joint Applicant (Second Account Holder)	
Name in Full (Up to 99 Characters)	
Name of Account Holder (Insert full name starting with Title i.e. Mr./Mrs./Ms./Dr, abbreviate Only if over 30 cha	aracters) Title i.e. Mr. /Mrs. /Ms. / Dr.

	DANGE OF STREET						
7. Account Link Reque		PERMIT CONTRACT	THE T				
-	te a link to your existing D		No				
f yes, then please provide the Depository BO Account Code (Last 8 Digits)							
08. Nominess / Heirs	Company to the a						
death of the sole account holders and	count holder/all the joint a the nominees giving nar	who will be entitled to receive sec ccount holders, a separate nomin mes of nominees, relationship wi ardian's name, address, relationsh	nation Form- 23 must be filled ut th first account holder, percenta	up and signed by all age distribution and			
09. Power of Attorney	(POA)						
		orney (POA) to someone to oper ne, contact detailed etc. of the PO					
10. To be filled in by the	ne Stock Broker/Stock Exc	hange in case the application is for	opening a Clearing Account				
Exchange Name D	SE Trading ID	CSE	Trading ID				
11. Photograph							
1st A Signa 12. Standing Instruction		Please paste recent passport size Photograph of 2nd Applicant or Authorized Signatory in case of Limited Co. Only  2nd Applicant or Authorized Signatory in case of Ltd. Co.	Please paste recent passport size Photograph of Authorized Signatory in case of Limited Co. Only  Authorized Signatory in case of Ltd. Co.				
me/us and I/We have for such accounts. I/V making such applicati	understood the same and Ve also declare that the p	d CDBL Participant Pertaining to a I I/We agree to abide by and to be articulars given by me/us are true at any false/misleading information d further action.	bound by the rules as are in for to the best of my/our knowled	rce from time to time ge as on the date of			
Applicants	Name of applicants/	Authorize signatories in case of Ltd	l. Co. Signature with o	date			
Frist Applicant							
Second Applicant	Smal in past protect						
3rd Signatory (Ltd. Co. only)							
14. Special Instruction	ns on operation of joint Acc	count					
Either or Survivo	or Any or	ne Can operate	Any two will operate joint	ly			
Account will be			any of the others.				
15. Introduction	a oa Tila						
	xisting account holder of A	PEX INVESTMENTS LIMITED					
10.000.1100.	, occupation and address of						
(Signat	ure of Introducer)	Account ID 1 2 0	2   0   2   0   0				

(Signature of Introducer)



#### **BO Account Nomination Form**

Please complete all details in CAPITAL letters. Please fill all names correctly. All communication shall be sent to the correspondence address of only the first Named Account Holder as specified in BO Account Opening Form-02.

Application No	ate D	D	м м	ΥΥ	YY	
Name of CDBL Participant (Up to 99 Characters) APEX INVESTMENTS LIMITED			DBL	Partici	pant I	ID
Accounts holder's BO ID 1 2 0 2 0 2 0 0						
lame of Account Holder (insert full name starting with Title i. e. Mr. / Mrs. / Ms. / Dr. abbreviate only if over 30 characters.	ers)					
We nominate the following person (s) who is/are entitled to receive securties outstanding in my/our account ole holders.	in the	e eve	nt of t	he de	ath of	f the
1. Nominee/Heirs Details						
Nominee 1						
Name in full:			*******			
Name of Nominee (Insert full name starting with Title i. e. Mr./Mrs./Ms./Dr. abbreviate only if over 30 chara	acters'	)	Title	i. e. Mr	/Mrs./	/Ms
Traine of Norminee (insert fail failte starting with ride i. c. Mis/Mis/Mis/Mis/Di. abbieviate only in over do chare	101010)			. 0. 1411	1	
Relationship with A/C HolderPercentage (%)						
Address:						
CityPost CodeState/DivisionCountry	Tele	epho	ne			
Passport No	Expiry	Date				
Residenty: Resident Non Resident Nationality						
NID No.	D	M	VI	YY	Y	Y
Guardian's Details (if Nominee is a Minor)						
Name is Full :						
Short Name of Guardian (Insert full name starting with Title i. e. Mr./Mrs./Dr. abbreviate only if over 30 chara	acters	5)				
Relationship with Nominee	of Min	or				
(DDMMYYYY)				YMMC		
Address:						
City						
Passport No						
Residenty: Resident Non Resident Nationality	[ ]					
NID No.	D	М	M	YY	Υ	Υ

