



**Prime Bank Securities Ltd.**

we make your money work harder

(A subsidiary of Prime Bank)

Corporate TREC Holder of DSE & CSE

# ACCOUNT OPENING FORM

Account Name

Customer Account No.

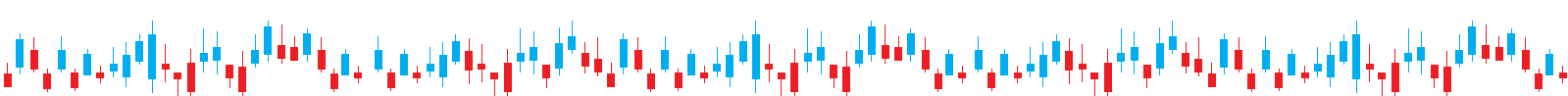
BO ID No.

Address

Phone No.

Mobile No.

Email ID





# Prime Bank Securities Ltd.

A subsidiary of Prime Bank Limited

Head Office: Peoples Insurance Bhaban (11<sup>th</sup> Floor), 36 Dilkusha, Dhaka, Bangladesh  
DSE TREC No. 219 & CSE TREC No. 141

DSE REG No. REG-3.1/DSE-219/2010/429, CSE REG No. REG-3.2/CSE-141/2010/239

“শেয়ার বাজারে বিনিয়োগ ঝুঁকিপূর্ণ,  
জেনে ও বুঝে বিনিয়োগ করুন।”

Photograph(s)  
of Customer(s)  
with attestation  
of the Introducer

Photograph(s)  
of Customer(s)  
with attestation  
of the Introducer

## CUSTOMER ACCOUNT OPENING FORM

Customer Account No. (Filled by the PBSL)

Date

BO ID No

Account Type: Cash ☐ Margin ☐

Account Status: Individual ☐ Joint ☐ NRB ☐ Company/Institutions ☐ Others ☐

**Name of the Account Holder**.....

Father's Name.....

Mother's Name .....

Spouse Name.....

Date of Birth .....Sex: Male ☐ Female ☐ Occupation .....Nationality .....

In case of Non-Individual, Registration Date:  Registration No. ....  
(Supporting Documents enclosed)

Present Address.....

Phone .....Mobile..... Fax.....

Email .....

Permanent Address.....

National ID No .....TIN No.....

Passport No..... Issue Date..... Expiry Date.....

**Joint Account Holder's Name (if any)**.....

Father's Name.....

Mother's Name .....

Spouse Name.....

Date of Birth .....Sex: Male ☐ Female ☐ Occupation .....Nationality .....

Present Address.....

Phone .....Mobile..... Fax.....

Email .....

Permanent Address.....

National ID No .....TIN No.....

Passport No..... Issue Date..... Expiry Date.....

**Bank Account Details**

Bank Name		Account Number	
Branch Name		Routing Number	

**Details of Nominee-1 (if any)**

Name				Photograph(s) of Nominee(s) with attestation of the Customer(s)
Address				
Date of Birth		National ID		
Relationship with 1 <sup>st</sup> Account Holder		Percentage (%) of Nomination		

**Details of Nominee-2 (if any)**

Name				Photograph(s) of Nominee(s) with attestation of the Customer(s)
Address				
Date of Birth		National ID		
Relationship with 1 <sup>st</sup> Account Holder		Percentage (%) of Nomination		

**\*\*If the Account holder(s) wish to nominate more than 2 (two) persons, please insert additional copies as required.**

**Authorized Person Details (If any)**

Name							
Father's/ Husband's Name					Date of Birth		
National ID/Birth Certificate/Passport No				Sex	Male	Female	Others
Address							
Phone		Mobile		Email			

Officer or Director of any Stock Broker/Dealer/Stock Exchange/Listed Company? Yes ☐ No ☐

If yes, please mention name & address of the Broker/Dealer/Exchange/Listed Company with designation of the said officer or director: .....

..... Source of Fund details.....

**Introducer Details:**

Name					
Account No		Mobile		Signature	

\_\_\_\_\_  
Signature of the Account Holder with date

\_\_\_\_\_  
Signature of the 2nd Account Holder (If any) with date

\_\_\_\_\_  
Signature of the Authorized Person (if any) with date

\_\_\_\_\_  
Authorized Signature of the PBSL with date & seal

\_\_\_\_\_  
Authorized Signature of the PBSL with date & seal

\_\_\_\_\_  
Authorized Signature of the PBSL with date & seal

## KYC Profile Form

(Filled by the Stock Broker)

Name of the Account Holder(s).....

