



INDIVIDUAL

(Form to be filled preferably in BLOCK LETTERS)

2. a. Father's / Husband's Name:		ICOP/ARC/POC/I					Jaidan Nam				
	h	Marital status:	S	ngle	2.D. Motner Married		Aaiden Name:	Pas	ident		Non-Resident
3. a. Nationality:		Gender:	3] Mal		Female			Res	sident		Non-Kesident
d. Place of Birth					Female						
4. a. CNIC/ SNIC/NICOP/ARC/POC											
b. Expiry date:		issue date:					Lifetime:				
5. Passport details:^ For a foreigner or a non-resident Pakis	assport Number: ate of Issue:	*				Place of Issue: Date of Expiry:					
5. Date of Birth		ate of issue.					Date of Expiry.				
B. ADDRESS DETAILS OF APPLICA	ANT										
1.(a)Mailing Address: (Address should be different from autho	rized intern	ediary business add	hore a	rcent for a	puplovees of	auth	horized intermedian	,)			
	Ci	City/Town/Village: Province/State: Country:									
(b) Tel. (Off.)*: (c) Tel. (Res.)*:		Mobile**:		(6	e) Email**:						
Specify the proof of address submittee 2. (a)Permanent Address:	d for mailir	g address^:									
City/Town/Village: Pro	vince/State:	Cou	ntry:								
(Mandatory, if different from above or a (b) Tel. (Off.)*: (c) Tel. (Res.)*:		<i>hress,)</i>) Mobile:			(e) Fm	ail ((If any):				
Specify the proof of address submitted for		/				un ((II dily).				
C. OTHER DETAILS	- per limitel										
1. Gross Annual Income Details (please	specify):	Below Rs. 100,0	000		Rs. 250,00)1 -]	Rs. 500,000		Rs. 1,	000,0	001 - Rs. 2,500,000
-		Rs. 100,001 - Rs	s. 250,	000	Rs. 500,00	01 -	Rs. 1,000,000		Abov	e Rs	2,500,001
2. Source of Income:		-									
3. (a) Occupation:	А	griculturist		Business		Τ	Housewife		_		Household
[Please tick (\checkmark) the appropriate		etired Person		Student			Business Executive		_		Industrialist
box] (b) Name of Employer / Business:	P	rofessional		Service			Govt. /Public Sector	or			Others (Specify)
(Include symbol if employer listed com	pany)			(c) Job 7	Title / Designa	ation	n:	()	d) Dep	artm	nent:
(e) Address of Employer / Business:											
D. BANK DETAILS/ E-WALLET											
Bank / E-Wallet Name:											
IBAN / E-Wallet No.											
Bank Name:		IBAN No.:									
E-Wallet Provider Name:					E-Wallet N	um	ber:				
E. DECLARATION I hereby confirm that all the informat	···· 6	I share is too a	1		h		dedee ond helief on	11.	. 1 . 4	1 4	
Thereby communication and the moment therein, immediately. In case any of the I hereby, unconditionally and irrevoc Annexure to this KYC Application For	e above info ably, declar	rmation is found to re, confirm and ack	be un nowle	true or fals dge havin	e or misleadin g read in ful	ng c 1 an	or misrepresenting, I	am a eleva	aware	that ns a	I may be held liable and conditions attac
I hereby acknowledge that I was informed prescribed under CKO Regulations, 20 by the Authorized Intermediary are any	ormed by the ormed	ne Authorized Inter also available on the	media webs	ry at the ite of CKC	time of filing), further, I ha	g th ave i	nis KYC Application no doubt or concern	n Fo that	rm tha the ter	it th	ese terms and cond
Signature of the Applicant Date No ^A (Only applicable if Applicant signature		(dd/mn	n/yyy	y) Si	gnature of the	e Ap	pplicant as per CNIC	/SNI	C/NIC	OP/.	ARC/POC/Passport
FOR OFFICE USE ONLY											
I hereby confirm and acknowledge hav time of filing of this KYC Application I hereby confirm that I have informed Regulations, 2017 and on the website of me are not updated and has difference	Form. I the Custor of CKO, I fu	ner at the time of fil arther confirm and a	ling tł cknow	is KYC A ledge that	pplication Fo I have no dou	orm ubt (regarding the availa or concern that the t	abilit erms	y of the and co	nese ondit	terms and conditior tions shared with Cu
						Seal/Stamp of the Authorized Intermediary					

** For NICOP/ARC/POC/Passport, Email is mandatory and Mobile Number is Optional. Whereas for CNIC/SNIC, Mobile Number is Mandatory and Email is Optional, however, in case of online account opening, both mobile number and email address are mandatory for resident individual Pakistani customers. In case of SNIC where country of stay is not Pakistan, email will be mandatory.