Nominee 2																		
Name in full:																		
Short Name of Nominee (Ir	sert full n	ame star	ting with	Title i.	e. Mr.	/Mrs./N	/Is./D	r. abbr	eviate	only	if over 30	0 char	acter	s)	T	itle i. e	e. Mr.	/Mrs./
Relationship with A/C Holde	er							Pe	ercen	age (	%)							
Address:																		
CityPost																		
Passport No									1150									
Residenty: Resident		esident									of Birth							
Donadiania Dataila /if Nama		Ai										D	D	М	М	Y	Υ	Υ
Guardian's Details (if Nom	nee is a r	viinor)																
lame is Full :																		
hort Name of Guardian (Ir	nsert full n	ame star	ting with	Title i.	e. Mr	./Mrs./N	Ms./D	r. abbr	eviate	only	if over 3	0 chai	racte	rs)				
elationship with Nominee			Da	te of Bi	rth of	Minor					Maturity	Date	of Mi	nor .				
								DDMM			,					(DDN		
ddress:																		
ityPost (																		
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			05000000000		0.00	NAME OF TAXABLE PARTY.	PROFESSION		WO THE		Mine bill	- 2/2/1		NEW Y	Name of Street		1201	
Guardian's Details (if Nom	inee is a l	Minor)																
												1 [						
10000																		
Please paste recent passport				e paste passpor	t					paste asspor	t					e past		
size Photograph			size Ph	otograp	h					tograp				siz	e Ph	otogra	iph	
					-										_		-	
Nominee/Heir	1	¥	Nomine		me				Gua	ırdian		Signa	ture		G	uardi	an 2	
Nominee/Heir 1				Iva	ine							Sigila	luie					
Guardian 1																		
Iominee/Heir 2	11.	nd i Wii	ja 1 "A	inl									1, 1		П			
Guardian 2		(d	2716	1111									11		,			
First Account Holder						iv II			T.									
Second Account Holder				111111				-1-1-1		7011-				- 2 - 3				

# Central Depository Bangladesh Limited (CDBL) Depository Account (BO Account) Opened with CDBL Participant



### APEX INVESTMENTS LIMITED

Terms & Conditions- Bye Laws 7.3.3 (c)

CDBL Participant, Dhaka / Chittagong / Sylhet, Bangladesh

Dear Sir,

Please open a Depository account (BO Account) in my/our/company names(s) on the terms and conditions set out below. In consideration of **APEX INVESTMENTS LIMITED** (the "CDBL Participant") opening the account providing depository account facilities to me/us, I/We/company have signed the Bo Account Opening Form as acceptance of the terms and conditions set out below.