BO Account Number.....

Customer Account Number.....

Occupation (with Joint Account Holder's, if any): .....

Name of MD/CEO (in case of Firm or Company): .....

Nature of Business (in case of Firm or Company):.....

Source of Fund.....

Describe, how source of fund was verified; details and nature of business:.....

Detailed Information/Documents of the Account Holder(s):.....

Sl.	Nature of Documents	Number	Photocopy Obtained		Applicable for
			Yes	No	
1	National ID				Individual (if any)
2	Passport				Individual (if any) or NRB
3	Visa/Residential Permit and Work Permit				NRB
4	Birth Certificate				Individual (if any)
5	Driving License				Individual (if any)
6	Bank Account with supporting document				Individual or NRB
7	NID/Birth Certificate/ Passport				Nominee
8	NID/Birth Certificate/ Passport				Authorized Person
9	Registration Certificate				Firm/Company/Institution
10	Date of Incorporation				Firm/Company/Institution
11	Memorandum of Association				Company/Institution
12	Articles of Association				Company/Institution
13	Trade License				Firm/Company/Institution
14	TIN				Firm/Company/Institution
15	VAT Registration				Firm/Company/Institution
16	Particular of Directors				Company or Institution

Comments (if any): .....

\_\_\_\_\_  
 Signature of Account Opening  
 Officer with date & Seal

\_\_\_\_\_  
 Signature of Authorized Officer/  
 MD/CEO with date & Seal

When was the information related to the Account last reviewed and updated? If any, details with comments:

.....

\_\_\_\_\_  
 Signature of the Officer performing review  
 and update with date & Seal

## TERMS AND CONDITIONS FOR OPENING A BROKERAGE ACCOUNT

### DECLARATION

I/We the undersigned whose information is given in the Brokerage Application Form hereby request to be registered as client of PBSL and intend to open a brokerage account in my/our/company name. I/We further agree and confirm that the account hereby requested to be opened by me/us shall be held and be governed by the terms and conditions of this agreement as provide hereinafter and as may be modified from time to time by PBSL.

### TERMS AND CONDITIONS

**Instructions:** A written instruction shall be given to PBSL from time to time to purchase and/or sell instruments (which shall mean and include stocks, share, debentures, mutual funds and private placement or any other similar financial instrument as may be made available from time to time) on behalf of the account holder. On receipt of such instructions along with a cash deposit or delivery of instruments, PBSL shall, so far considers it reasonably practicable, purchase and/or sell instruments in accordance with those instruction provided always that (i) any such dealings to do not contravene any applicable laws or regulations; (ii) PBSL shall have an absolute discretion to accept or reject purchase/sell instructions and (iii) accounts holder's instruction shall include the following details:

- The name of the Securities
- Quantity
- Price with notification of limits or discretion
- The duration of the order
- The nature of the lot (i.e. scrip size) for sale or the desired format for purchase order (See Note)
- The order should specify completion formats of:
  - All or partial fill with minimum trade value or number of shares
  - Mode of execution i.e. DVP (Delivery versus payment)/Non DVP (non delivery versus payment)

**(Note:** The number of shares constituting a "market lot" may change. Sellers must include the exact format of their holdings. This has a direct impact on market pricing given the predominantly retail nature of the market. Trades may fail where non-agreed lot sizes are delivered.)

**Joint account:** if this is a joint account, unless the account holders notify PBSL otherwise and provide such documentation as PBSL may require, the brokerage account(s) shall be held by the account holder jointly with rights or survivorship (payable to either or the survivor). Under these terms and conditions each joint account holder irrevocably appoints other as attorney in fact to take all action on his or her behalf and to represent him or her in all respects in connection with this agreement. PBSL shall be fully protected in acting but shall not be required to act upon the instruction of either of the account holder, who shall be liable, jointly or severally, for any amounts due to PBSL pursuant to this agreement, whether incurred by either or both of the account holders.

**Risk:** the accountholder understand(s) that the stock market is rapidly changing market and that there is an Inherent risk in incurring loss in share dealings.