*** IBAN / E-Wallet Number shall be mandatory for all Customers except for those who have provided an undertaking for exclusion from IBAN requirement due to any exception available under applicable laws, rules, regulations etc. or where permitted by CKO for reasons to be recorded.

MANDATORY PART OF KYC APPLICATION FORM FOR INDIVIDUAL AND KYC APPLICATION FORM FOR CORPORATES AS PRESCRIBED UNDER ANNEXURE II AND ANNEXURE III OF THESE REGULATIONS

Terms & Conditions of the KYC Application Form:

1. All terms herein shall, unless expressly stated otherwise, have the same meaning as ascribed to them in the Centralized KYC Organization Regulations.

2. The information provided in KYC application form and/or CRF shall be in addition to and not in derogation of the requirements prescribed under Anti-Money Laundering and Countering Financing of Terrorism Regulations, 2020.

3. All correspondence shall be sent by CKO at the mailing address and/or email address of the Customer, as stated on the KYC Application Form. KYC application form shall be submitted electronically for Online Account Opening of Individual Pakistani Customer by Authorized Intermediary that is a Professional Clearing Member or a Securities Broker.

4. Neither the CKO nor its directors, officers, employees or agents shall be liable for losses, damages, liabilities, costs or expenses suffered or incurred by the Customer as a result of providing its KYC Information to Authorized Intermediaries or the CKO due to any reasons whatsoever including its unauthorized disclosure.

5. The Customer undertakes to indemnify the CKO against any losses, damages, liabilities, costs or expenses suffered or incurred by CKO, including any legal costs and claims by third parties, as a result of any inaccuracy, misrepresentation, misstatement or incorrect details in the information supplied by the Customer or any omission in such information or any other contravention or violation of the Centralized KYC Organization Regulations

6. The Customer agrees that in the event that he does not abide by the timelines prescribed in the Centralized KYC Organization Regulations for submission of information and confirmation to the NCCPL, the NCCPL shall be authorized to take action as prescribed in the Centralized KYC Organization Regulations. The Customer undertakes that it shall hold CKO harmless and that CKO shall not be liable for any losses, damages, liabilities, costs or expenses suffered or incurred by the Customer as a result of such actions.

7. The Customer agrees that CKO may hold, store and process its KYC Information on the KYC Information System and KYC Database in connection with its KYC functions under the Centralized KYC Organization Regulations. The Customer also agrees that CKO may disclose its KYC Information as permitted under the CKO Regulations and such other disclosures as may be reasonably necessary for compliance with any other laws or regulatory requirements.

8. The Customer acknowledges that KYC Information System and KYC Database, including but not limited to all the information contained therein is the legal property of CKO.

9. The Customer agrees that verification against KYC information provided by Customer and Authorized Intermediaries, shall be performed by CKO as per CKO Regulations and such verifications shall include verification of KYC information through linked services such as RAAST, 1-Link, PMD, NADRA, etc. 50

10. The Customer agrees that KYC information provided by Customer at the time of onboarding shall be shared with CDC in pursuance of provisions prescribed by the Securities & Exchange Commission of Pakistan with respect to Central Gateway Portal managed by CDC.

11. The Authorized Intermediaries agree to pay CKO the fees and charges as prescribed by CKO from time to time in respect of its KYC functions.

12. CKO has absolute discretion to amend or supplement any of the terms and conditions at any time and will endeavor to give prior notice of fifteen days wherever feasible for such changes.

13. The Customer agrees and affirms that it shall be bound by and acts in accordance with the provisions of the Centralized KYC Organization Regulations.

14. These terms and conditions shall be governed by the laws of Pakistan. * The terms and conditions will be part of the Online Account Form for Individual Pakistani Customers.

Clients Signature

EClear Services Limited

CDC House, 99 – B, Block – B, S.M.C.H.S., Main Shahra-e-Faisal, Karachi. - 74400 021-111-111-500, 080023275 <u>info@eclear.com.pk</u>

EClear Services Limited

Mezzanine Floor, South Tower, LSE Plaza, 19 – Khayaban-e-Aiwan -e-Iqbal, Lahore. 042-36302771-2 info@eclear.com.pk Authorized Signatory

Syed Faraz Equities (Pvt) Limited Office No. 1012, 10th Floor, ISE Towers, Blue Area, Islamabad. 051 – 2895666-2895777-2895111 info@sfel.pk