- 1. I/We/Company agree to be bound by The Depositories Act, 1999, Depositories Regulations, 2000, The Depository (User) Regulations 2003, and abide by the Bye Laws and Operating Instructions issued from time to time by CDBL.
- CDBL shall allocate a unique identification number to me/us (Account Holder BO ID) for the CDBL Participant to maintain a
  separate Account for me/us, unless I/We instructs the CDBL Participant to keep the securities in an Omnibus Account of the CDBL
  Participant. The CDBL Participant shall however ensure that my/our securities shall not be mixed with the CDBL Participant's own
  securities.
- 3. I/We/Company agree to pay such fees, charges Company's and deposits to the CDBL Participant, as may be mutually agreed upon, for the purpose of opening and maintaining my/our account, for carrying out the instructions and for rendering such other services as are incidental or consequential to my/our Company's holding securities in and transacting through the said depository account with the CDBL Participant.
- 4. I/We/Company shall be responsible for :
  - (a) The veracity of all statements and particulars set out in the account opening form, supporting or accompanying documents;
  - (b) The authenticity and genuineness of all certificates and/or documents submitted to the CDBL Participant along with or in support of the account opening form or subsequently for dematerialization;
  - (c) Title to the securities submitted to the CDBL Participant from time to time for dematerialization;
  - (d) Ensuring at all times that the securities to the credit of my/our account are sufficient to meet the instructions issued to the CDBL Participant for effecting any transaction / transfer;
  - (e) Informing the CDBL Participant at the earliest of any changes in my/our account particulars such as address, bank details, status, authorizations, mandates, nomination, signature, etc.;
  - (f) Furnishing accurate identification details whilst subscribing to any issue of securities.
- 5. I/We/Company shall notify the CDBL Participant of any change in the particulars set out in the application form submitted to the CDBL Participant at the time of opening the account or furnished to the CDBL Participant from time to time at the earliest. The CDBL Participant shall not be liable or responsible for any loss that may be caused to me/us by reason of my/our failure to intimate such change to the CDBL Participant at the earliest.
- 6. Where I/we/Company have executed a BO Account Nomination Form
  - (a) In the event of my/our death, the nominee shall receive/draw the securities held in my/our account.
  - (b) In the event, the nominee so authorized remains a minor at the time of my/our death, the legal guardian is authorized to receive/draw the securities held in my/our account.
  - (c) The nominee so authorized, shall be entitled to all my/our account to the exclusion of all other persons i.e., my/our heirs, executors and administrators and all other persons claiming through or under me/us and delivery of securities to the nominee in pursuance of this authority shall be binding on all other persons.

- 7. I/we/company may at any time call upon the CDBL Participant to close my/our account with the CDBL Participant provided no instructions remain pending or unexecuted and no fees or charges remain payable by me/us to the CDBL Participant. In such event I/we may close my/our account by executing the Account by executing the Account Closing Form if no balances are standing to my/our credit in the account. In case any balances of securities exist in the account the account may be closed by me/us in one of the following ways:
  - (a) By rematerialization of all existing balances in my/our account;
  - (b) By transfer of all existing balances in my/our account to one or more of my/our other account(s) held with any other CDBL Participant(s);
  - (c) By rematerialization of a part of the existing balances in my/our account and by transferring the rest to one or more of my/our other account(s) with any other CDBL Participant(s);

#### 8. CDBL Participant Covenants that it shall

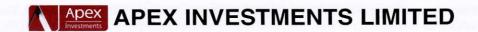
- (a) Act only on the instructions or mandate of the Account Holder or that of such person(s) as may have been duly authorized by the Account Holder in that behalf.
- (b) Not effect any debit or credit to and from the account of the Account Holder without appropriate instructions from the Account Holder.
- (c) Maintain adequate audit trail of the instructions of the Account Holder.
- (d) Not honour or act upon any instructions for effecting any debit to the account of the Account Holder in respect of any securities unless:
  - (i) Such instructions are issued by the Account Holder under his signature or that of his/its constituted attorney duly authorized in that behalf;
  - (ii) The CDBL Participant is satisfied that the signature of the Account Holder under which instructions are issued matches with the specimen of the Account Holder or his / its constituted attorney available on the records of the CDBL Participant;
  - (iii) The balance of clear securities available in the Account Holder's account are sufficient to honour the Account Holder's instructions.
- (e) Furnish to the Account Holder a statement of account at the end of every month if there has been even a single entry or transaction during that month, and in any event once at the end of each financial year. The CDBL Participant shall furnish such statements at such shorter periods as may be required by the Account Holder on payment of such charges by the Account Holder as may be specified by the CDBL Participant. The Account Holder shall scrutinize every statement of account received from the CDBL Participant for the accuracy and veracity thereof and shall promptly bring to the notice of the CDBL Participant any mistakes, inaccuracies or discrepancies in such statement.
- (f) Promptly attend to all grievances / complaints of the Account Holder and shall resolve all such grievances / complaints as it relate to matters exclusively within the domain of the CDBL Participant within one month of the same being brought to the notice of the CDBL Participant and shall forthwith for ward to and follow up with CDBL all other grievances / complaints of the Account Holder on the same being brought to the notice of the CDBL Participant and shall endeavour to resolve the same at the earliest.
- 9. The CDBL Participant shall be entitled to terminate the account relationship in the event of the Account Holder:
  - (a) Failing to pay the fees or charges as may be mutually agreed upon within a period of one month from the date of demand made in that behalf:
  - (b) Submitting for dematerialization any certificates or other documents of title which are forged, fabricated, counterfeit or stolen or have been obtained by forgery or the transfer whereof is restrained or prohibited by any direction, order or decree of any court or the Securities and Exchange Commission:
  - (c) Commits or participates in any fraud or other act of moral turpitude in his / its dealings with the CDBL Participant;
  - (d) Otherwise misconduct himself in any manner.