**Limit Orders:** While PBSL will endeavor to purchase or sell the Investment within the limits of prices that may be notified by the account holder; PBSL does not guarantee or assure that the transactions will be materialized with on such notified limits. PBSL will always endeavor to obtain the best price.

**Dhaka & Chittagong Stock Exchange Rules:** All transactions duly concluded through and recognized by Dhaka Stock Exchange Limited and Chittagong Stock Exchange Ltd. (hereafter DSE & CSE) are governed by the respective rules of DSE & CSE relating to trading and settlement in particular and will be binding on both the parties concerned.

**Payment and Disclosure:** PBSL shall not be obliged to make any payment on behalf of the account holders, PBSL may disclose information regarding the account holder or his/her dealings in relation to this agreement to any department of the government or public body upon request, whether or not such request is in fact legally enforceable, and PBSL will not be liable in any way to account holder for so doing.

**Cancellation Provisions:** PBSL is authorized, in its discretion, should the undersigned die or should PBSL for any reason whatsoever deems it necessary for its protection, without notice, to cancel and outstanding orders, in order to close out the accounts of the account holder, in whole or in part, or to close out any commitment made on behalf of the account holder.

**Indemnity:** In the event of s default, omission or act committed by PBSL as Broker/TREC Holder of the DSE & CSE, the account holder shall be indemnified if and only as provided by the Rules and Regulations of the DSE & CSE.

**Confirmation and Settlements:** PBSL shall use its best endeavors to provide the account holder with (a) written confirmation of each transaction it has effected in instruction; and (b) contract notes ( in such form as PBSL shall determine) setting forth (i) details of the trade date, value date, settlement date, quantity, price and commission rate that the account holder does hereby agree and undertake to confirm in writing beforehand of all our instructions.

**Fees and Expenses:** The account holder will pay a brokerage commission of \_\_\_\_\_% (in word \_\_\_\_\_), and any other related expenses and charges that may from time to time be applicable. Every transaction concluded through and recognized by the DSE or CSE is subject to transaction levies or other fees imposed by DSE, CSE & CDBL. The account holder understands that the rate of commission may be changed from time to time.

**Set-off:** PBSL shall be entitled to, in respect of all commissions, costs, charges or expenses, set off from any money from time to time held by PBSL for the account holder and if such money is insufficient for the purpose, to sell any instruments held by PBSL or any of its agents on behalf of the Account Holder.

**Termination:** This agreement will stand terminated: 7 days prior, written instruction of the Account Holder to the PBSL for termination this agreement or on the written instruction of the PBSL to the Account Holder for termination of this Agreement. Termination shall not absolve the parties from completing account and adjusting any outstanding dues.

**Assignment:** The benefit and Burden of this Agreement is capable of assignment by both the account holder and PBSL without the consent of the other but the notice of assignment must be given to the other in writing.

**Force Majeur:** PBSL shall not be liable for any losses, damages, expenses, costs or otherwise resulting directly or indirectly from any Government restriction, exchange ruling, suspension of trading, war, strike, national disaster or any other event or circumstance beyond its control.

**Forged Shares:** PBSL shall not be liable or responsible for any shares that are found to be forged. However, PBSL will make every attempt to replace the forged shares from the seller.

**Law:** The terms and conditions contained herein shall be governed by and construed in accordance with the laws of Bangladesh.

**Notices:**

- (a) All notice, instructions or other communications shall be given in English and in writing or orally (facsimile, sms, Email, Telex, cable or letter) and shall be sent to PBSL and the accountholder at the address, fax and/or telex number shown herein or at such other address as may be communicated by the parties hereto in writing;
- (b) Proof of delivery or dispatch shall be:
  - (i) In case of a letter: dispatch of the letter duly stamped and addressed;
  - (ii) In case of facsimile, telex, telegram or Email on the day of dispatch;
- (c) All oral notices, instructions or other communications should be confirmed in writing.

**Definitions:** Words defined herein save where a contrary meaning appears of such meaning is inconsistent with the context shall have this same defined meaning wherever used.

**Sums due:** For all purpose, including any legal proceedings, a certificated by any of PBSL officers confirming the money and/or liabilities for the time being due and/or incurred to by the account holder shall be conclusive evidence thereof against him/her.

**Disputes and Resolution of Dispute:** In case of any dispute arising between the PBSL and the account holder in connection with the interpretation or enforcement of the terms and conditions contained herein attempts should be made to settle the matter amicably, in case of failure to settle the matter amicably, the same shall referred to arbitration of two arbitrators, each to be nominated by the parties who shall also appoint an Umpire. The decision of the arbitrators, so nominate, shall be binding on both the parties. In case the Arbitrators differ in their finding, the decision of the Umpire shall be final binding on the parties. The Arbitration shall be conducted in accordance with the Arbitration Act, 2001.

I/We have read the terms & conditions contained herein above & having agreed with such terms & conditions I/We put my/our/company seal & signature on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of the First Applicant

\_\_\_\_\_  
Signature of the Second Applicant

**FOR OFFICE USE ONLY:**

**Checked by :** .....

**Approved by :** .....

**Name :** .....

**Name :** .....

Managing Director & CEO  
**Prime Bank Securities Ltd.**  
Peoples Insurance Bhaban (11<sup>th</sup> Floor)  
36 Dilkusha, Dhaka, Bangladesh

Photograph of  
authorized Person  
attestation of the  
Customer(s)

Dear Sir,  
Letter of Authorization

I/We ..... Son/Daughter of .....  
of ..... hereby authorize  
Mr./Mrs. .... Son/Daughter of .....  
of ..... whose specimen  
signature is given below (hereinafter referred to as the "Account Operator") to exclusively deal, buy, sell, transfer shares,  
debenture stocks, bonds and other securities on behalf of me with regard to the "Securities Account" opened and  
maintained in my name with M/s Prime Bank Securities Limited submitted (hereinafter referred to as the "Broker").

I/We hereby authorize and instruct the "Broker" to deal, buy, sell, transfer shares, stocks, debentures, debenture stocks,  
bonds & other securities and fund withdrawal on verbal and/or written instructions of the "Account Operator".

I/We also authorize the "Account Operator" to place buy/sell orders, receive confirmation notes, receive and deliver  
cheques or shares other securities on my/our behalf with regard to my/our Account.

I/We hereby declare that I/We are fully aware of all consequences of transaction that may be carried out on my/our behalf  
by the "Account Operator" and shall take responsibility for all such transaction as that of my/our own. I/We shall fulfill and  
abide by all rules and regulation described in the "Account Opening Form" duly completed and signed by me/us, with  
regard to all transaction carried out by the "Account Operator" without any demure or protest.

I/We hereby undertake and ensure to make good and compensate for any loss or damage incurred or sustained by the  
"Broker" for any reason what so ever as a result of any transaction carried out by the "Account Operator".

Thank You:  
Yours Sincerely,

(Signature of Account Operator)

Attested by Account Holder(s)

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Signature of the 1st Account Holder

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Signature of the Joint Account Holder

Father's/Husband Name:..... Mothers Name:.....



**7. Account Link Request**

Would you like to create a link to your existing depository Account? Yes ☐ No ☐

If yes, then please provide the Depository BO Account Code (8 Digits):

**8. Nominee/Heirs**

If Account holder(s) wish to nominate person(s) who will be entitled to receive securities outstanding in the account in the event of the death of the sole account holder/all the joint account holders, a separate nomination Form-23 must be filled up and signed by all account holders and the nominees giving names of nominees, relationship with first account holder, percentage distribution and contact details. If any nominees are a minor, guardian's name, address, relationship with nominee has also to be provided.

**9. Power of Attorney (POA)**

If account holder(s) wish to give a Power of Attorney (POA) to someone to operate the account, a separate Form-20 must be filled up and signed by all account holders giving the name, contact details etc. of the POA holder and a POA document lodged with the form.

**10. To be filled in by the stock Broker/Stock Exchange in case the application is for opening a clearing**

Exchange Name DSE ☐ Trading ID:..... CSE ☐ Trading ID:.....