#### 10. Declaration and Signature

I/we hereby acknowledge that I/we have read and understood the aforesaid terms and conditions for operating Depository Account (BO Account) with CDBL Participant and agree to comply with them.

Applicants	Name of applicants / Authorized signatories in case of Itd Co.	Signature
First Applicant		
Second Applicant		
3rd Signatory (Ltd Co. only)		

**CDBL Bye Laws** 



### **Power of Attorney (POA) Form**

Please complete all details in CAPITAL letters. Please fill all names correctly. All communication shall be sent to the correspondence address of only the first Named Account Holder as specified in BO Account Opening Form-02.

pplication No			Date D D M M Y Y Y Y
Name of CDBL Participant (Up to 99 Cha	racters)		CDBL Participant ID  2 0 2 0 0
	0 2 0 0		
Name of Account Holder (insert full name	starting with Title i. e. Mr. / Mrs. / Ms	. / Dr. abbreviate only if over	30 characters)
Power of Attorney Holder's Details			
Name is Full :			
Name of Account Holder (insert full name s	starting with Title i. e. Mr. / Mrs. / Ms. /	Dr. abbreviate only if over 30	characters) Title i. e. Mr./Mrs
Power of Attorney Holder's Contact De	tails		
CityPost Code  Mobile Phone  Power of Attorney Holder's Passport D	Fax		
Passport No	Issue Place	.Issue Date	Expiry Date
Others Information of Power Attorney I	Holder		
Residenty: Resident Non Resident	lent Nationality	Date of Birth	D D M M Y Y Y Y
Power of Attorney Effective Form	D D MM Y Y Y Y	To D D M M	YYYY
Remarks (insert reference to POA docur	nent i. e. Specific POA or General P	OA etc.) :	

hotograph of Power of Attorney Holder	
	Please paste recent passport size Photograph
on testeral quantity	

#### **DECLARATION**

The rules and regulations of the Depository and CDBL Participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/We have also declare that the particulars given by me/us are true to the best of my/our knowledge as on the date of making such application. I/We further agree that any false/misleading information given by me/us or suppression of any material fact will render my/our account liable for termination and further action.

(POA Holder)

Applicants	Name	Signature
POA Holder		
Account Holder 1st Applicant		
Account Holder 2nd Applicant	12 manually from your engineers at 12 the re-	

### **Apex Investments Limited**

# KYC Profile Form (Applicable for BO Account)

(To be completed by the Account Opening Officer/Relationship Manager)