**11. Photographs**

1st Applicant or Authorized signatory in case of Non-individual	2nd Applicant or Authorized signatory in case of Non-individual	Authorized signatory in case of Non-individual	Authorized signatory in case of Non-individual
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**12. Standing Instructions**

I/we Authorize you to receive facsimile (fax) transfer instructions for delivery. Yes ☐ No ☐

**13. 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 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.

Applicants	Name of the Applicants/Authorized Signatories in case of Limited Co.	Signature with date
First Applicant		
Second Applicant		
Third Applicant (Non-Individual Only)		

**14. Special Instructions on operation of Joint Account**

- ☐ Either or Survivor.
 ☐ Any one can operate
 ☐ Any two will operate jointly
 ☐ Account will be operated by:.....With any one of others.

**15. Introduction**

Introduction by an existing account Holder of _____	
Depository Participant's Name	
I confirm the identity, occupation and address of the applicant(s) _____	
Account Holder's name	
BO ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Signature of Introducer _____	Customer Account Number of Introducer <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## BO Account Nomination Form

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

Application No:\_\_\_\_\_

Date: 

d	d	m	m	y	y	y	y
---	---	---	---	---	---	---	---

Name of CDBL Participant (Up to 99 characters) **Prime Bank Securities Limited**

CDBL Participant ID 50800

Account holder's BO ID	1	2	0	5	0	8	0	0						
------------------------	---	---	---	---	---	---	---	---	--	--	--	--	--	--

Name of Account Holder (Insert full name starting with Title i.e. Mr/Ms / Dr, Abbreviate only if over 30 characters)

Title i.e Mr./Mrs.

I/We nominate the following person(s) who is/are entitled to receive securities outstanding in my/our account in the event of the death of the sole holder/all the joint holders.

## 1. Nominee/Heirs Details

Nominee 1

Name in Full: .....

Short name of the nominee (Insert full name starting with Title i.e. Mr/Ms / Dr, Abbreviate only if over 30 characters)

Title i.e Mr./Mrs.

Relationship with 1<sup>st</sup> Account Holder:.....Percentage (%) of nomination:.....

Address:.....

City:..... Post Code:..... State/Division:..... Country:.....

Telephone:..... Mobile No:..... Fax:..... E-mail:.....

Passport No:..... Issue Place:..... Issue Date:..... Expiry Date:.....

Residency: Resident ☐ Non Resident ☐ Nationality:..... Date of Birth 

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### Guardians Details (if nominee is a Minor)

Name in Full:.....

Short name (Insert full name starting with Title i.e. Mr/Ms / Dr, Abbreviate only if over 30 characters)

Title i.e Mr./Mrs.

Relationship with Nominee/Heirs:..... Date of Birth of Minor..... Maturity Date of Minor.....

Address:.....

City:..... Post Code:..... State/Division:..... Country:.....

Telephone:..... Mobile No:..... Fax:..... E-mail:.....

Passport No:..... Issue Place:..... Issue Date:..... Expiry Date:.....

Residency: Resident ☐ Non Resident ☐ Nationality:..... Date of Birth 

--	--	--	--	--	--	--	--

<b>Nominee 2</b>	
Name in Full:.....	Title i.e Mr./Mrs. ....
Short name of the nominee (Insert full name starting with Title i.e. Mr/Ms / Dr, Abbreviate only if over 30 characters)	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Relationship with 1 <sup>st</sup> Account Holder:.....Percentage (%) of nomination:.....	
Address:.....	
City:..... Post Code:..... State/Division:..... Country:.....	
Telephone:..... Mobile No:..... Fax:..... E-mail:.....	
Passport No:..... Issue Place:..... Issue Date:..... Expiry Date:.....	
Residency: Resident <input type="checkbox"/> Non Resident <input type="checkbox"/> Nationality:..... Date of Birth	<div style="border: 1px solid black; padding: 2px; display: inline-block;">d d m m y y y y</div>
<b>Guardians Details (if nominee is a Minor)</b>	
Name in Full:.....	Title i.e Mr./Mrs. ....
Short name (Insert full name starting with Title i.e. Mr/Ms / Dr, Abbreviate only if over 30 characters)	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Relationship with Nominee/Heirs:..... Date of Birth of Minor:.....Maturity Date of Minor:.....	
Address:.....	
City:..... Post Code:..... State/Division:..... Country:.....	
Telephone:..... Mobile No:..... Fax:..... E-mail:.....	
Passport No:..... Issue Place:..... Issue Date:..... Expiry Date:.....	
Residency: Resident <input type="checkbox"/> Non Resident <input type="checkbox"/> Nationality:..... Date of Birth	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Please paste recent passport size photograph	Please paste recent passport size photograph	Please paste recent passport size photograph	Please paste recent passport size photograph
Nominee/Heir-1	Nominee/Heir-2	Guardian-1	Guardian-2

	Name	Signature
Nominee/Heir-1		
Guardian-1		
Nominee/Heir-2		
Guardian-2		
First Account Holder		
Second Account Holder		

## Power of Attorney (POA) Form

Please complete all details in CAPITAL letter. Please fill all names correctly. All Communications shall be sent to the correspondence address of only the First Named Account Holder as specified in BO Account Opening Form02

Application No.

Date:

Name of CDBL Participant (Up to 99 Characters): **Prime Bank Securities Ltd.**

CDBL participant ID

Account holders BO ID

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 Holders Details

Name in Full

Short Name (Insert full name starting with Title i.e. Mr./Mrs./Ms/Dr, abbreviate only if over 30 characters)

Title i.e. Mr./Mrs.

### 1. Power of Attorney Holder's Contact Details

Address:

City:  Post Code:  State/Division:  Country:  Telephone:

Mobile:  Phone:  Fax:  E-mail:

### 2. Power of Attorney Holder's Passport Details

Passport No:  Issue Plae:  Issue Date:  Expiry Date:

### 3. Other Information of Power of Attorney Holder

Residency: Resident ☐ Non Resident ☐ Nationality:  Date of Birth:

Power of Attorney effective From  To

Remarks (Insert reference of POA document i.e Specific POA or General POA ect.)

### 4. Photograph of Power of Attorney Holder



POA Holder

### Declaration

The rules and regulations of the depository and CDBL Participant 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 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.

Applicants	Name of Applicants/Authorized Signatories	Signature with Date
POA Holder		
First Applicant		
Second Applicant		
3 <sup>rd</sup> Signatory (Non-Individual)		

**Central Depository Bangladesh Limited (CDBL)**  
Depository Account (BO Account) opened with CDBL Participant  
Terms & Conditions – Bye Laws 7.3.3(c)

**Pime Bank Securities Limited, Dhaka**

Dear Sir,

Please open a Depository account (BO Account) in my/our names(s) on the terms and conditions set out below. In consideration of the Prime Bank Securities Limited (the “CDBL Participant”) opening the account providing depository account facilities to me/us, I/we have signed the BO Account Opening Form as a token of acceptance of the terms and conditions set out below.

1. I/we 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.
2. 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 the 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 agree to pay such fees, charges 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 holding securities in and transacting through the said depository account with the CDBL Participant.
4. I/we 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 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 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 authorised remains a minor at the time of my/our death, the legal guardian is authorised to receive/draw the securities held in my/our account.
  - c) The nominee so authorised, 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 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 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 execution 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 statements.
- 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 forward 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 misconducts 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 Ltd Co.	Signature with date
First Applicant		
Second Applicant		
3 <sup>rd</sup> Signatory (Non-Individual)		

## LETTER OF AUTHORIZATION

I/we do hereby authorize Prime Bank Securities Limited to treat my executed sale order of Securities as Pay-in instruction i.e. transfer from my Beneficiary Owner (BO) account no. 12050800..... to Prime Bank Securities Limited ***Clearing BO account.***

We do further authorize Prime Bank Securities Limited to debit all CDBL related fees & charges from my Customer Account No.....

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Signature of the Account Holder(s)

## Foreign Account Tax Compliance Act (“FATCA”)

Account Opening Form Supplement (use additional copies, if required)

This form must be completed by any individual/entity who wishes to open a BO Account/have been maintaining one. Please Complete in BLOCK LETTERS:

Account Number :	<input style="width: 95%;" type="text"/>
Name:	<input style="width: 95%;" type="text"/>
Country of Residence/Registration	<input style="width: 95%;" type="text"/>
Country of Birth/Incorporation	<input style="width: 95%;" type="text"/>

Please check (✓) yes or No for each of the following questions i.e. 10% or more? (For company /non-individuals):

	Yes	No
1. Are you a U.S. Resident?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are You a U. S. Citizen?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you hold a U.S. Permanent Resident Card (Green Card)	<input type="checkbox"/>	<input type="checkbox"/>
4. Is your entity a foreign entity where there is substantial ‘US ownership’ i.e. 10% or more?(For company /non-individuals	<input type="checkbox"/>	<input type="checkbox"/>

I/we hereby confirm the information provided above is true, accurate & complete.