1. Customer / Account Name:		
2. Type of Account:		
4. Name of Account Opening Officer	/ Relationship Manager:	
5. What is the source of Fund? How	the source of fund has been verified (whe	ere applicable)?
6. Information regarding Beneficial shareholder(s) and the shareholder(s)	Owner of the account (In case of of holding 20% or more shares)	company, information regarding controlling
7. Passport No	Whether photocopy obtained	l? (Where applicable)? Yes No
8. National ID No	Whether photocopy obtained?	(Where applicable)? Yes No
9. T.I. N No	Whether photocopy obtained	? (Where applicable)? Yes No
10. VAT Reg. No/Trade License No	Whether photocopy obtained?	(Where applicable)? Yes No
11. Employees ID Card/Diving License	NoWhether photocopy obtained?	? (Where applicable)? Yes No
12. What does the customer do?		with the second public second party and a second
Mention the occupation of the client i	n detail:	
13. Risk Grading:		
Category:	Risk Level:	Grade:
*Risk grading list provided to each brar	nch.	
Comments (if any):		
(*comments may be made in this part regarding	risk of the customer in consideration of subjective ju	udgment)
	osal Persons (PEPs):	
	nior management? ):	
	,	
Prepared By:	Verified by:	Approved By:
Signature (with seal)	Signature (with Seal)	Signature (with Seal)

# **OUR VALUE ADDED SERVICES**

Apex Investments Limited is committed for the following Value Added Services to the customer. Please specify which service you need (put a tick mark on the box):

01. ApexMobi ( Free Software for Android mobile)									
	Yes		No						
02. Internet Trading (Service Charge Free)									
	Yes		No						
03. i-Reports (Service Charge Free)									
	Yes		No						
04. E-mai	04. E-mail Service (Service Charge Free)								
	Yes		No						
05. SMS	service (Cond	lition App	elied*)						
	Yes		No						
* We will deduct a nominal of Tk.10 quarterly from your account as SMS charge.									
Client Sig	nature	i i							
Client Nar	ne:								
Client Cod	de:								

### **Documents Required for Account Opening**

### Single / Joint Account

- 1. 2 Copies Passport Size Photograph of each applicant attested by the introducer
- 2. One Copy Photograph of each nominee attested by the applicant
- 3. Two copies photograph of the operator attested by the applicant
- 4. National ID/ Passport (1st 8 pages )/ Driving license
- 5. Bank statement / Bank certificate/Cheque leaf.
- 6. E-Tin Certificate (If Available)

### **Limited Company**

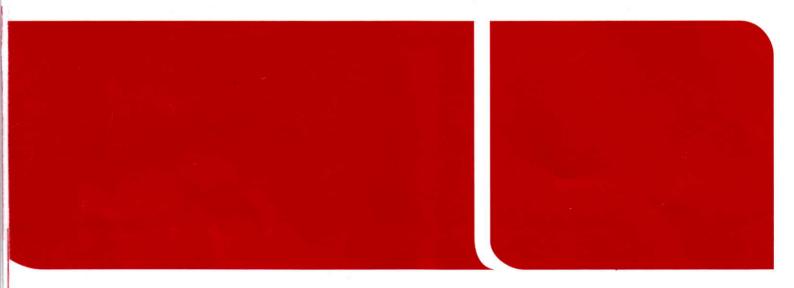
- 1. Memorandum/ Article of Association
- 2. Certificate copy of from-X11 from RJSC
- 3. Board Resolution regarding opening the account
- 4. Bank Statement/ Bank Certificate
- 5. Photograph of the applicants
- 6. Commence of business (public limited Company).
- 7. Copy of TIN/ Trade license
- 8. Company Seal

### Proprietorship

- 1. Photograph of the applicants
- 2. Copy of TIN/ Trade license/ VAT/TAX
- 3. Bank Statement/ Bank Certificate

#### NRB

- 1. 2 Copies Passport Size Photograph of each applicant attested by the introducer
- 2. One Copy Photograph of each nominee attested by the applicant
- 3. Two copies photograph of the operator attested by the applicant
- 4. Bank Statement of FC/ NITA A/C
- 5. Photocopy of Valid Visa/ Work Permit/ Citizenship Card





# Apex Investments Limited

House # 06 (4th Floor), Road # 137, Block # SE(D), Gulshan-1, Dhaka-1212 Phone:+88 02 989 7106, Fax No.+88 02 989 7398, E-mail: info@ail-bd.com Web: www.ail-bd.com