Subject to applicable local laws, I/we hereby consent for Prime Bank Securities Limited (PBSL), Bangladesh or any of its affiliates (including branches)(Collectively “the company”) to share my/our information with domestic/U.S. regulators or tax authorities where necessary to establish my/our tax liabilities in any jurisdiction.

Where required by domestic or U.S. regulators or tax authorities, i/we consent and agree that the company may withhold from my/our account(s), such amounts as may be required according to applicable laws, regulations and directives.

I/we undertake to notify the company within 30 calendar days if there is a change in any information which I/we have provided to the company.

Signature with date	Signature with date	Signature with date
---------------------	---------------------	---------------------

Signature verified by:

(Name, Designation with seal): \_\_\_\_\_

Date:



# KYC Profile Form

**1. Title of Account :**

**2. Applicant's Name :**

**3. Type of BO A/C :**  **4. Account Number:**

**5. Name of A/C Opening Officer:**  Designation

**6. Actual Beneficiary (if applicable):** Name:   
Address:

**7. Profession :** 1. Business ☐ 2. Service ☐ 3. Others ☐   
(Please specify)

a) In Case of Business : Business Name :   
(Business Information) Address :

TIN :

VAT Registration No.:   
(If applicable)

b) In case of service : Employer's Name :   
(Service Information) Address :

c) In case of others : Particulars :   
(Practice Information) Address :

d) In case of NRB/Foreigner: b) Type of Visa ☐ Resident ☐ Work Valid up-to

C) Passport Number  Valid up-to

**8. Source of Fund :**   
(Please mention one or more source)

## 9. Sanction Screening as per BFIU Guideline:

- a. Is the person's name listed in the local sanction list of BFIU circulars or GOB? Yes/ No
- b. Is the person's name listed in the United Nations Security Council Resolution 1267 and its successors, 1373, 1540, 1718, and 1737? Yes/ No

Customer's Signature

Authorized Signature

## Transaction Profile

Account Number	<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title of Account (First Applicant)	<input type="text"/>										
(Second Applicant)	<input type="text"/>										
Type of Account	<input type="checkbox"/> NON-MARGIN <input type="checkbox"/> MARGIN <b>BO Category</b> <input type="checkbox"/> Regular <input type="checkbox"/> Clearing										
Type of BO	<input type="checkbox"/> Individual <input type="checkbox"/> Joint Account <input type="checkbox"/> Company										
BO ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Deposit	Particulars	No. of Transactions (Monthly)	Maximum Transaction amount (each Transaction)	Total amount (Monthly)
	Cash Deposit (inclusive of Online Transactions)			
	Transfer/deposit by Instruments			
	Others (specify).....			
Total Deposit (approx.)				

Withdrawal	Particulars	No. of Transactions (Monthly)	Maximum Transaction amount (each Transaction)	Total amount (Monthly)
	Transfer/payment by Instruments			
	Others (specify).....			
	Total withdrawal (approx.)			

Securities Transaction	Particulars	No. of Transactions (Daily)	Volume of Transactions (Daily)	Volume of Transactions (Monthly)
	Buy			
	Sale			

Sources of Fund	<input type="text"/>
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I/We the undersigned hereby acknowledge that the transactions limit is my/our organization's usual transactions. I/We do hereby acknowledge that if necessary, i/We will change/update the transaction profile.

Signature	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>



Account Referred By:	Signature		
Name of Employee	<input type="text"/>		
Employee ID	<input type="text"/>	Disignation	<input type="text"/>
Date	<input type="text"/>		



**Prime Bank Securities Ltd.**

*A subsidiary of Prime Bank Limited*

**Head Office:**

Peoples Insurance Bhaban (11<sup>th</sup> Floor) 36, Dilkusha, Dhaka, Bangladesh

**Extension of Head Office:**

Peoples Insurance Bhaban (13<sup>th</sup> Floor), 36, Dilkusha, Dhaka, Bangladesh

**Banani Branch Office:**

Tajwar Centre (5<sup>th</sup> Floor), Road-19/A , House-34 Kemal Ataturk Ave, Dhaka

**Contact:**

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